

R-9 Proposed Rate Changes

1. All codes that were evaluated have a Medicare benchmark rate.
2. All rates are current rates (Colorado Medicaid July 2024 rates vs. 2024 Medicare rates).
3. The services are listed on four tabs as follows:
<i>i. The "Main" tab includes the following services: Anesthesia; Dialysis; Physician Services - EEG Ambulatory Monitoring; FFS Behavioral Health; Injections and Misc. J-Codes; Laboratory and Pathology; Maternity; Physician Services - Cardiology; Physician Services - Ear, Nose, and Throat; Physician Services - Health Education; Physician Services - Ophthalmology; Physician Services - Other Physician Services; Physician Services - Radiology; Physician Services - Respiratory; Physician Services - Sleep Studies; Physician Services - Vaccines and Immunizations; Physician Services - Vascular; Physician Services - Women's Health and Family Planning; Physician Services - Gastroenterology; Surgery - Cardiovascular System; Surgery - Digestive System; Surgery - Eye & Auditory System; Surgery - Integumentary System; Surgery - Musculoskeletal System; Surgery - Other Surgeries; Surgery - Respiratory System; and Vision.</i>
<i>ii. The "Transportation" tab includes the following services: Emergency Medical Transportation (EMT) and Non-Emergent Medical Transportation (NEMT).</i>
<i>iii. The ASC tab includes all Ambulatory Surgery Center groupers. The benchmark ratio of 80% was taken from the 2023 JBC approval decision.</i>
<i>iv. The "DME & POS" tab includes the following services: Durable Medical Equipment (DME) and Prosthetics, Orthotics, and Disposable Supplies (POS).</i>
4. The Medicare benchmark rates were calculated as follows:
<i>i. All services, except Surgery, on the "Main" tab were benchmarked against non-facility Medicare rates.</i>
<i>ii. For Surgery services on the "Main" tab, it used a proxy Medicare rate, which is a mix of Medicare facility and non-facility rate based on the place of service.</i>
<i>iii. EMT services on the "Transportation" tab were benchmarked against proxy rates calculated using the rural and non-rural Medicare rates based on the member county.</i>
<i>iv. NEMT services on the "Transportation" tab were benchmarked against the averages of the rural and non-rural Medicare rates because this was a rate-only benchmark calculation..</i>
<i>v. On the "DME & POS" tab, the Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.</i>

Service Category	Procedure Code	Procedure Code Description	Modifier 1	July 2024 CO Medicaid Rate	2024 Medicare Non-Facility Rate	2024 Medicare Facility Rate	Medicare Benchmark Rate	Benchmark Ratio	Proposed Rate	Note
Anesthesia	00100	ANESTH SALIVARY GLAND		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00102	ANESTH REPAIR OF CLEFT LIP		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00103	ANESTH BLEPHAROPLASTY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00104	ANESTH ELECTROSHOCK		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00120	ANESTH EAR SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00124	ANESTH EAR EXAM		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00126	ANESTH TYMPANOTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00140	ANESTH PROCEDURES ON EYE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00142	ANESTH LENS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00144	ANESTH CORNEAL TRANSPLANT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00145	ANESTH VITREORETINAL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00147	ANESTH IRIDECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00148	ANESTH EYE EXAM		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00160	ANESTH NOSE/SINUS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00162	ANESTH NOSE/SINUS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00170	ANESTH PROCEDURE ON MOUTH		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00172	ANESTH CLEFT PALATE REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00176	ANESTH PHARYNGEAL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00190	ANESTH FACE/SKULL BONE SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00192	ANESTH FACIAL BONE SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00210	ANESTH CRANIAL SURGERY NOS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00211	ANESTH CRAN SURGERY HEMOTOMA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00212	ANESTH SKULL DRAINAGE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00214	ANESTH SKULL DRAINAGE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00215	ANESTH SKULL REPAIR/FRACT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00216	ANESTH HEAD VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00218	ANESTH SPECIAL HEAD SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00220	ANESTH INTRCRN NERVE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	00300	ANESTH HEAD/NECK/PTRUNK		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00320	ANESTH NECK ORGAN 1YR/>		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00322	ANESTH BIOPSY OF THYROID		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00326	ANESTH LARYNX/TRACH < 1 YR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00350	ANESTH NECK VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00352	ANESTH NECK VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00400	ANESTH SKIN EXT/PER/ATRUNK		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00402	ANESTH SURGERY OF BREAST		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00404	ANESTH SURGERY OF BREAST		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00406	ANESTH SURGERY OF BREAST		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00410	ANESTH CORRECT HEART RHYTHM		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00450	ANESTH SURGERY OF SHOULDER		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00470	ANESTH REMOVAL OF RIB		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00472	ANESTH CHEST WALL REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00474	ANESTH SURGERY OF RIB		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00500	ANESTH ESOPHAGEAL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00520	ANESTH CHEST PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00522	ANESTH CHEST LINING BIOPSY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00524	ANESTH CHEST DRAINAGE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00528	ANES MEDIASCPY & DX THORSCPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00529	ANES MEDSCPY&THORSCPY 1 LUNG		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00530	ANESTH PACEMAKER INSERTION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00532	ANESTH VASCULAR ACCESS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00534	ANESTH CARDIOVERTER/DEFIB		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00537	ANESTH CARDIAC ELECTROPHYS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00539	ANESTH TRACH-BRONCH RECONST		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00540	ANESTH CHEST SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00541	ANESTH ONE LUNG VENTILATION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00542	ANESTHESIA REMOVAL PLEURA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00548	ANESTH TRACHEA BRONCHI SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	00550	ANESTH STERNAL DEBRIDEMENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00560	ANESTH HEART SURGERY W/O PUMP		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00561	ANESTH HEART SURGERY <1 YR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00562	ANESTH HRT SURGERY W/PMP AGE 1+		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00563	ANESTH HEART SURGERY W/ARREST		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00567	ANESTH CABG W/PUMP		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00580	ANESTH HEART/LUNG TRANSPLNT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00600	ANESTH SPINE CORD SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00604	ANESTH SITTING PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00620	ANESTH SPINE CORD SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00625	ANES SPINE TRANTHOR W/O VENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00626	ANES SPINE TRANSTHOR W/VENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00630	ANESTH SPINE CORD SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00635	ANESTH LUMBAR PUNCTURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00640	ANESTH SPINE MANIPULATION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00670	ANESTH SPINE CORD SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00700	ANESTH ABDOMINAL WALL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00702	ANESTH FOR LIVER BIOPSY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00730	ANESTH ABDOMINAL WALL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00731	ANES UPR GI NDSC PX NOS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00732	ANES UPR GI NDSC PX ERCP		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00750	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00752	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00754	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00756	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00770	ANESTH BLOOD VESSEL REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00790	ANESTH SURGERY UPPER ABDOMEN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00792	ANESTH HEMORR/EXCISE LIVER		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00794	ANESTH PANCREAS REMOVAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00796	ANESTH FOR LIVER TRANSPLANT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	00797	ANESTH SURGERY FOR OBESITY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00800	ANESTH ABDOMINAL WALL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00802	ANESTH FAT LAYER REMOVAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00811	ANES LWR INTST NDSC NOS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00812	ANES LWR INTST SCR COLSC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00813	ANES UPR LWR GI NDSC PX		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00820	ANESTH ABDOMINAL WALL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00830	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00832	ANESTH REPAIR OF HERNIA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00834	ANESTH HERNIA REPAIR < 1 YR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00836	ANESTH HERNIA REPAIR PREEMIE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00840	ANESTH SURGERY LOWER ABDOMEN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00842	ANESTH AMNIOCENTESIS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00844	ANESTH PELVIS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00846	ANESTH HYSTERECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00848	ANESTH PELVIC ORGAN SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00851	ANESTH TUBAL LIGATION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00860	ANESTH SURGERY OF ABDOMEN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00862	ANESTH KIDNEY/URETER SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00864	ANESTH REMOVAL OF BLADDER		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00865	ANESTH REMOVAL OF PROSTATE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00866	ANESTH REMOVAL OF ADRENAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00868	ANESTH KIDNEY TRANSPLANT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00870	ANESTH BLADDER STONE SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00873	ANESTH KIDNEY STONE DESTRUCT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00880	ANESTH ABDOMEN VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00902	ANESTH ANORECTAL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00904	ANESTH PERINEAL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00906	ANESTH REMOVAL OF VULVA		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00910	ANESTH BLADDER SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	00912	ANESTH BLADDER TUMOR SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00914	ANESTH REMOVAL OF PROSTATE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00918	ANESTH STONE REMOVAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00920	ANESTH GENITALIA SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00921	ANESTH VASECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00924	ANESTH TESTIS EXPLORATION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00926	ANESTH REMOVAL OF TESTIS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00930	ANESTH TESTIS SUSPENSION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00934	ANESTH PENIS NODES REMOVAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00938	ANESTH INSERT PENIS DEVICE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00940	ANESTH VAGINAL PROCEDURES		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00942	ANESTH SURGERY ON VAG/URETHRAL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00944	ANESTH VAGINAL HYSTERECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00948	ANESTH REPAIR OF CERVIX		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	00952	ANESTH HYSTEROSCOPE/GRAPH		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01112	ANESTH BONE ASPIRATE/BX		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01120	ANESTH PELVIS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01130	ANESTH BODY CAST PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01150	ANESTH PELVIC TUMOR SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01160	ANESTH PELVIS PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01170	ANESTH PELVIS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01173	ANESTH FX REPAIR PELVIS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01200	ANESTH HIP JOINT PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01202	ANESTH ARTHROSCOPY OF HIP		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01210	ANESTH HIP JOINT SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01212	ANESTH HIP DISARTICULATION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01214	ANESTH HIP ARTHROPLASTY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01215	ANESTH REVISE HIP REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01220	ANESTH PROCEDURE ON FEMUR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01230	ANESTH SURGERY OF FEMUR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	01232	ANESTH AMPUTATION OF FEMUR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01234	ANESTH RADICAL FEMUR SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01250	ANESTH UPPER LEG SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01260	ANESTH UPPER LEG VEINS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01270	ANESTH THIGH ARTERIES SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01272	ANESTH FEMORAL ARTERY SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01274	ANESTH FEMORAL EMBOLECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01320	ANESTH KNEE AREA SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01340	ANESTH KNEE AREA PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01360	ANESTH KNEE AREA SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01380	ANESTH KNEE JOINT PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01382	ANESTH DX KNEE ARTHROSCOPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01390	ANESTH KNEE AREA PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01392	ANESTH KNEE AREA SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01400	ANESTH KNEE JOINT SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01402	ANESTH KNEE ARTHROPLASTY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01404	ANESTH AMPUTATION AT KNEE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01420	ANESTH KNEE JOINT CASTING		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01430	ANESTH KNEE VEINS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01440	ANESTH KNEE ARTERIES SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01444	ANESTH KNEE ARTERY REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01462	ANESTH LOWER LEG PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01464	ANESTH ANKLE/FT ARTHROSCOPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01470	ANESTH LOWER LEG SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01472	ANESTH ACHILLES TENDON SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01474	ANESTH LOWER LEG SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01480	ANESTH LOWER LEG BONE SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01482	ANESTH RADICAL LEG SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01484	ANESTH LOWER LEG REVISION		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01486	ANESTH ANKLE REPLACEMENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	01490	ANESTH LOWER LEG CASTING		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01500	ANESTH LEG ARTERIES SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01502	ANESTH LWR LEG EMBOLECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01520	ANESTH LOWER LEG VEIN SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01522	ANESTH LOWER LEG VEIN SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01610	ANESTH SURGERY OF SHOULDER		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01620	ANESTH SHOULDER PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01622	ANES DX SHOULDER ARTHROSCOPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01630	ANESTH SURGERY OF SHOULDER		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01634	ANESTH SHOULDER JOINT AMPUT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01638	ANESTH SHOULDER REPLACEMENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01650	ANESTH SHOULDER ARTERY SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01652	ANESTH SHOULDER VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01654	ANESTH SHOULDER VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01656	ANESTH ARM-LEG VESSEL SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01710	ANESTH ELBOW AREA SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01712	ANESTH UPPR ARM TENDON SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01714	ANESTH UPPR ARM TENDON SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01716	ANESTH BICEPS TENDON REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01730	ANESTH UPPR ARM PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01732	ANESTH DX ELBOW ARTHROSCOPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01740	ANESTH UPPER ARM SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01742	ANESTH HUMERUS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01744	ANESTH HUMERUS REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01756	ANESTH RADICAL HUMERUS SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01758	ANESTH HUMERAL LESION SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01760	ANESTH ELBOW REPLACEMENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01770	ANESTH UPPR ARM ARTERY SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01772	ANESTH UPPR ARM EMBOLECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01780	ANESTH UPPER ARM VEIN SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	01782	ANESTH UPPR ARM VEIN REPAIR		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01810	ANESTH LOWER ARM SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01820	ANESTH LOWER ARM PROCEDURE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01829	ANESTH DX WRIST ARTHROSCOPY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01830	ANESTH LOWER ARM SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01840	ANESTH LWR ARM ARTERY SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01842	ANESTH LWR ARM EMBOLECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01844	ANESTH VASCULAR SHUNT SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01850	ANESTH LOWER ARM VEIN SURGERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01860	ANESTH LOWER ARM CASTING		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01916	ANESTH DX ARTERIOGRAPHY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01920	ANESTH CATHETERIZE HEART		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01922	ANESTH CAT OR MRI SCAN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01924	ANES THER INTERVEN RAD ARTRL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01925	ANES THER INTERVEN RAD CARD		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01926	ANES TX INTERV RAD HRT/CRAN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01930	ANES THER INTERVEN RAD VEIN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01931	ANES THER INTERVEN RAD TIPS		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01932	ANES TX INTERV RAD TH VEIN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01933	ANES TX INTERV RAD CRAN VEIN		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01935	ANESTH PERC IMG DX SP PROC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01936	ANESTH PERC IMG TX SP PROC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01937	ANES DRG/ASPIR CRV/THRC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01938	ANES DRG/ASPIR LMBR/SAC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01939	ANES NULYT AGT CRV/THRC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01940	ANES NULYT AGT LMBR/SAC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01941	ANES NEUROMD/NTRVRT CRV/THRC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01942	ANES NEUROMD/NTRVRT LMBR/SAC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01951	ANESTH BURN LESS 4 PERCENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01952	ANESTH BURN 4-9 PERCENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate

Anesthesia	01953	ANESTH BURN EACH 9 PERCENT		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01958	ANESTH ANTEPARTUM MANIPUL		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01960	ANESTH VAGINAL DELIVERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01961	ANESTH CS DELIVERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01962	ANESTH EMER HYSTERECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01963	ANESTH CS HYSTERECTOMY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01965	ANESTH INC/MISSED AB PROC		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01967	ANESTH/ANALG VAG DELIVERY		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01968	ANES/ANALG CS DELIVER ADD-ON		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01991	ANESTH NERVE BLOCK/INJ		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Anesthesia	01992	ANESTH N BLOCK/INJ PRONE		\$21.11	\$20.85	\$20.85	\$20.85	101.25%	\$19.81	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90935	Hemodialysis one evaluation		\$68.48	\$70.71	\$70.71	\$70.71	96.84%	\$67.18	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90937	Hemodialysis repeated eval		\$112.35	\$101.72	\$101.72	\$101.72	110.45%	\$96.63	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90945	Dialysis one evaluation		\$70.52	\$85.94	\$85.94	\$85.94	82.06%	\$70.52	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90947	Dialysis repeated eval		\$112.27	\$121.76	\$121.76	\$121.76	92.21%	\$112.27	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90954	Esrd serv 4 vsts p mo 2-11		\$826.84	\$1,002.44	\$1,002.44	\$1,002.44	82.48%	\$826.84	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90958	Esrd srv 2-3 vsts p mo 12-19		\$411.77	\$500.72	\$500.72	\$500.72	82.24%	\$411.77	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90959	Esrd serv 1 vst p mo 12-19		\$267.79	\$327.02	\$327.02	\$327.02	81.89%	\$267.79	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90960	Esrd srv 4 visits p mo 20+		\$291.03	\$354.82	\$354.82	\$354.82	82.02%	\$291.03	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90961	Esrd srv 2-3 vsts p mo 20+		\$242.19	\$294.82	\$294.82	\$294.82	82.15%	\$242.19	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90962	Esrd serv 1 visit p mo 20+		\$167.07	\$204.01	\$204.01	\$204.01	81.89%	\$167.07	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90963	Esrd home pt serv p mo <2yrs		\$499.42	\$607.03	\$607.03	\$607.03	82.27%	\$499.42	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90964	Esrd home pt serv p mo 2-11		\$428.67	\$520.53	\$520.53	\$520.53	82.35%	\$428.67	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90965	Esrd home pt serv p mo 12-19		\$410.77	\$499.77	\$499.77	\$499.77	82.19%	\$410.77	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90966	Esrd home pt serv p mo 20+		\$241.90	\$294.82	\$294.82	\$294.82	82.05%	\$241.90	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90967	Esrd svc pr day pt <2		\$15.90	\$17.55	\$17.55	\$17.55	90.59%	\$15.90	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90968	Esrd svc pr day pt 2-11		\$14.25	\$17.22	\$17.22	\$17.22	82.77%	\$14.25	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90969	Esrd svc pr day pt 12-19		\$13.97	\$16.88	\$16.88	\$16.88	82.76%	\$13.97	The Medicare benchmark rate is the Medicare non-facility rate
Dialysis	90970	Esrd svc pr day pt 20+		\$7.83	\$9.47	\$9.47	\$9.47	82.69%	\$7.83	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90791	Psych diagnostic evaluation		\$159.67	\$174.71	\$148.77	\$174.71	91.39%	\$159.67	The Medicare benchmark rate is the Medicare non-facility rate

FFS Behavioral Health	90792	Psych diag eval w/med srvc		\$178.40	\$196.49	\$170.55	\$196.49	90.79%	\$178.40	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90832	Psytx w pt 30 minutes		\$68.76	\$79.33	\$68.81	\$79.33	86.68%	\$68.76	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90833	Psytx w pt w e/m 30 min		\$62.93	\$72.83	\$64.42	\$72.83	86.40%	\$62.93	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90834	Psytx w pt 45 minutes		\$91.09	\$104.69	\$91.02	\$104.69	87.01%	\$91.09	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90836	Psytx w pt w e/m 45 min		\$79.63	\$92.11	\$81.59	\$92.11	86.45%	\$79.63	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90837	Psytx w pt 60 minutes		\$134.51	\$154.31	\$134.33	\$154.31	87.17%	\$134.51	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90838	Psytx w pt w e/m 60 min		\$105.41	\$122.14	\$108.11	\$122.14	86.31%	\$105.41	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90839	Psytx crisis initial 60 min		\$128.01	\$148.56	\$129.98	\$148.56	86.17%	\$128.01	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90840	Psytx crisis ea addl 30 min		\$60.69	\$73.46	\$65.05	\$73.46	82.62%	\$60.69	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90846	Family psytx w/o pt 50 min		\$87.01	\$98.42	\$98.06	\$98.42	88.41%	\$87.01	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90847	Family psytx w/pt 50 min		\$90.09	\$103.16	\$102.46	\$103.16	87.33%	\$90.09	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90849	Multiple family group psytx		\$31.44	\$38.53	\$29.77	\$38.53	81.60%	\$31.44	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	90853	Group psychotherapy		\$24.36	\$28.01	\$24.16	\$28.01	86.96%	\$24.36	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96105	Assessment of aphasia		\$88.32	\$97.80	\$97.80	\$97.80	90.31%	\$88.32	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96112	Devel tst phys/qhp 1st hr		\$111.72	\$125.43	\$124.38	\$125.43	89.07%	\$111.72	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96113	Devel tst phys/qhp ea addl		\$49.53	\$60.83	\$56.97	\$60.83	81.43%	\$49.53	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96116	Nubhvl xm phys/qhp 1st hr		\$98.46	\$93.35	\$79.68	\$93.35	105.47%	\$88.69	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96121	Nubhvl xm phy/qhp ea addl hr		\$78.29	\$76.00	\$66.19	\$76.00	103.01%	\$72.20	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96125	Cognitive test by hc pro		\$95.38	\$104.61	\$104.61	\$104.61	91.18%	\$95.38	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96130	Psycl tst eval phys/qhp 1st		\$132.41	\$121.45	\$109.18	\$121.45	109.03%	\$115.38	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96131	Psycl tst eval phys/qhp ea		\$104.87	\$86.77	\$75.55	\$86.77	120.86%	\$82.43	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96132	Nrpsyc tst eval phys/qhp 1st		\$134.51	\$130.44	\$105.55	\$130.44	103.12%	\$123.92	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96133	Nrpsyc tst eval phys/qhp ea		\$102.58	\$99.04	\$75.90	\$99.04	103.58%	\$94.09	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96136	Psycl/nrpsyc tst phy/qhp 1st		\$68.10	\$42.84	\$23.21	\$42.84	158.96%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96137	Psycl/nrpsyc tst phy/qhp ea		\$49.84	\$38.84	\$17.81	\$38.84	128.31%	\$36.90	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96138	Psycl/nrpsyc tech 1st		\$32.41	\$36.03	\$36.03	\$36.03	89.96%	\$32.41	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96139	Psycl/nrpsyc tst tech ea		\$19.25	\$37.08	\$37.08	\$37.08	51.92%	\$19.25	The Medicare benchmark rate is the Medicare non-facility rate
FFS Behavioral Health	96146	Psycl/nrpsyc tst auto result		\$9.82	\$2.38	\$2.38	\$2.38	412.88%	\$2.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80047	Metabolic panel ionized ca		\$13.73	\$13.73	\$13.73	\$13.73	100.00%	\$13.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80048	Metabolic panel total ca		\$8.46	\$8.46	\$8.46	\$8.46	100.00%	\$8.04	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	80051	Electrolyte panel		\$7.01	\$7.01	\$7.01	\$7.01	100.00%	\$6.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80053	Comprehen metabolic panel		\$10.56	\$10.56	\$10.56	\$10.56	100.00%	\$10.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80055	Obstetric panel		\$47.81	\$47.81	\$47.81	\$47.81	100.00%	\$45.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80061	Lipid panel		\$13.39	\$13.39	\$13.39	\$13.39	100.00%	\$12.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80069	Renal function panel		\$8.68	\$8.68	\$8.68	\$8.68	100.00%	\$8.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80074	Acute hepatitis panel		\$47.63	\$47.63	\$47.63	\$47.63	100.00%	\$45.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80076	Hepatic function panel		\$8.17	\$8.17	\$8.17	\$8.17	100.00%	\$7.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80081	Obstetric panel		\$74.86	\$74.86	\$74.86	\$74.86	100.00%	\$71.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80145	Drug assay adalimumab		\$38.57	\$38.57	\$38.57	\$38.57	100.00%	\$36.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80150	Assay of amikacin		\$15.08	\$15.08	\$15.08	\$15.08	100.00%	\$14.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80155	Drug assay caffeine		\$38.57	\$38.57	\$38.57	\$38.57	100.00%	\$36.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80156	Assay carbamazepine total		\$14.57	\$14.57	\$14.57	\$14.57	100.00%	\$13.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80157	Assay carbamazepine free		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80158	Drug assay cyclosporine		\$18.05	\$18.05	\$18.05	\$18.05	100.00%	\$17.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80159	Drug assay clozapine		\$20.15	\$20.15	\$20.15	\$20.15	100.00%	\$19.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80162	Assay of digoxin total		\$13.28	\$13.28	\$13.28	\$13.28	100.00%	\$12.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80164	Assay dipropylacetic acid tot		\$13.54	\$13.54	\$13.54	\$13.54	100.00%	\$12.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80165	Dipropylacetic acid free		\$13.54	\$13.54	\$13.54	\$13.54	100.00%	\$12.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80168	Assay of ethosuximide		\$16.34	\$16.34	\$16.34	\$16.34	100.00%	\$15.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80169	Drug assay everolimus		\$13.73	\$13.73	\$13.73	\$13.73	100.00%	\$13.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80170	Assay of gentamicin		\$16.38	\$16.38	\$16.38	\$16.38	100.00%	\$15.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80171	Drug screen quant gabapentin		\$21.67	\$21.67	\$21.67	\$21.67	100.00%	\$20.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80173	Assay of haloperidol		\$15.78	\$15.78	\$15.78	\$15.78	100.00%	\$14.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80175	Drug screen quan lamotrigine		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80177	Drug scrn quan levetiracetam		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80178	Assay of lithium		\$6.61	\$6.61	\$6.61	\$6.61	100.00%	\$6.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80180	Drug scrn quan mycophenolate		\$18.05	\$18.05	\$18.05	\$18.05	100.00%	\$17.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80183	Drug scrn quant oxcarbazepin		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80184	Assay of phenobarbital		\$15.30	\$15.30	\$15.30	\$15.30	100.00%	\$14.54	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80185	Assay of phenytoin total		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	80186	Assay of phenytoin free		\$13.76	\$13.76	\$13.76	\$13.76	100.00%	\$13.07	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80187	Drug assay posaconazole		\$27.11	\$27.11	\$27.11	\$27.11	100.00%	\$25.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80188	Assay of primidone		\$16.59	\$16.59	\$16.59	\$16.59	100.00%	\$15.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80195	Assay of sirolimus		\$13.73	\$13.73	\$13.73	\$13.73	100.00%	\$13.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80197	Assay of tacrolimus		\$13.73	\$13.73	\$13.73	\$13.73	100.00%	\$13.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80198	Assay of theophylline		\$14.14	\$14.14	\$14.14	\$14.14	100.00%	\$13.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80200	Assay of tobramycin		\$16.13	\$16.13	\$16.13	\$16.13	100.00%	\$15.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80201	Assay of topiramate		\$11.92	\$11.92	\$11.92	\$11.92	100.00%	\$11.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80202	Assay of vancomycin		\$13.54	\$13.54	\$13.54	\$13.54	100.00%	\$12.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80203	Drug screen quant zonisamide		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80230	Drug assay infliximab		\$38.57	\$38.57	\$38.57	\$38.57	100.00%	\$36.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80235	Drug assay lacosamide		\$27.11	\$27.11	\$27.11	\$27.11	100.00%	\$25.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80280	Drug assay vedolizumab		\$38.57	\$38.57	\$38.57	\$38.57	100.00%	\$36.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80285	Drug assay voriconazole		\$27.11	\$27.11	\$27.11	\$27.11	100.00%	\$25.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80299	Quantitative assay drug		\$18.64	\$18.64	\$18.64	\$18.64	100.00%	\$17.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80305	Drug test prsmv dir opt obs		\$12.60	\$12.60	\$12.60	\$12.60	100.00%	\$11.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80306	Drug test prsmv instrmnt		\$17.14	\$17.14	\$17.14	\$17.14	100.00%	\$16.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80307	Drug test prsmv chem analyzr		\$50.70	\$62.14	\$62.14	\$62.14	81.59%	\$50.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80400	Acth stimulation panel		\$32.62	\$32.62	\$32.62	\$32.62	100.00%	\$30.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	80406	Acth stimulation panel		\$78.26	\$78.26	\$78.26	\$78.26	100.00%	\$74.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81000	Urinalysis nonauto w/scope		\$4.02	\$4.02	\$4.02	\$4.02	100.00%	\$3.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81001	Urinalysis auto w/scope		\$3.17	\$3.17	\$3.17	\$3.17	100.00%	\$3.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81002	Urinalysis nonauto w/o scope		\$3.48	\$3.48	\$3.48	\$3.48	100.00%	\$3.31	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81003	Urinalysis auto w/o scope		\$2.25	\$2.25	\$2.25	\$2.25	100.00%	\$2.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81005	Urinalysis		\$2.17	\$2.17	\$2.17	\$2.17	100.00%	\$2.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81007	Urine screen for bacteria		\$29.98	\$29.98	\$29.98	\$29.98	100.00%	\$28.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81015	Microscopic exam of urine		\$3.05	\$3.05	\$3.05	\$3.05	100.00%	\$2.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81025	Urine pregnancy test		\$8.61	\$8.61	\$8.61	\$8.61	100.00%	\$8.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81050	Urinalysis volume measure		\$3.64	\$3.64	\$3.64	\$3.64	100.00%	\$3.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81120	ldh1 common variants		\$193.25	\$193.25	\$193.25	\$193.25	100.00%	\$183.59	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	81121	Idh2 common variants		\$295.79	\$295.79	\$295.79	\$295.79	100.00%	\$281.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81162	Brca1&2 gen full seq dup/del		\$1,824.88	\$1,824.88	\$1,824.88	\$1,824.88	100.00%	\$1,733.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81170	Abl1 gene		\$300.00	\$300.00	\$300.00	\$300.00	100.00%	\$285.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81173	Ar gene full gene sequence		\$301.35	\$301.35	\$301.35	\$301.35	100.00%	\$286.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81184	Cacna1a gen detc abnor allele		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81185	Cacna1a gene full gene seq		\$846.27	\$846.27	\$846.27	\$846.27	100.00%	\$803.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81187	Cnbp gene detc abnor allele		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81189	Cstb gene full gene sequence		\$274.83	\$274.83	\$274.83	\$274.83	100.00%	\$261.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81200	Aspa gene		\$47.25	\$47.25	\$47.25	\$47.25	100.00%	\$44.89	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81202	Apc gene known fam variants		\$280.00	\$280.00	\$280.00	\$280.00	100.00%	\$266.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81203	Apc gene dup/delet variants		\$200.00	\$200.00	\$200.00	\$200.00	100.00%	\$190.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81206	Bcr/abl1 gene major bp		\$163.96	\$163.96	\$163.96	\$163.96	100.00%	\$155.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81207	Bcr/abl1 gene minor bp		\$144.84	\$144.84	\$144.84	\$144.84	100.00%	\$137.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81208	Bcr/abl1 gene other bp		\$214.62	\$214.62	\$214.62	\$214.62	100.00%	\$203.89	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81209	Blm gene		\$39.31	\$39.31	\$39.31	\$39.31	100.00%	\$37.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81210	Braf gene		\$175.40	\$175.40	\$175.40	\$175.40	100.00%	\$166.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81212	Brca1&2 185&5385&6174 vrnt		\$440.00	\$440.00	\$440.00	\$440.00	100.00%	\$418.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81218	Cebpa gene full sequence		\$241.90	\$241.90	\$241.90	\$241.90	100.00%	\$229.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81219	Calr gene com variants		\$121.63	\$121.63	\$121.63	\$121.63	100.00%	\$115.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81220	Cftr gene com variants		\$556.60	\$556.60	\$556.60	\$556.60	100.00%	\$528.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81222	Cftr gene dup/delet variants		\$435.07	\$435.07	\$435.07	\$435.07	100.00%	\$413.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81223	Cftr gene full sequence		\$499.00	\$499.00	\$499.00	\$499.00	100.00%	\$474.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81224	Cftr gene intron poly t		\$168.75	\$168.75	\$168.75	\$168.75	100.00%	\$160.31	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81229	Cytog alys chrml abnr snpcgh		\$1,160.00	\$1,160.00	\$1,160.00	\$1,160.00	100.00%	\$1,102.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81234	Dmpk gene detc abnor allele		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81235	Egfr gene com variants		\$324.58	\$324.58	\$324.58	\$324.58	100.00%	\$308.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81236	Ezh2 gene full gene sequence		\$282.88	\$282.88	\$282.88	\$282.88	100.00%	\$268.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81238	F9 full gene sequence		\$600.00	\$600.00	\$600.00	\$600.00	100.00%	\$570.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81240	F2 gene		\$65.69	\$65.69	\$65.69	\$65.69	100.00%	\$62.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81241	F5 gene		\$73.37	\$73.37	\$73.37	\$73.37	100.00%	\$69.70	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	81242	Fancc gene		\$36.62	\$36.62	\$36.62	\$36.62	100.00%	\$34.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81243	Fmr1 gen aly detc abnl allele		\$57.04	\$57.04	\$57.04	\$57.04	100.00%	\$54.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81244	Fmr1 gen alys charac alleles		\$44.89	\$44.89	\$44.89	\$44.89	100.00%	\$42.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81245	Fit3 gene		\$165.51	\$165.51	\$165.51	\$165.51	100.00%	\$157.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81249	G6pd full gene sequence		\$600.00	\$600.00	\$600.00	\$600.00	100.00%	\$570.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81250	G6pc gene		\$58.49	\$58.49	\$58.49	\$58.49	100.00%	\$55.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81251	Gba gene		\$47.25	\$47.25	\$47.25	\$47.25	100.00%	\$44.89	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81252	Gjb2 gene full sequence		\$101.12	\$101.12	\$101.12	\$101.12	100.00%	\$96.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81255	Hexa gene		\$51.45	\$51.45	\$51.45	\$51.45	100.00%	\$48.88	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81256	Hfe gene		\$65.36	\$65.36	\$65.36	\$65.36	100.00%	\$62.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81257	Hba1/hba2 gene		\$102.26	\$102.26	\$102.26	\$102.26	100.00%	\$97.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81259	Hba1/hba2 full gene sequence		\$600.00	\$600.00	\$600.00	\$600.00	100.00%	\$570.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81260	Ikbkap gene		\$39.31	\$39.31	\$39.31	\$39.31	100.00%	\$37.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81261	Igh gene rearrange amp meth		\$197.99	\$197.99	\$197.99	\$197.99	100.00%	\$188.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81264	Igk rearrangeabn clonal pop		\$172.73	\$172.73	\$172.73	\$172.73	100.00%	\$164.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81265	Str markers specimen anal		\$233.07	\$233.07	\$233.07	\$233.07	100.00%	\$221.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81270	Jak2 gene		\$91.66	\$91.66	\$91.66	\$91.66	100.00%	\$87.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81271	Htt gene detc abnor alleles		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81272	Kit gene targeted seq analys		\$329.51	\$329.51	\$329.51	\$329.51	100.00%	\$313.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81273	Kit gene analys d816 variant		\$124.87	\$124.87	\$124.87	\$124.87	100.00%	\$118.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81275	Kras gene variants exon 2		\$193.25	\$193.25	\$193.25	\$193.25	100.00%	\$183.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81276	Kras gene addl variants		\$193.25	\$193.25	\$193.25	\$193.25	100.00%	\$183.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81283	Ifnl3 gene		\$73.37	\$73.37	\$73.37	\$73.37	100.00%	\$69.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81286	Fxn gene full gene sequence		\$274.83	\$274.83	\$274.83	\$274.83	100.00%	\$261.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81290	Mcoln1 gene		\$39.31	\$39.31	\$39.31	\$39.31	100.00%	\$37.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81292	Mlh1 gene full seq		\$675.40	\$675.40	\$675.40	\$675.40	100.00%	\$641.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81294	Mlh1 gene dup/delete variant		\$202.40	\$202.40	\$202.40	\$202.40	100.00%	\$192.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81295	Msh2 gene full seq		\$381.70	\$381.70	\$381.70	\$381.70	100.00%	\$362.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81297	Msh2 gene dup/delete variant		\$213.30	\$213.30	\$213.30	\$213.30	100.00%	\$202.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81298	Msh6 gene full seq		\$641.85	\$641.85	\$641.85	\$641.85	100.00%	\$609.76	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	81300	Msh6 gene dup/delete variant		\$238.00	\$238.00	\$238.00	\$238.00	100.00%	\$226.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81301	Microsatellite instability		\$348.56	\$348.56	\$348.56	\$348.56	100.00%	\$331.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81302	Mecp2 gene full seq		\$527.87	\$527.87	\$527.87	\$527.87	100.00%	\$501.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81304	Mecp2 gene dup/delet variant		\$150.00	\$150.00	\$150.00	\$150.00	100.00%	\$142.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81305	Myd88 gene p.leu265pro vrnt		\$175.40	\$175.40	\$175.40	\$175.40	100.00%	\$166.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81307	Palb2 gene full gene seq		\$552.02	\$676.50	\$676.50	\$676.50	81.60%	\$552.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81311	Nras gene variants exon 2&3		\$295.79	\$295.79	\$295.79	\$295.79	100.00%	\$281.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81314	Pdgfra gene		\$329.51	\$329.51	\$329.51	\$329.51	100.00%	\$313.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81315	Pml/raralpha com breakpoints		\$207.31	\$207.31	\$207.31	\$207.31	100.00%	\$196.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81316	Pml/raralpha 1 breakpoint		\$207.31	\$207.31	\$207.31	\$207.31	100.00%	\$196.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81317	Pms2 gene full seq analysis		\$676.50	\$676.50	\$676.50	\$676.50	100.00%	\$642.68	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81319	Pms2 gene dup/delet variants		\$203.50	\$203.50	\$203.50	\$203.50	100.00%	\$193.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81323	Pten gene dup/delet variant		\$300.00	\$300.00	\$300.00	\$300.00	100.00%	\$285.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81324	Pmp22 gene dup/delet		\$758.36	\$758.36	\$758.36	\$758.36	100.00%	\$720.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81329	Smn1 gene dos/deletion alys		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81330	Smpd1 gene common variants		\$47.00	\$47.00	\$47.00	\$47.00	100.00%	\$44.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81331	Snrpn/ube3a gene		\$51.07	\$51.07	\$51.07	\$51.07	100.00%	\$48.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81332	Serpina1 gene		\$43.65	\$43.65	\$43.65	\$43.65	100.00%	\$41.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81334	Runx1 gene targeted seq alys		\$329.51	\$329.51	\$329.51	\$329.51	100.00%	\$313.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81336	Smn1 gene full gene sequence		\$301.35	\$301.35	\$301.35	\$301.35	100.00%	\$286.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81345	Tert gene targeted seq alys		\$185.20	\$185.20	\$185.20	\$185.20	100.00%	\$175.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81373	Hla i typing 1 locus lr		\$127.43	\$127.43	\$127.43	\$127.43	100.00%	\$121.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81376	Hla ii typing 1 locus lr		\$122.22	\$122.22	\$122.22	\$122.22	100.00%	\$116.11	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81378	Hla i & ii typing hr		\$345.57	\$345.57	\$345.57	\$345.57	100.00%	\$328.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81380	Hla i typing 1 locus hr		\$177.25	\$177.25	\$177.25	\$177.25	100.00%	\$168.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81382	Hla ii typing 1 loc hr		\$123.68	\$123.68	\$123.68	\$123.68	100.00%	\$117.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81400	Mopath procedure level 1		\$63.96	\$63.96	\$63.96	\$63.96	100.00%	\$60.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81401	Mopath procedure level 2		\$137.00	\$137.00	\$137.00	\$137.00	100.00%	\$130.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81402	Mopath procedure level 3		\$150.33	\$150.33	\$150.33	\$150.33	100.00%	\$142.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81403	Mopath procedure level 4		\$185.20	\$185.20	\$185.20	\$185.20	100.00%	\$175.94	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	81404	Mopath procedure level 5		\$274.83	\$274.83	\$274.83	\$274.83	100.00%	\$261.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81405	Mopath procedure level 6		\$301.35	\$301.35	\$301.35	\$301.35	100.00%	\$286.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81406	Mopath procedure level 7		\$282.88	\$282.88	\$282.88	\$282.88	100.00%	\$268.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81407	Mopath procedure level 8		\$846.27	\$846.27	\$846.27	\$846.27	100.00%	\$803.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81412	Ashkenazi jewish assoc dis		\$2,448.56	\$2,448.56	\$2,448.56	\$2,448.56	100.00%	\$2,326.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81413	Car ion chnnlpath inc 10 gns		\$584.90	\$584.90	\$584.90	\$584.90	100.00%	\$555.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81414	Car ion chnnlpath inc 2 gns		\$584.90	\$584.90	\$584.90	\$584.90	100.00%	\$555.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81420	Fetal chrmmoml aneuploidy		\$759.05	\$759.05	\$759.05	\$759.05	100.00%	\$721.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81422	Fetal chrmmoml microdeltj		\$759.05	\$759.05	\$759.05	\$759.05	100.00%	\$721.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81432	Hrdtry brst ca-rlatd dsordrs		\$679.05	\$679.05	\$679.05	\$679.05	100.00%	\$645.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81433	Hrdtry brst ca-rlatd dsordrs		\$438.93	\$438.93	\$438.93	\$438.93	100.00%	\$416.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81437	Heredtry nurondcrn tum dsrdr		\$438.93	\$438.93	\$438.93	\$438.93	100.00%	\$416.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81439	Hrdtry cardmypy gene panel		\$584.90	\$584.90	\$584.90	\$584.90	100.00%	\$555.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81442	Noonan spectrum disorders		\$2,143.60	\$2,143.60	\$2,143.60	\$2,143.60	100.00%	\$2,036.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81443	Genetic tstg severe inh cond		\$2,448.56	\$2,448.56	\$2,448.56	\$2,448.56	100.00%	\$2,326.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81507	Fetal aneuploidy trisom risk		\$795.00	\$795.00	\$795.00	\$795.00	100.00%	\$755.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81518	Onc brst mrna 11 genes		\$3,873.00	\$3,873.00	\$3,873.00	\$3,873.00	100.00%	\$3,679.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81519	Oncology breast mrna		\$3,873.00	\$3,873.00	\$3,873.00	\$3,873.00	100.00%	\$3,679.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81521	Onc breast mrna 70 genes		\$3,873.00	\$3,873.00	\$3,873.00	\$3,873.00	100.00%	\$3,679.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81525	Oncology colon mrna		\$3,116.00	\$3,116.00	\$3,116.00	\$3,116.00	100.00%	\$2,960.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81528	Oncology colorectal scr		\$508.87	\$508.87	\$508.87	\$508.87	100.00%	\$483.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81539	Oncology prostate prob score		\$760.00	\$760.00	\$760.00	\$760.00	100.00%	\$722.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81540	Oncology tum unknown origin		\$3,750.00	\$3,750.00	\$3,750.00	\$3,750.00	100.00%	\$3,562.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81541	Onc prostate mrna 46 genes		\$3,873.00	\$3,873.00	\$3,873.00	\$3,873.00	100.00%	\$3,679.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	81596	Nfct ds chrnc hcv 6 assays		\$72.19	\$72.19	\$72.19	\$72.19	100.00%	\$68.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82010	Acetone assay		\$8.17	\$8.17	\$8.17	\$8.17	100.00%	\$7.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82016	Acylcarnitines qual		\$16.49	\$16.49	\$16.49	\$16.49	100.00%	\$15.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82017	Acylcarnitines quant		\$16.87	\$16.87	\$16.87	\$16.87	100.00%	\$16.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82024	Assay of acth		\$38.62	\$38.62	\$38.62	\$38.62	100.00%	\$36.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82040	Assay of serum albumin		\$4.95	\$4.95	\$4.95	\$4.95	100.00%	\$4.70	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	82042	Other source albumin quan ea		\$7.78	\$7.78	\$7.78	\$7.78	100.00%	\$7.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82043	Ur albumin quantitative		\$5.78	\$5.78	\$5.78	\$5.78	100.00%	\$5.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82044	Ur albumin semiquantitative		\$6.23	\$6.23	\$6.23	\$6.23	100.00%	\$5.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82075	Assay of breath ethanol		\$30.00	\$30.00	\$30.00	\$30.00	100.00%	\$28.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82085	Assay of aldolase		\$9.71	\$9.71	\$9.71	\$9.71	100.00%	\$9.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82088	Assay of aldosterone		\$40.75	\$40.75	\$40.75	\$40.75	100.00%	\$38.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82103	Alpha-1-antitrypsin total		\$13.44	\$13.44	\$13.44	\$13.44	100.00%	\$12.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82104	Alpha-1-antitrypsin pheno		\$14.46	\$14.46	\$14.46	\$14.46	100.00%	\$13.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82105	Alpha-fetoprotein serum		\$16.77	\$16.77	\$16.77	\$16.77	100.00%	\$15.93	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82106	Alpha-fetoprotein amniotic		\$17.00	\$17.00	\$17.00	\$17.00	100.00%	\$16.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82107	Alpha-fetoprotein I3		\$64.41	\$64.41	\$64.41	\$64.41	100.00%	\$61.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82108	Assay of aluminum		\$25.48	\$25.48	\$25.48	\$25.48	100.00%	\$24.21	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82127	Amino acid single qual		\$14.18	\$14.18	\$14.18	\$14.18	100.00%	\$13.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82128	Amino acids mult qual		\$13.87	\$13.87	\$13.87	\$13.87	100.00%	\$13.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82131	Amino acids single quant		\$22.98	\$22.98	\$22.98	\$22.98	100.00%	\$21.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82135	Assay aminolevulinic acid		\$16.45	\$16.45	\$16.45	\$16.45	100.00%	\$15.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82136	Amino acids quant 2-5		\$19.61	\$19.61	\$19.61	\$19.61	100.00%	\$18.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82139	Amino acids quan 6 or more		\$16.87	\$16.87	\$16.87	\$16.87	100.00%	\$16.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82140	Assay of ammonia		\$14.57	\$14.57	\$14.57	\$14.57	100.00%	\$13.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82150	Assay of amylase		\$6.48	\$6.48	\$6.48	\$6.48	100.00%	\$6.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82157	Assay of androstenedione		\$29.28	\$29.28	\$29.28	\$29.28	100.00%	\$27.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82160	Assay of androsterone		\$25.55	\$25.55	\$25.55	\$25.55	100.00%	\$24.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82164	Angiotensin i enzyme test		\$14.60	\$14.60	\$14.60	\$14.60	100.00%	\$13.87	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82172	Assay of apolipoprotein		\$21.09	\$21.09	\$21.09	\$21.09	100.00%	\$20.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82175	Assay of arsenic		\$18.97	\$18.97	\$18.97	\$18.97	100.00%	\$18.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82180	Assay of ascorbic acid		\$9.89	\$9.89	\$9.89	\$9.89	100.00%	\$9.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82232	Assay of beta-2 protein		\$16.18	\$16.18	\$16.18	\$16.18	100.00%	\$15.37	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82239	Bile acids total		\$17.12	\$17.12	\$17.12	\$17.12	100.00%	\$16.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82247	Bilirubin total		\$5.02	\$5.02	\$5.02	\$5.02	100.00%	\$4.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82248	Bilirubin direct		\$5.02	\$5.02	\$5.02	\$5.02	100.00%	\$4.77	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	82261	Assay of biotinidase		\$16.87	\$16.87	\$16.87	\$16.87	100.00%	\$16.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82270	Occult blood feces		\$4.38	\$4.38	\$4.38	\$4.38	100.00%	\$4.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82271	Occult blood other sources		\$5.32	\$5.32	\$5.32	\$5.32	100.00%	\$5.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82272	Occult bld feces 1-3 tests		\$4.23	\$4.23	\$4.23	\$4.23	100.00%	\$4.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82274	Assay test for blood fecal		\$15.92	\$15.92	\$15.92	\$15.92	100.00%	\$15.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82300	Assay of cadmium		\$23.64	\$23.64	\$23.64	\$23.64	100.00%	\$22.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82306	Vitamin d 25 hydroxy		\$29.60	\$29.60	\$29.60	\$29.60	100.00%	\$28.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82308	Assay of calcitonin		\$26.79	\$26.79	\$26.79	\$26.79	100.00%	\$25.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82310	Assay of calcium		\$5.16	\$5.16	\$5.16	\$5.16	100.00%	\$4.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82330	Assay of calcium		\$13.68	\$13.68	\$13.68	\$13.68	100.00%	\$13.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82331	Calcium infusion test		\$13.34	\$13.34	\$13.34	\$13.34	100.00%	\$12.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82340	Assay of calcium in urine		\$6.03	\$6.03	\$6.03	\$6.03	100.00%	\$5.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82355	Calculus analysis qual		\$11.58	\$11.58	\$11.58	\$11.58	100.00%	\$11.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82360	Calculus assay quant		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82365	Calculus spectroscopy		\$12.90	\$12.90	\$12.90	\$12.90	100.00%	\$12.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82373	Assay c-d transfer measure		\$18.06	\$18.06	\$18.06	\$18.06	100.00%	\$17.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82374	Assay blood carbon dioxide		\$4.88	\$4.88	\$4.88	\$4.88	100.00%	\$4.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82375	Assay carboxyhb quant		\$12.32	\$12.32	\$12.32	\$12.32	100.00%	\$11.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82378	Carcinoembryonic antigen		\$18.96	\$18.96	\$18.96	\$18.96	100.00%	\$18.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82379	Assay of carnitine		\$16.87	\$16.87	\$16.87	\$16.87	100.00%	\$16.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82380	Assay of carotene		\$9.22	\$9.22	\$9.22	\$9.22	100.00%	\$8.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82382	Assay urine catecholamines		\$27.30	\$27.30	\$27.30	\$27.30	100.00%	\$25.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82384	Assay three catecholamines		\$25.25	\$25.25	\$25.25	\$25.25	100.00%	\$23.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82390	Assay of ceruloplasmin		\$10.74	\$10.74	\$10.74	\$10.74	100.00%	\$10.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82397	Chemiluminescent assay		\$14.12	\$14.12	\$14.12	\$14.12	100.00%	\$13.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82435	Assay of blood chloride		\$4.60	\$4.60	\$4.60	\$4.60	100.00%	\$4.37	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82436	Assay of urine chloride		\$5.75	\$5.75	\$5.75	\$5.75	100.00%	\$5.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82438	Assay other fluid chlorides		\$5.00	\$5.00	\$5.00	\$5.00	100.00%	\$4.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82441	Test for chlorohydrocarbons		\$6.01	\$6.01	\$6.01	\$6.01	100.00%	\$5.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82465	Assay bld/serum cholesterol		\$4.35	\$4.35	\$4.35	\$4.35	100.00%	\$4.13	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	82480	Assay serum cholinesterase		\$7.87	\$7.87	\$7.87	\$7.87	100.00%	\$7.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82495	Assay of chromium		\$20.28	\$20.28	\$20.28	\$20.28	100.00%	\$19.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82507	Assay of citrate		\$27.80	\$27.80	\$27.80	\$27.80	100.00%	\$26.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82523	Collagen crosslinks		\$18.68	\$18.68	\$18.68	\$18.68	100.00%	\$17.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82525	Assay of copper		\$12.41	\$12.41	\$12.41	\$12.41	100.00%	\$11.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82528	Assay of corticosterone		\$22.52	\$22.52	\$22.52	\$22.52	100.00%	\$21.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82530	Cortisol free		\$16.71	\$16.71	\$16.71	\$16.71	100.00%	\$15.87	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82533	Total cortisol		\$16.30	\$16.30	\$16.30	\$16.30	100.00%	\$15.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82540	Assay of creatine		\$4.64	\$4.64	\$4.64	\$4.64	100.00%	\$4.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82542	Col chromatography qual/quan		\$24.09	\$24.09	\$24.09	\$24.09	100.00%	\$22.89	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82550	Assay of ck (cpk)		\$6.51	\$6.51	\$6.51	\$6.51	100.00%	\$6.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82552	Assay of cpk in blood		\$13.39	\$13.39	\$13.39	\$13.39	100.00%	\$12.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82553	Creatine mb fraction		\$11.55	\$11.55	\$11.55	\$11.55	100.00%	\$10.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82565	Assay of creatinine		\$5.12	\$5.12	\$5.12	\$5.12	100.00%	\$4.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82570	Assay of urine creatinine		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82575	Creatinine clearance test		\$9.46	\$9.46	\$9.46	\$9.46	100.00%	\$8.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82585	Assay of cryofibrinogen		\$14.14	\$14.14	\$14.14	\$14.14	100.00%	\$13.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82595	Assay of cryoglobulin		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82600	Assay of cyanide		\$19.40	\$19.40	\$19.40	\$19.40	100.00%	\$18.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82607	Vitamin b-12		\$15.08	\$15.08	\$15.08	\$15.08	100.00%	\$14.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82608	B-12 binding capacity		\$14.32	\$14.32	\$14.32	\$14.32	100.00%	\$13.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82610	Cystatin c		\$18.52	\$18.52	\$18.52	\$18.52	100.00%	\$17.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82615	Test for urine cystines		\$9.55	\$9.55	\$9.55	\$9.55	100.00%	\$9.07	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82626	Dehydroepiandrosterone		\$25.27	\$25.27	\$25.27	\$25.27	100.00%	\$24.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82627	Dehydroepiandrosterone		\$22.23	\$22.23	\$22.23	\$22.23	100.00%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82633	Desoxycorticosterone		\$30.98	\$30.98	\$30.98	\$30.98	100.00%	\$29.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82634	Deoxycortisol		\$29.28	\$29.28	\$29.28	\$29.28	100.00%	\$27.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82642	Dihydrotestosterone		\$29.28	\$29.28	\$29.28	\$29.28	100.00%	\$27.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82652	Vit d 1 25-dihydroxy		\$38.50	\$38.50	\$38.50	\$38.50	100.00%	\$36.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82656	El-1 fecal qual/semiq		\$11.53	\$11.53	\$11.53	\$11.53	100.00%	\$10.95	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	82657	Enzyme cell activity		\$22.17	\$22.17	\$22.17	\$22.17	100.00%	\$21.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82664	Electrophoretic test		\$61.50	\$61.50	\$61.50	\$61.50	100.00%	\$58.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82668	Assay of erythropoietin		\$18.79	\$18.79	\$18.79	\$18.79	100.00%	\$17.85	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82670	Assay of total estradiol		\$27.94	\$27.94	\$27.94	\$27.94	100.00%	\$26.54	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82671	Assay of estrogens		\$32.30	\$32.30	\$32.30	\$32.30	100.00%	\$30.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82672	Assay of estrogen		\$21.70	\$21.70	\$21.70	\$21.70	100.00%	\$20.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82677	Assay of estriol		\$24.18	\$24.18	\$24.18	\$24.18	100.00%	\$22.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82679	Assay of estrone		\$24.95	\$24.95	\$24.95	\$24.95	100.00%	\$23.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82693	Assay of ethylene glycol		\$14.90	\$14.90	\$14.90	\$14.90	100.00%	\$14.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82705	Fats/lipids feces qual		\$5.10	\$5.10	\$5.10	\$5.10	100.00%	\$4.85	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82710	Fats/lipids feces quant		\$16.80	\$16.80	\$16.80	\$16.80	100.00%	\$15.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82725	Assay of blood fatty acids		\$18.77	\$18.77	\$18.77	\$18.77	100.00%	\$17.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82726	Long chain fatty acids		\$19.75	\$19.75	\$19.75	\$19.75	100.00%	\$18.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82728	Assay of ferritin		\$13.63	\$13.63	\$13.63	\$13.63	100.00%	\$12.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82731	Assay of fetal fibronectin		\$64.41	\$64.41	\$64.41	\$64.41	100.00%	\$61.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82735	Assay of fluoride		\$18.54	\$18.54	\$18.54	\$18.54	100.00%	\$17.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82746	Assay of folic acid serum		\$14.70	\$14.70	\$14.70	\$14.70	100.00%	\$13.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82747	Assay of folic acid rbc		\$17.65	\$17.65	\$17.65	\$17.65	100.00%	\$16.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82776	Galactose transferase test		\$11.74	\$11.74	\$11.74	\$11.74	100.00%	\$11.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82784	Assay iga/igd/igg/igm each		\$9.30	\$9.30	\$9.30	\$9.30	100.00%	\$8.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82785	Assay of ige		\$16.46	\$16.46	\$16.46	\$16.46	100.00%	\$15.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82787	Igg 1 2 3 or 4 each		\$8.02	\$8.02	\$8.02	\$8.02	100.00%	\$7.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82803	Blood gases any combination		\$26.07	\$26.07	\$26.07	\$26.07	100.00%	\$24.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82805	Blood gases w/o2 saturation		\$78.77	\$78.77	\$78.77	\$78.77	100.00%	\$74.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82820	Hemoglobin-oxygen affinity		\$13.34	\$13.34	\$13.34	\$13.34	100.00%	\$12.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82941	Assay of gastrin		\$17.63	\$17.63	\$17.63	\$17.63	100.00%	\$16.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82943	Assay of glucagon		\$14.29	\$14.29	\$14.29	\$14.29	100.00%	\$13.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82945	Glucose other fluid		\$3.93	\$3.93	\$3.93	\$3.93	100.00%	\$3.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82947	Assay glucose blood quant		\$3.93	\$3.93	\$3.93	\$3.93	100.00%	\$3.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82948	Reagent strip/blood glucose		\$5.04	\$5.04	\$5.04	\$5.04	100.00%	\$4.79	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	82950	Glucose test		\$4.75	\$4.75	\$4.75	\$4.75	100.00%	\$4.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82951	Glucose tolerance test (gtt)		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82952	Gtt-added samples		\$3.92	\$3.92	\$3.92	\$3.92	100.00%	\$3.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82955	Assay of g6pd enzyme		\$9.70	\$9.70	\$9.70	\$9.70	100.00%	\$9.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82962	Glucose blood test		\$3.28	\$3.28	\$3.28	\$3.28	100.00%	\$3.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82977	Assay of ggt		\$7.20	\$7.20	\$7.20	\$7.20	100.00%	\$6.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	82985	Assay of glycated protein		\$16.76	\$16.76	\$16.76	\$16.76	100.00%	\$15.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83001	Assay of gonadotropin (fsh)		\$18.58	\$18.58	\$18.58	\$18.58	100.00%	\$17.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83002	Assay of gonadotropin (lh)		\$18.52	\$18.52	\$18.52	\$18.52	100.00%	\$17.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83003	Assay growth hormone (hgh)		\$16.67	\$16.67	\$16.67	\$16.67	100.00%	\$15.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83010	Assay of haptoglobin quant		\$12.58	\$12.58	\$12.58	\$12.58	100.00%	\$11.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83013	H pylori (c-13) breath		\$67.36	\$67.36	\$67.36	\$67.36	100.00%	\$63.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83014	H pylori drug admin		\$7.86	\$7.86	\$7.86	\$7.86	100.00%	\$7.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83018	Heavy metal quant each nes		\$21.96	\$21.96	\$21.96	\$21.96	100.00%	\$20.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83020	Hemoglobin electrophoresis	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83020	Hemoglobin electrophoresis		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83021	Hemoglobin chromatography		\$18.06	\$18.06	\$18.06	\$18.06	100.00%	\$17.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83036	Hemoglobin glycosylated a1c		\$9.71	\$9.71	\$9.71	\$9.71	100.00%	\$9.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83037	Hb glycosylated a1c home dev		\$9.71	\$9.71	\$9.71	\$9.71	100.00%	\$9.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83050	Hgb methemoglobin quan		\$8.20	\$8.20	\$8.20	\$8.20	100.00%	\$7.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83051	Hemoglobin plasma		\$7.31	\$7.31	\$7.31	\$7.31	100.00%	\$6.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83065	Hemoglobin thermolabile		\$9.00	\$9.00	\$9.00	\$9.00	100.00%	\$8.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83068	Hemoglobin unstable screen		\$9.47	\$9.47	\$9.47	\$9.47	100.00%	\$9.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83069	Hemoglobin urine		\$3.95	\$3.95	\$3.95	\$3.95	100.00%	\$3.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83070	Assay of hemosiderin qual		\$4.75	\$4.75	\$4.75	\$4.75	100.00%	\$4.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83080	Assay of b hexosaminidase ea		\$16.87	\$16.87	\$16.87	\$16.87	100.00%	\$16.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83088	Assay of histamine		\$29.53	\$29.53	\$29.53	\$29.53	100.00%	\$28.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83090	Assay of homocysteine		\$17.92	\$17.92	\$17.92	\$17.92	100.00%	\$17.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83150	Assay of homovanillic acid		\$22.41	\$22.41	\$22.41	\$22.41	100.00%	\$21.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83491	Asy hydroxycorticosteroids17		\$17.90	\$17.90	\$17.90	\$17.90	100.00%	\$17.01	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	83497	Assay of 5-hiaa		\$12.90	\$12.90	\$12.90	\$12.90	100.00%	\$12.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83498	Asy hydroxyprogesterone 17-d		\$27.17	\$27.17	\$27.17	\$27.17	100.00%	\$25.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83516	Immunoassay nonantibody		\$11.53	\$11.53	\$11.53	\$11.53	100.00%	\$10.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83518	Immunoassay dipstick		\$9.64	\$9.64	\$9.64	\$9.64	100.00%	\$9.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83519	Ria nonantibody		\$18.40	\$18.40	\$18.40	\$18.40	100.00%	\$17.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83520	Immunoassay quant nos nonab		\$17.27	\$17.27	\$17.27	\$17.27	100.00%	\$16.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83525	Assay of insulin		\$11.43	\$11.43	\$11.43	\$11.43	100.00%	\$10.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83527	Assay of insulin		\$12.95	\$12.95	\$12.95	\$12.95	100.00%	\$12.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83540	Assay of iron		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83550	Iron binding test		\$8.74	\$8.74	\$8.74	\$8.74	100.00%	\$8.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83586	Assay 17- ketosteroids		\$12.80	\$12.80	\$12.80	\$12.80	100.00%	\$12.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83605	Assay of lactic acid		\$11.57	\$11.57	\$11.57	\$11.57	100.00%	\$10.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83615	Lactate (ld) (ldh) enzyme		\$6.04	\$6.04	\$6.04	\$6.04	100.00%	\$5.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83625	Assay of ldh enzymes		\$12.79	\$12.79	\$12.79	\$12.79	100.00%	\$12.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83630	Lactoferrin fecal (qual)		\$19.70	\$19.70	\$19.70	\$19.70	100.00%	\$18.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83631	Lactoferrin fecal (quant)		\$19.63	\$19.63	\$19.63	\$19.63	100.00%	\$18.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83655	Assay of lead		\$12.11	\$12.11	\$12.11	\$12.11	100.00%	\$11.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83690	Assay of lipase		\$6.89	\$6.89	\$6.89	\$6.89	100.00%	\$6.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83695	Assay of lipoprotein(a)		\$14.32	\$14.32	\$14.32	\$14.32	100.00%	\$13.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83698	Assay lipoprotein pla2		\$46.31	\$46.31	\$46.31	\$46.31	100.00%	\$43.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83700	Lipopro bld electrophoretic		\$11.26	\$11.26	\$11.26	\$11.26	100.00%	\$10.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83701	Lipoprotein bld hr fraction		\$33.86	\$33.86	\$33.86	\$33.86	100.00%	\$32.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83704	Lipoprotein bld quan part		\$34.19	\$34.19	\$34.19	\$34.19	100.00%	\$32.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83718	Assay of lipoprotein		\$8.19	\$8.19	\$8.19	\$8.19	100.00%	\$7.78	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83721	Assay of blood lipoprotein		\$10.50	\$10.50	\$10.50	\$10.50	100.00%	\$9.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83727	Assay of lrh hormone		\$17.19	\$17.19	\$17.19	\$17.19	100.00%	\$16.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83735	Assay of magnesium		\$6.70	\$6.70	\$6.70	\$6.70	100.00%	\$6.37	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83785	Assay of manganese		\$26.65	\$26.65	\$26.65	\$26.65	100.00%	\$25.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83789	Mass spectrometry qual/quan		\$24.11	\$24.11	\$24.11	\$24.11	100.00%	\$22.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83825	Assay of mercury		\$16.26	\$16.26	\$16.26	\$16.26	100.00%	\$15.45	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	83835	Assay of metanephrines		\$16.94	\$16.94	\$16.94	\$16.94	100.00%	\$16.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83861	Microfluid analy tears		\$22.48	\$22.48	\$22.48	\$22.48	100.00%	\$21.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83872	Assay synovial fluid mucin		\$5.86	\$5.86	\$5.86	\$5.86	100.00%	\$5.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83873	Assay of csf protein		\$17.20	\$17.20	\$17.20	\$17.20	100.00%	\$16.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83874	Assay of myoglobin		\$12.92	\$12.92	\$12.92	\$12.92	100.00%	\$12.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83876	Assay myeloperoxidase		\$50.86	\$50.86	\$50.86	\$50.86	100.00%	\$48.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83880	Assay of natriuretic peptide		\$39.26	\$39.26	\$39.26	\$39.26	100.00%	\$37.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83883	Assay nephelometry not spec		\$13.60	\$13.60	\$13.60	\$13.60	100.00%	\$12.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83885	Assay of nickel		\$24.51	\$24.51	\$24.51	\$24.51	100.00%	\$23.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83915	Assay of nucleotidase		\$11.15	\$11.15	\$11.15	\$11.15	100.00%	\$10.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83916	Oligoclonal bands		\$27.39	\$27.39	\$27.39	\$27.39	100.00%	\$26.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83918	Organic acids total quant		\$23.60	\$23.60	\$23.60	\$23.60	100.00%	\$22.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83919	Organic acids qual each		\$16.45	\$16.45	\$16.45	\$16.45	100.00%	\$15.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83921	Organic acid single quant		\$21.21	\$21.21	\$21.21	\$21.21	100.00%	\$20.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83930	Assay of blood osmolality		\$6.61	\$6.61	\$6.61	\$6.61	100.00%	\$6.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83935	Assay of urine osmolality		\$6.82	\$6.82	\$6.82	\$6.82	100.00%	\$6.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83937	Assay of osteocalcin		\$29.85	\$29.85	\$29.85	\$29.85	100.00%	\$28.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83945	Assay of oxalate		\$14.45	\$14.45	\$14.45	\$14.45	100.00%	\$13.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83970	Assay of parathormone		\$41.28	\$41.28	\$41.28	\$41.28	100.00%	\$39.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83986	Assay ph body fluid nos		\$3.58	\$3.58	\$3.58	\$3.58	100.00%	\$3.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	83993	Assay for calprotectin fecal		\$19.63	\$19.63	\$19.63	\$19.63	100.00%	\$18.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84030	Assay of blood pku		\$5.50	\$5.50	\$5.50	\$5.50	100.00%	\$5.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84066	Assay prostate phosphatase		\$9.66	\$9.66	\$9.66	\$9.66	100.00%	\$9.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84075	Assay alkaline phosphatase		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84080	Assay alkaline phosphatases		\$14.78	\$14.78	\$14.78	\$14.78	100.00%	\$14.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84100	Assay of phosphorus		\$4.74	\$4.74	\$4.74	\$4.74	100.00%	\$4.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84105	Assay of urine phosphorus		\$5.78	\$5.78	\$5.78	\$5.78	100.00%	\$5.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84110	Assay of porphobilinogen		\$8.44	\$8.44	\$8.44	\$8.44	100.00%	\$8.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84112	Eval amniotic fluid protein		\$98.11	\$98.11	\$98.11	\$98.11	100.00%	\$93.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84120	Assay of urine porphyrins		\$14.71	\$14.71	\$14.71	\$14.71	100.00%	\$13.97	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	84126	Assay of feces porphyrins		\$39.11	\$39.11	\$39.11	\$39.11	100.00%	\$37.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84132	Assay of serum potassium		\$4.76	\$4.76	\$4.76	\$4.76	100.00%	\$4.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84133	Assay of urine potassium		\$4.73	\$4.73	\$4.73	\$4.73	100.00%	\$4.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84134	Assay of prealbumin		\$14.59	\$14.59	\$14.59	\$14.59	100.00%	\$13.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84140	Assay of pregnenolone		\$20.67	\$20.67	\$20.67	\$20.67	100.00%	\$19.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84143	Assay of 17-hydroxypregнено		\$22.81	\$22.81	\$22.81	\$22.81	100.00%	\$21.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84144	Assay of progesterone		\$20.86	\$20.86	\$20.86	\$20.86	100.00%	\$19.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84145	Procalcitonin (pct)		\$27.22	\$27.22	\$27.22	\$27.22	100.00%	\$25.86	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84146	Assay of prolactin		\$19.38	\$19.38	\$19.38	\$19.38	100.00%	\$18.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84152	Assay of psa complexed		\$18.39	\$18.39	\$18.39	\$18.39	100.00%	\$17.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84153	Assay of psa total		\$18.39	\$18.39	\$18.39	\$18.39	100.00%	\$17.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84154	Assay of psa free		\$18.39	\$18.39	\$18.39	\$18.39	100.00%	\$17.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84155	Assay of protein serum		\$3.67	\$3.67	\$3.67	\$3.67	100.00%	\$3.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84156	Assay of protein urine		\$3.67	\$3.67	\$3.67	\$3.67	100.00%	\$3.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84157	Assay of protein other		\$4.00	\$4.00	\$4.00	\$4.00	100.00%	\$3.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84160	Assay of protein any source		\$5.61	\$5.61	\$5.61	\$5.61	100.00%	\$5.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84163	Pappa serum		\$15.05	\$15.05	\$15.05	\$15.05	100.00%	\$14.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84165	Protein e-phoresis serum	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84165	Protein e-phoresis serum		\$10.74	\$10.74	\$10.74	\$10.74	100.00%	\$10.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84166	Protein e-phoresis/urine/csf	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84166	Protein e-phoresis/urine/csf		\$17.83	\$17.83	\$17.83	\$17.83	100.00%	\$16.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84181	Western blot test		\$17.03	\$17.03	\$17.03	\$17.03	100.00%	\$16.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84182	Protein western blot test		\$29.21	\$29.21	\$29.21	\$29.21	100.00%	\$27.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84202	Assay rbc protoporphyrin		\$14.35	\$14.35	\$14.35	\$14.35	100.00%	\$13.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84206	Assay of proinsulin		\$26.69	\$26.69	\$26.69	\$26.69	100.00%	\$25.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84207	Assay of vitamin b-6		\$28.10	\$28.10	\$28.10	\$28.10	100.00%	\$26.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84210	Assay of pyruvate		\$14.48	\$14.48	\$14.48	\$14.48	100.00%	\$13.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84220	Assay of pyruvate kinase		\$9.44	\$9.44	\$9.44	\$9.44	100.00%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84228	Assay of quinine		\$11.63	\$11.63	\$11.63	\$11.63	100.00%	\$11.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84238	Assay nonendocrine receptor		\$36.57	\$36.57	\$36.57	\$36.57	100.00%	\$34.74	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	84244	Assay of renin		\$21.99	\$21.99	\$21.99	\$21.99	100.00%	\$20.89	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84252	Assay of vitamin b-2		\$20.24	\$20.24	\$20.24	\$20.24	100.00%	\$19.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84255	Assay of selenium		\$25.53	\$25.53	\$25.53	\$25.53	100.00%	\$24.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84260	Assay of serotonin		\$30.98	\$30.98	\$30.98	\$30.98	100.00%	\$29.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84270	Assay of sex hormone globul		\$21.73	\$21.73	\$21.73	\$21.73	100.00%	\$20.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84275	Assay of sialic acid		\$13.44	\$13.44	\$13.44	\$13.44	100.00%	\$12.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84295	Assay of serum sodium		\$4.81	\$4.81	\$4.81	\$4.81	100.00%	\$4.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84300	Assay of urine sodium		\$5.06	\$5.06	\$5.06	\$5.06	100.00%	\$4.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84302	Assay of sweat sodium		\$4.86	\$4.86	\$4.86	\$4.86	100.00%	\$4.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84305	Assay of somatomedin		\$21.26	\$21.26	\$21.26	\$21.26	100.00%	\$20.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84307	Assay of somatostatin		\$18.28	\$18.28	\$18.28	\$18.28	100.00%	\$17.37	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84311	Spectrophotometry		\$8.10	\$8.10	\$8.10	\$8.10	100.00%	\$7.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84315	Body fluid specific gravity		\$3.28	\$3.28	\$3.28	\$3.28	100.00%	\$3.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84376	Sugars single qual		\$5.50	\$5.50	\$5.50	\$5.50	100.00%	\$5.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84377	Sugars multiple qual		\$5.50	\$5.50	\$5.50	\$5.50	100.00%	\$5.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84378	Sugars single quant		\$11.53	\$11.53	\$11.53	\$11.53	100.00%	\$10.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84392	Assay of urine sulfate		\$5.49	\$5.49	\$5.49	\$5.49	100.00%	\$5.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84402	Assay of free testosterone		\$25.47	\$25.47	\$25.47	\$25.47	100.00%	\$24.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84403	Assay of total testosterone		\$25.81	\$25.81	\$25.81	\$25.81	100.00%	\$24.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84410	Testosterone bioavailable		\$51.28	\$51.28	\$51.28	\$51.28	100.00%	\$48.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84425	Assay of vitamin b-1		\$21.23	\$21.23	\$21.23	\$21.23	100.00%	\$20.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84431	Thromboxane urine		\$35.11	\$35.11	\$35.11	\$35.11	100.00%	\$33.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84432	Assay of thyroglobulin		\$16.06	\$16.06	\$16.06	\$16.06	100.00%	\$15.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84436	Assay of total thyroxine		\$6.87	\$6.87	\$6.87	\$6.87	100.00%	\$6.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84437	Assay of neonatal thyroxine		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84439	Assay of free thyroxine		\$9.02	\$9.02	\$9.02	\$9.02	100.00%	\$8.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84442	Assay of thyroid activity		\$14.78	\$14.78	\$14.78	\$14.78	100.00%	\$14.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84443	Assay thyroid stim hormone		\$16.80	\$16.80	\$16.80	\$16.80	100.00%	\$15.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84445	Assay of tsi globulin		\$50.86	\$50.86	\$50.86	\$50.86	100.00%	\$48.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84446	Assay of vitamin e		\$14.18	\$14.18	\$14.18	\$14.18	100.00%	\$13.47	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	84449	Assay of transcortin		\$18.00	\$18.00	\$18.00	\$18.00	100.00%	\$17.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84450	Transferase (ast) (sgot)		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84460	Alanine amino (alt) (sgpt)		\$5.30	\$5.30	\$5.30	\$5.30	100.00%	\$5.04	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84466	Assay of transferrin		\$12.76	\$12.76	\$12.76	\$12.76	100.00%	\$12.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84478	Assay of triglycerides		\$5.74	\$5.74	\$5.74	\$5.74	100.00%	\$5.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84479	Assay of thyroid (t3 or t4)		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84480	Assay triiodothyronine (t3)		\$14.18	\$14.18	\$14.18	\$14.18	100.00%	\$13.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84481	Free assay (ft-3)		\$16.94	\$16.94	\$16.94	\$16.94	100.00%	\$16.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84482	T3 reverse		\$15.76	\$15.76	\$15.76	\$15.76	100.00%	\$14.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84484	Assay of troponin quant		\$12.47	\$12.47	\$12.47	\$12.47	100.00%	\$11.85	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84510	Assay of tyrosine		\$10.63	\$10.63	\$10.63	\$10.63	100.00%	\$10.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84520	Assay of urea nitrogen		\$3.95	\$3.95	\$3.95	\$3.95	100.00%	\$3.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84540	Assay of urine/urea-n		\$5.56	\$5.56	\$5.56	\$5.56	100.00%	\$5.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84545	Urea-n clearance test		\$7.20	\$7.20	\$7.20	\$7.20	100.00%	\$6.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84550	Assay of blood/uric acid		\$4.52	\$4.52	\$4.52	\$4.52	100.00%	\$4.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84560	Assay of urine/uric acid		\$5.08	\$5.08	\$5.08	\$5.08	100.00%	\$4.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84585	Assay of urine vma		\$15.50	\$15.50	\$15.50	\$15.50	100.00%	\$14.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84586	Assay of vip		\$35.33	\$35.33	\$35.33	\$35.33	100.00%	\$33.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84588	Assay of vasopressin		\$33.94	\$33.94	\$33.94	\$33.94	100.00%	\$32.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84590	Assay of vitamin a		\$11.61	\$11.61	\$11.61	\$11.61	100.00%	\$11.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84591	Assay of nos vitamin		\$17.06	\$17.06	\$17.06	\$17.06	100.00%	\$16.21	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84597	Assay of vitamin k		\$13.72	\$13.72	\$13.72	\$13.72	100.00%	\$13.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84600	Assay of volatiles		\$17.11	\$17.11	\$17.11	\$17.11	100.00%	\$16.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84630	Assay of zinc		\$11.39	\$11.39	\$11.39	\$11.39	100.00%	\$10.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84681	Assay of c-peptide		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84702	Chorionic gonadotropin test		\$15.05	\$15.05	\$15.05	\$15.05	100.00%	\$14.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84703	Chorionic gonadotropin assay		\$7.52	\$7.52	\$7.52	\$7.52	100.00%	\$7.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	84704	Hcg free betachain test		\$15.29	\$15.29	\$15.29	\$15.29	100.00%	\$14.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85004	Automated diff wbc count		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85007	Bl smear w/diff wbc count		\$3.80	\$3.80	\$3.80	\$3.80	100.00%	\$3.61	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	85013	Spun microhematocrit		\$7.00	\$7.00	\$7.00	\$7.00	100.00%	\$6.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85014	Hematocrit		\$2.37	\$2.37	\$2.37	\$2.37	100.00%	\$2.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85018	Hemoglobin		\$2.37	\$2.37	\$2.37	\$2.37	100.00%	\$2.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85025	Complete cbc w/auto diff wbc		\$7.77	\$7.77	\$7.77	\$7.77	100.00%	\$7.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85027	Complete cbc automated		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85041	Automated rbc count		\$3.02	\$3.02	\$3.02	\$3.02	100.00%	\$2.87	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85045	Automated reticulocyte count		\$3.99	\$3.99	\$3.99	\$3.99	100.00%	\$3.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85046	Reticyte/hgb concentrate		\$5.57	\$5.57	\$5.57	\$5.57	100.00%	\$5.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85048	Automated leukocyte count		\$2.54	\$2.54	\$2.54	\$2.54	100.00%	\$2.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85049	Automated platelet count		\$4.48	\$4.48	\$4.48	\$4.48	100.00%	\$4.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85055	Reticulated platelet assay		\$35.74	\$35.74	\$35.74	\$35.74	100.00%	\$33.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85060	Blood smear interpretation		\$20.09	\$23.64	\$23.64	\$23.64	85.00%	\$20.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85097	Bone marrow interpretation		\$39.77	\$71.12	\$71.12	\$71.12	55.92%	\$39.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85210	Clot factor ii prothrom spec		\$12.98	\$12.98	\$12.98	\$12.98	100.00%	\$12.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85220	Blooc clot factor v test		\$17.65	\$17.65	\$17.65	\$17.65	100.00%	\$16.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85230	Clot factor vii proconvertin		\$17.90	\$17.90	\$17.90	\$17.90	100.00%	\$17.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85240	Clot factor viii ahg 1 stage		\$17.90	\$17.90	\$17.90	\$17.90	100.00%	\$17.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85244	Clot factor viii reldt antgn		\$20.42	\$20.42	\$20.42	\$20.42	100.00%	\$19.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85245	Clot factor viii vw ristoctn		\$22.94	\$22.94	\$22.94	\$22.94	100.00%	\$21.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85246	Clot factor viii vw antigen		\$22.94	\$22.94	\$22.94	\$22.94	100.00%	\$21.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85247	Clot factor viii multimeric		\$22.94	\$22.94	\$22.94	\$22.94	100.00%	\$21.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85250	Clot factor ix ptc/chrstmas		\$19.04	\$19.04	\$19.04	\$19.04	100.00%	\$18.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85260	Clot factor x stuart-power		\$17.90	\$17.90	\$17.90	\$17.90	100.00%	\$17.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85270	Clot factor xi pta		\$17.90	\$17.90	\$17.90	\$17.90	100.00%	\$17.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85280	Clot factor xii hageman		\$19.35	\$19.35	\$19.35	\$19.35	100.00%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85290	Clot factor xiii fibrin stab		\$16.34	\$16.34	\$16.34	\$16.34	100.00%	\$15.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85291	Clot factor xiii fibrin scrn		\$9.11	\$9.11	\$9.11	\$9.11	100.00%	\$8.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85292	Clot factor fletcher fact		\$18.93	\$18.93	\$18.93	\$18.93	100.00%	\$17.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85300	Antithrombin iii activity		\$11.85	\$11.85	\$11.85	\$11.85	100.00%	\$11.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85301	Antithrombin iii antigen		\$10.81	\$10.81	\$10.81	\$10.81	100.00%	\$10.27	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	85302	Clot inhibit prot c antigen		\$12.01	\$12.01	\$12.01	\$12.01	100.00%	\$11.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85303	Clot inhibit prot c activity		\$13.84	\$13.84	\$13.84	\$13.84	100.00%	\$13.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85305	Clot inhibit prot s total		\$11.61	\$11.61	\$11.61	\$11.61	100.00%	\$11.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85306	Clot inhibit prot s free		\$15.32	\$15.32	\$15.32	\$15.32	100.00%	\$14.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85307	Assay activated protein c		\$15.32	\$15.32	\$15.32	\$15.32	100.00%	\$14.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85335	Factor inhibitor test		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85360	Euglobulin lysis		\$8.41	\$8.41	\$8.41	\$8.41	100.00%	\$7.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85362	Fibrin degradation products		\$6.89	\$6.89	\$6.89	\$6.89	100.00%	\$6.55	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85378	Fibrin degrade semiquant		\$9.72	\$9.72	\$9.72	\$9.72	100.00%	\$9.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85379	Fibrin degradation quant		\$10.18	\$10.18	\$10.18	\$10.18	100.00%	\$9.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85384	Fibrinogen activity		\$9.72	\$9.72	\$9.72	\$9.72	100.00%	\$9.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85385	Fibrinogen antigen		\$14.46	\$14.46	\$14.46	\$14.46	100.00%	\$13.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85390	Fibrinolysins screen i&r	26	\$29.70	\$35.88	\$35.88	\$35.88	82.77%	\$29.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85390	Fibrinolysins screen i&r		\$15.48	\$15.48	\$15.48	\$15.48	100.00%	\$14.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85396	Clotting assay whole blood		\$19.46	\$19.27	\$19.27	\$19.27	100.96%	\$18.31	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85397	Clotting funct activity		\$30.86	\$30.86	\$30.86	\$30.86	100.00%	\$29.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85410	Fibrinolytic antiplasmin		\$7.71	\$7.71	\$7.71	\$7.71	100.00%	\$7.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85415	Fibrinolytic plasminogen		\$17.19	\$17.19	\$17.19	\$17.19	100.00%	\$16.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85420	Fibrinolytic plasminogen		\$6.53	\$6.53	\$6.53	\$6.53	100.00%	\$6.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85421	Fibrinolytic plasminogen		\$10.18	\$10.18	\$10.18	\$10.18	100.00%	\$9.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85441	Heinz bodies direct		\$4.20	\$4.20	\$4.20	\$4.20	100.00%	\$3.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85445	Heinz bodies induced		\$6.82	\$6.82	\$6.82	\$6.82	100.00%	\$6.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85460	Hemoglobin fetal		\$7.73	\$7.73	\$7.73	\$7.73	100.00%	\$7.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85520	Heparin assay		\$13.09	\$13.09	\$13.09	\$13.09	100.00%	\$12.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85540	Wbc alkaline phosphatase		\$8.60	\$8.60	\$8.60	\$8.60	100.00%	\$8.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85549	Muramidase		\$18.75	\$18.75	\$18.75	\$18.75	100.00%	\$17.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85555	Rbc osmotic fragility		\$7.47	\$7.47	\$7.47	\$7.47	100.00%	\$7.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85557	Rbc osmotic fragility		\$13.36	\$13.36	\$13.36	\$13.36	100.00%	\$12.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85576	Blood platelet aggregation	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85576	Blood platelet aggregation		\$25.41	\$24.91	\$24.91	\$24.91	102.01%	\$23.66	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	85597	Phospholipid pltlt neutraliz		\$17.98	\$17.98	\$17.98	\$17.98	100.00%	\$17.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85598	Hexagnal phosph pltlt neutr		\$17.98	\$17.98	\$17.98	\$17.98	100.00%	\$17.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85610	Prothrombin time		\$4.29	\$4.29	\$4.29	\$4.29	100.00%	\$4.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85611	Prothrombin test		\$3.94	\$3.94	\$3.94	\$3.94	100.00%	\$3.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85612	Viper venom prothrombin time		\$17.49	\$17.49	\$17.49	\$17.49	100.00%	\$16.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85613	Russell viper venom diluted		\$9.58	\$9.58	\$9.58	\$9.58	100.00%	\$9.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85635	Reptilase test		\$9.85	\$9.85	\$9.85	\$9.85	100.00%	\$9.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85651	Rbc sed rate nonautomated		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85652	Rbc sed rate automated		\$2.70	\$2.70	\$2.70	\$2.70	100.00%	\$2.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85660	Rbc sickle cell test		\$5.51	\$5.51	\$5.51	\$5.51	100.00%	\$5.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85670	Thrombin time plasma		\$5.77	\$5.77	\$5.77	\$5.77	100.00%	\$5.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85705	Thromboplastin inhibition		\$9.63	\$9.63	\$9.63	\$9.63	100.00%	\$9.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85730	Thromboplastin time partial		\$6.01	\$6.01	\$6.01	\$6.01	100.00%	\$5.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85732	Thromboplastin time partial		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	85810	Blood viscosity examination		\$11.67	\$11.67	\$11.67	\$11.67	100.00%	\$11.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86001	Allergen specific ige		\$7.82	\$7.82	\$7.82	\$7.82	100.00%	\$7.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86003	Allg spec ige crude xtrc ea		\$5.22	\$5.22	\$5.22	\$5.22	100.00%	\$4.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86005	Allg spec ige multiallg scr		\$7.97	\$7.97	\$7.97	\$7.97	100.00%	\$7.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86008	Allg spec ige recomb ea		\$17.93	\$17.93	\$17.93	\$17.93	100.00%	\$17.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86021	Wbc antibody identification		\$15.05	\$15.05	\$15.05	\$15.05	100.00%	\$14.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86022	Platelet antibodies		\$18.37	\$18.37	\$18.37	\$18.37	100.00%	\$17.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86023	Immunoglobulin assay		\$12.46	\$12.46	\$12.46	\$12.46	100.00%	\$11.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86038	Antinuclear antibodies		\$12.09	\$12.09	\$12.09	\$12.09	100.00%	\$11.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86039	Antinuclear antibodies (ana)		\$11.16	\$11.16	\$11.16	\$11.16	100.00%	\$10.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86060	Antistreptolysin o titer		\$7.30	\$7.30	\$7.30	\$7.30	100.00%	\$6.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86077	Phys blood bank serv xmatch		\$40.95	\$53.60	\$53.60	\$53.60	76.40%	\$40.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86078	Phys blood bank serv reactj		\$40.95	\$53.60	\$53.60	\$53.60	76.40%	\$40.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86079	Phys blood bank serv authrj		\$40.95	\$53.60	\$53.60	\$53.60	76.40%	\$40.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86140	C-reactive protein		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86141	C-reactive protein hs		\$12.95	\$12.95	\$12.95	\$12.95	100.00%	\$12.30	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	86146	Beta-2 glycoprotein antibody		\$25.45	\$25.45	\$25.45	\$25.45	100.00%	\$24.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86147	Cardiolipin antibody ea ig		\$25.45	\$25.45	\$25.45	\$25.45	100.00%	\$24.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86148	Anti-phospholipid antibody		\$16.07	\$16.07	\$16.07	\$16.07	100.00%	\$15.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86157	Cold agglutinin titer		\$8.06	\$8.06	\$8.06	\$8.06	100.00%	\$7.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86160	Complement antigen		\$12.00	\$12.00	\$12.00	\$12.00	100.00%	\$11.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86161	Complement/function activity		\$12.00	\$12.00	\$12.00	\$12.00	100.00%	\$11.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86162	Complement total (ch50)		\$20.32	\$20.32	\$20.32	\$20.32	100.00%	\$19.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86200	Ccp antibody		\$12.95	\$12.95	\$12.95	\$12.95	100.00%	\$12.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86215	Deoxyribonuclease antibody		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86225	Dna antibody native		\$13.74	\$13.74	\$13.74	\$13.74	100.00%	\$13.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86226	Dna antibody single strand		\$12.11	\$12.11	\$12.11	\$12.11	100.00%	\$11.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86235	Nuclear antigen antibody		\$17.93	\$17.93	\$17.93	\$17.93	100.00%	\$17.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86255	Fluorescent antibody screen		\$12.05	\$12.05	\$12.05	\$12.05	100.00%	\$11.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86256	Fluorescent antibody titer	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86256	Fluorescent antibody titer		\$12.05	\$12.05	\$12.05	\$12.05	100.00%	\$11.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86277	Growth hormone antibody		\$15.74	\$15.74	\$15.74	\$15.74	100.00%	\$14.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86300	Immunoassay tumor ca 15-3		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86301	Immunoassay tumor ca 19-9		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86304	Immunoassay tumor ca 125		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86305	Human epididymis protein 4		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86308	Heterophile antibody screen		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86309	Heterophile antibody titer		\$6.47	\$6.47	\$6.47	\$6.47	100.00%	\$6.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86316	Immunoassay tumor other		\$20.81	\$20.81	\$20.81	\$20.81	100.00%	\$19.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86317	Immunoassay infectious agent		\$14.99	\$14.99	\$14.99	\$14.99	100.00%	\$14.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86318	Ia infectious agent antibody		\$18.09	\$18.09	\$18.09	\$18.09	100.00%	\$17.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86320	Serum immunoelectrophoresis	26	\$14.69	\$17.60	\$17.60	\$17.60	83.48%	\$14.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86325	Other immunoelectrophoresis	26	\$14.69	\$17.60	\$17.60	\$17.60	83.48%	\$14.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86325	Other immunoelectrophoresis		\$23.13	\$23.13	\$23.13	\$23.13	100.00%	\$21.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86328	Ia nfct ab sarscov2 covid19		\$45.28	\$45.28	\$45.28	\$45.28	100.00%	\$43.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86329	Immunodiffusion nes		\$14.05	\$14.05	\$14.05	\$14.05	100.00%	\$13.35	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	86331	Immunodiffusion ouchterlony		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86332	Immune complex assay		\$24.37	\$24.37	\$24.37	\$24.37	100.00%	\$23.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86334	Immunofix e-phoresis serum	26	\$14.69	\$17.60	\$17.60	\$17.60	83.48%	\$14.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86334	Immunofix e-phoresis serum		\$22.79	\$22.34	\$22.34	\$22.34	102.01%	\$21.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86335	Immunifx e-phorsis/urine/csf	26	\$18.18	\$17.60	\$17.60	\$17.60	103.31%	\$16.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86335	Immunifx e-phorsis/urine/csf		\$29.35	\$29.35	\$29.35	\$29.35	100.00%	\$27.88	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86336	Inhibin a		\$15.59	\$15.59	\$15.59	\$15.59	100.00%	\$14.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86337	Insulin antibodies		\$21.41	\$21.41	\$21.41	\$21.41	100.00%	\$20.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86340	Intrinsic factor antibody		\$15.08	\$15.08	\$15.08	\$15.08	100.00%	\$14.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86341	Islet cell antibody		\$23.57	\$23.57	\$23.57	\$23.57	100.00%	\$22.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86343	Leukocyte histamine release		\$12.46	\$12.46	\$12.46	\$12.46	100.00%	\$11.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86352	Cell function assay w/stim		\$135.86	\$135.86	\$135.86	\$135.86	100.00%	\$129.07	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86353	Lymphocyte transformation		\$49.03	\$49.03	\$49.03	\$49.03	100.00%	\$46.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86355	B cells total count		\$37.73	\$37.73	\$37.73	\$37.73	100.00%	\$35.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86356	Mononuclear cell antigen		\$26.78	\$26.78	\$26.78	\$26.78	100.00%	\$25.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86357	Nk cells total count		\$37.73	\$37.73	\$37.73	\$37.73	100.00%	\$35.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86359	T cells total count		\$37.73	\$37.73	\$37.73	\$37.73	100.00%	\$35.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86360	T cell absolute count/ratio		\$46.98	\$46.98	\$46.98	\$46.98	100.00%	\$44.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86361	T cell absolute count		\$26.78	\$26.78	\$26.78	\$26.78	100.00%	\$25.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86376	Microsomal antibody each		\$14.55	\$14.55	\$14.55	\$14.55	100.00%	\$13.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86382	Neutralization test viral		\$16.91	\$16.91	\$16.91	\$16.91	100.00%	\$16.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86403	Particle agglut antbdy scrn		\$11.54	\$11.54	\$11.54	\$11.54	100.00%	\$10.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86430	Rheumatoid factor test qual		\$6.14	\$6.14	\$6.14	\$6.14	100.00%	\$5.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86431	Rheumatoid factor quant		\$5.67	\$5.67	\$5.67	\$5.67	100.00%	\$5.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86480	Tb test cell immun measure		\$61.98	\$61.98	\$61.98	\$61.98	100.00%	\$58.88	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86481	Tb ag response t-cell susp		\$100.00	\$100.00	\$100.00	\$100.00	100.00%	\$95.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86486	Skin test unlisted antign ea		\$5.24	\$6.58	\$6.58	\$6.58	79.58%	\$5.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86510	Histoplasmosis skin test		\$8.03	\$7.99	\$7.99	\$7.99	100.54%	\$7.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86580	Tb intradermal test		\$9.09	\$10.79	\$10.79	\$10.79	84.24%	\$9.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86592	Syphilis test non-trep qual		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	86593	Syphilis test non-trep quant		\$4.40	\$4.40	\$4.40	\$4.40	100.00%	\$4.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86602	Antinomyces antibody		\$10.18	\$10.18	\$10.18	\$10.18	100.00%	\$9.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86603	Adenovirus antibody		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86606	Aspergillus antibody		\$15.05	\$15.05	\$15.05	\$15.05	100.00%	\$14.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86609	Bacterium antibody		\$12.88	\$12.88	\$12.88	\$12.88	100.00%	\$12.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86611	Bartonella antibody		\$10.18	\$10.18	\$10.18	\$10.18	100.00%	\$9.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86612	Blastomyces antibody		\$12.90	\$12.90	\$12.90	\$12.90	100.00%	\$12.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86615	Bordetella antibody		\$13.19	\$13.19	\$13.19	\$13.19	100.00%	\$12.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86617	Lyme disease antibody		\$15.49	\$15.49	\$15.49	\$15.49	100.00%	\$14.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86618	Lyme disease antibody		\$17.03	\$17.03	\$17.03	\$17.03	100.00%	\$16.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86619	Borrelia antibody		\$13.38	\$13.38	\$13.38	\$13.38	100.00%	\$12.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86622	Brucella antibody		\$8.93	\$8.93	\$8.93	\$8.93	100.00%	\$8.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86625	Campylobacter antibody		\$13.12	\$13.12	\$13.12	\$13.12	100.00%	\$12.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86628	Candida antibody		\$12.01	\$12.01	\$12.01	\$12.01	100.00%	\$11.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86631	Chlamydia antibody		\$11.82	\$11.82	\$11.82	\$11.82	100.00%	\$11.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86632	Chlamydia igm antibody		\$12.68	\$12.68	\$12.68	\$12.68	100.00%	\$12.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86635	Coccidioides antibody		\$11.47	\$11.47	\$11.47	\$11.47	100.00%	\$10.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86638	Q fever antibody		\$12.12	\$12.12	\$12.12	\$12.12	100.00%	\$11.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86644	Cmv antibody		\$14.39	\$14.39	\$14.39	\$14.39	100.00%	\$13.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86645	Cmv antibody igm		\$16.85	\$16.85	\$16.85	\$16.85	100.00%	\$16.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86648	Diphtheria antibody		\$15.21	\$15.21	\$15.21	\$15.21	100.00%	\$14.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86658	Enterovirus antibody		\$13.03	\$13.03	\$13.03	\$13.03	100.00%	\$12.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86663	Epstein-barr antibody		\$13.12	\$13.12	\$13.12	\$13.12	100.00%	\$12.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86664	Epstein-barr nuclear antigen		\$15.29	\$15.29	\$15.29	\$15.29	100.00%	\$14.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86665	Epstein-barr capsid vca		\$18.14	\$18.14	\$18.14	\$18.14	100.00%	\$17.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86666	Ehrlichia antibody		\$10.18	\$10.18	\$10.18	\$10.18	100.00%	\$9.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86668	Francisella tularensis		\$14.16	\$14.16	\$14.16	\$14.16	100.00%	\$13.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86671	Fungus nes antibody		\$12.25	\$12.25	\$12.25	\$12.25	100.00%	\$11.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86674	Giardia lamblia antibody		\$14.72	\$14.72	\$14.72	\$14.72	100.00%	\$13.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86677	Helicobacter pylori antibody		\$16.85	\$16.85	\$16.85	\$16.85	100.00%	\$16.01	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	86682	Helminth antibody		\$13.01	\$13.01	\$13.01	\$13.01	100.00%	\$12.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86684	Hemophilus influenzae antibody		\$15.84	\$15.84	\$15.84	\$15.84	100.00%	\$15.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86687	Htlv-i antibody		\$9.09	\$9.09	\$9.09	\$9.09	100.00%	\$8.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86688	Htlv-ii antibody		\$14.00	\$14.00	\$14.00	\$14.00	100.00%	\$13.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86689	Htlv/hiv confirmj antibody		\$19.35	\$19.35	\$19.35	\$19.35	100.00%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86692	Hepatitis delta agent antibody		\$17.16	\$17.16	\$17.16	\$17.16	100.00%	\$16.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86694	Herpes simplex virus antibody		\$14.39	\$14.39	\$14.39	\$14.39	100.00%	\$13.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86695	Herpes simplex type 1 test		\$13.19	\$13.19	\$13.19	\$13.19	100.00%	\$12.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86696	Herpes simplex type 2 test		\$19.35	\$19.35	\$19.35	\$19.35	100.00%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86698	Histoplasma antibody		\$13.79	\$13.79	\$13.79	\$13.79	100.00%	\$13.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86701	Hiv-1 antibody		\$8.89	\$8.89	\$8.89	\$8.89	100.00%	\$8.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86702	Hiv-2 antibody		\$13.52	\$13.52	\$13.52	\$13.52	100.00%	\$12.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86703	Hiv-1/hiv-2 1 result antibody		\$13.71	\$13.71	\$13.71	\$13.71	100.00%	\$13.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86704	Hep b core antibody total		\$12.05	\$12.05	\$12.05	\$12.05	100.00%	\$11.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86705	Hep b core antibody igm		\$11.77	\$11.77	\$11.77	\$11.77	100.00%	\$11.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86706	Hep b surface antibody		\$10.74	\$10.74	\$10.74	\$10.74	100.00%	\$10.20	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86707	Hepatitis be antibody		\$11.57	\$11.57	\$11.57	\$11.57	100.00%	\$10.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86708	Hepatitis a antibody		\$12.39	\$12.39	\$12.39	\$12.39	100.00%	\$11.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86709	Hepatitis a igm antibody		\$11.26	\$11.26	\$11.26	\$11.26	100.00%	\$10.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86710	Influenza virus antibody		\$13.55	\$13.55	\$13.55	\$13.55	100.00%	\$12.87	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86713	Legionella antibody		\$15.30	\$15.30	\$15.30	\$15.30	100.00%	\$14.54	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86717	Leishmania antibody		\$12.25	\$12.25	\$12.25	\$12.25	100.00%	\$11.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86720	Leptospira antibody		\$16.20	\$16.20	\$16.20	\$16.20	100.00%	\$15.39	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86727	Lymph choriomeningitis ab		\$12.87	\$12.87	\$12.87	\$12.87	100.00%	\$12.23	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86735	Mumps antibody		\$13.05	\$13.05	\$13.05	\$13.05	100.00%	\$12.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86738	Mycoplasma antibody		\$13.24	\$13.24	\$13.24	\$13.24	100.00%	\$12.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86741	Neisseria meningitidis		\$13.19	\$13.19	\$13.19	\$13.19	100.00%	\$12.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86747	Parvovirus antibody		\$15.03	\$15.03	\$15.03	\$15.03	100.00%	\$14.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86753	Protozoa antibody nos		\$12.39	\$12.39	\$12.39	\$12.39	100.00%	\$11.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86757	Rickettsia antibody		\$19.35	\$19.35	\$19.35	\$19.35	100.00%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	86762	Rubella antibody		\$14.39	\$14.39	\$14.39	\$14.39	100.00%	\$13.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86765	Rubeola antibody		\$12.88	\$12.88	\$12.88	\$12.88	100.00%	\$12.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86769	Sars-cov-2 covid-19 antibody		\$42.13	\$42.13	\$42.13	\$42.13	100.00%	\$40.02	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86774	Tetanus antibody		\$14.80	\$14.80	\$14.80	\$14.80	100.00%	\$14.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86777	Toxoplasma antibody		\$14.39	\$14.39	\$14.39	\$14.39	100.00%	\$13.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86778	Toxoplasma antibody igm		\$14.41	\$14.41	\$14.41	\$14.41	100.00%	\$13.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86780	Treponema pallidum		\$13.24	\$13.24	\$13.24	\$13.24	100.00%	\$12.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86787	Varicella-zoster antibody		\$12.88	\$12.88	\$12.88	\$12.88	100.00%	\$12.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86788	West nile virus ab igm		\$16.85	\$16.85	\$16.85	\$16.85	100.00%	\$16.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86789	West nile virus antibody		\$14.39	\$14.39	\$14.39	\$14.39	100.00%	\$13.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86790	Virus antibody nos		\$12.88	\$12.88	\$12.88	\$12.88	100.00%	\$12.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86793	Yersinia antibody		\$13.19	\$13.19	\$13.19	\$13.19	100.00%	\$12.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86794	Zika virus igm antibody		\$16.85	\$16.85	\$16.85	\$16.85	100.00%	\$16.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86800	Thyroglobulin antibody		\$15.91	\$15.91	\$15.91	\$15.91	100.00%	\$15.11	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86803	Hepatitis c ab test		\$14.27	\$14.27	\$14.27	\$14.27	100.00%	\$13.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86804	Hep c ab test confirm		\$15.49	\$15.49	\$15.49	\$15.49	100.00%	\$14.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86812	Hla typing a b or c		\$25.81	\$25.81	\$25.81	\$25.81	100.00%	\$24.52	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86832	Hla class i high defin qual		\$323.75	\$323.75	\$323.75	\$323.75	100.00%	\$307.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86833	Hla class ii high defin qual		\$325.80	\$325.80	\$325.80	\$325.80	100.00%	\$309.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86850	Rbc antibody screen		\$9.77	\$9.77	\$9.77	\$9.77	100.00%	\$9.28	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86880	Coombs test direct		\$5.39	\$5.39	\$5.39	\$5.39	100.00%	\$5.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86885	Coombs test indirect qual		\$5.72	\$5.72	\$5.72	\$5.72	100.00%	\$5.43	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86886	Coombs test indirect titer		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86900	Blood typing serologic abo		\$2.99	\$2.99	\$2.99	\$2.99	100.00%	\$2.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86901	Blood typing serologic rh(d)		\$2.99	\$2.99	\$2.99	\$2.99	100.00%	\$2.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86905	Blood typing rbc antigens		\$3.83	\$3.83	\$3.83	\$3.83	100.00%	\$3.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86906	Bld typing serologic rh phnt		\$7.75	\$7.75	\$7.75	\$7.75	100.00%	\$7.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86940	Hemolysins/agglutinins auto		\$8.77	\$8.77	\$8.77	\$8.77	100.00%	\$8.33	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	86941	Hemolysins/agglutinins		\$12.11	\$12.11	\$12.11	\$12.11	100.00%	\$11.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87015	Specimen infect agnt concntj		\$6.81	\$6.68	\$6.68	\$6.68	101.95%	\$6.35	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87040	Blood culture for bacteria		\$10.32	\$10.32	\$10.32	\$10.32	100.00%	\$9.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87045	Feces culture aerobic bact		\$9.44	\$9.44	\$9.44	\$9.44	100.00%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87046	Stool cultur aerobic bact ea		\$9.44	\$9.44	\$9.44	\$9.44	100.00%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87070	Culture othr specimn aerobic		\$8.62	\$8.62	\$8.62	\$8.62	100.00%	\$8.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87071	Culture aerobic quant other		\$9.89	\$9.89	\$9.89	\$9.89	100.00%	\$9.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87075	Cultr bacteria except blood		\$9.47	\$9.47	\$9.47	\$9.47	100.00%	\$9.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87076	Culture anaerobe ident each		\$8.08	\$8.08	\$8.08	\$8.08	100.00%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87077	Culture aerobic identify		\$8.08	\$8.08	\$8.08	\$8.08	100.00%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87081	Culture screen only		\$6.63	\$6.63	\$6.63	\$6.63	100.00%	\$6.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87084	Culture of specimen by kit		\$27.07	\$27.07	\$27.07	\$27.07	100.00%	\$25.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87086	Urine culture/colony count		\$8.07	\$8.07	\$8.07	\$8.07	100.00%	\$7.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87088	Urine bacteria culture		\$8.09	\$8.09	\$8.09	\$8.09	100.00%	\$7.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87101	Skin fungi culture		\$7.71	\$7.71	\$7.71	\$7.71	100.00%	\$7.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87102	Fungus isolation culture		\$8.41	\$8.41	\$8.41	\$8.41	100.00%	\$7.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87103	Blood fungus culture		\$20.46	\$20.46	\$20.46	\$20.46	100.00%	\$19.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87106	Fungi identification yeast		\$10.32	\$10.32	\$10.32	\$10.32	100.00%	\$9.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87107	Fungi identification mold		\$10.32	\$10.32	\$10.32	\$10.32	100.00%	\$9.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87109	Mycoplasma		\$15.39	\$15.39	\$15.39	\$15.39	100.00%	\$14.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87110	Chlamydia culture		\$19.60	\$19.60	\$19.60	\$19.60	100.00%	\$18.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87116	Mycobacteria culture		\$10.80	\$10.80	\$10.80	\$10.80	100.00%	\$10.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87118	Mycobacteric identification		\$14.61	\$14.61	\$14.61	\$14.61	100.00%	\$13.88	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87140	Culture type immunofluoresc		\$5.57	\$5.57	\$5.57	\$5.57	100.00%	\$5.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87147	Culture type immunologic		\$5.18	\$5.18	\$5.18	\$5.18	100.00%	\$4.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87149	Dna/rna direct probe		\$20.05	\$20.05	\$20.05	\$20.05	100.00%	\$19.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87150	Dna/rna amplified probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87153	Dna/rna sequencing		\$115.36	\$115.36	\$115.36	\$115.36	100.00%	\$109.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87168	Macroscopic exam arthropod		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87169	Macroscopic exam parasite		\$4.31	\$4.31	\$4.31	\$4.31	100.00%	\$4.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87172	Pinworm exam		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87176	Tissue homogenization cultr		\$5.88	\$5.88	\$5.88	\$5.88	100.00%	\$5.59	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87177	Ova and parasites smears		\$8.90	\$8.90	\$8.90	\$8.90	100.00%	\$8.46	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87181	Microbe susceptible diffuse		\$4.75	\$4.75	\$4.75	\$4.75	100.00%	\$4.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87184	Microbe susceptible disk		\$7.48	\$7.48	\$7.48	\$7.48	100.00%	\$7.11	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87185	Microbe susceptible enzyme		\$4.75	\$4.75	\$4.75	\$4.75	100.00%	\$4.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87186	Microbe susceptible mic		\$8.65	\$8.65	\$8.65	\$8.65	100.00%	\$8.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87205	Smear gram stain		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87206	Smear fluorescent/acid stai		\$5.39	\$5.39	\$5.39	\$5.39	100.00%	\$5.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87207	Smear special stain	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87207	Smear special stain		\$5.99	\$5.99	\$5.99	\$5.99	100.00%	\$5.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87209	Smear complex stain		\$17.98	\$17.98	\$17.98	\$17.98	100.00%	\$17.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87210	Smear wet mount saline/ink		\$5.82	\$5.82	\$5.82	\$5.82	100.00%	\$5.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87220	Tissue exam for fungi		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87230	Assay toxin or antitoxin		\$19.74	\$19.74	\$19.74	\$19.74	100.00%	\$18.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87252	Virus inoculation tissue		\$26.07	\$26.07	\$26.07	\$26.07	100.00%	\$24.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87253	Virus inoculate tissue addl		\$20.20	\$20.20	\$20.20	\$20.20	100.00%	\$19.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87254	Virus inoculation shell via		\$19.56	\$19.56	\$19.56	\$19.56	100.00%	\$18.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87255	Genet virus isolate hsv		\$33.86	\$33.86	\$33.86	\$33.86	100.00%	\$32.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87270	Chlamydia trachomatis ag if		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87272	Cryptosporidium ag if		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87273	Herpes simplex 2 ag if		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87274	Herpes simplex 1 ag if		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87275	Influenza b ag if		\$12.25	\$12.25	\$12.25	\$12.25	100.00%	\$11.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87276	Influenza a ag if		\$16.07	\$16.07	\$16.07	\$16.07	100.00%	\$15.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87278	Legion pneumophilia ag if		\$15.60	\$15.60	\$15.60	\$15.60	100.00%	\$14.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87281	Pneumocystis carinii ag if		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87283	Rubeola ag if		\$60.80	\$60.80	\$60.80	\$60.80	100.00%	\$57.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87290	Varicella zoster ag if		\$13.42	\$13.42	\$13.42	\$13.42	100.00%	\$12.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87299	Antibody detection nos if		\$16.10	\$16.10	\$16.10	\$16.10	100.00%	\$15.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87301	Adenovirus ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87305	Aspergillus ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87324	Clostridium ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87327	Cryptococcus neoform ag ia		\$13.42	\$13.42	\$13.42	\$13.42	100.00%	\$12.75	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87328	Cryptosporidium ag ia		\$13.82	\$13.82	\$13.82	\$13.82	100.00%	\$13.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87329	Giardia ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87337	Entamoeb hist group ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87338	Hpylori stool ag ia		\$14.38	\$14.38	\$14.38	\$14.38	100.00%	\$13.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87340	Hepatitis b surface ag ia		\$10.33	\$10.33	\$10.33	\$10.33	100.00%	\$9.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87341	Hep b surface ag neutrlyz ia		\$10.33	\$10.33	\$10.33	\$10.33	100.00%	\$9.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87350	Hepatitis be ag ia		\$11.53	\$11.53	\$11.53	\$11.53	100.00%	\$10.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87385	Histoplasma capsul ag ia		\$13.25	\$13.25	\$13.25	\$13.25	100.00%	\$12.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87389	Hiv-1 ag w/hiv-1&-2 ab ag ia		\$24.08	\$24.08	\$24.08	\$24.08	100.00%	\$22.88	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87400	Influenza a/b each ag ia		\$14.13	\$14.13	\$14.13	\$14.13	100.00%	\$13.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87420	Resp syncytial virus ag ia		\$13.91	\$13.91	\$13.91	\$13.91	100.00%	\$13.21	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87425	Rotavirus ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87427	Shiga-like toxin ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87430	Strep a ag ia		\$16.81	\$16.81	\$16.81	\$16.81	100.00%	\$15.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87449	Nos each organism ag ia		\$11.98	\$11.98	\$11.98	\$11.98	100.00%	\$11.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87471	Bartonella dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87476	Lyme dis dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87480	Candida dna dir probe		\$20.05	\$20.05	\$20.05	\$20.05	100.00%	\$19.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87481	Candida dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87482	Candida dna quant		\$55.74	\$55.74	\$55.74	\$55.74	100.00%	\$52.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87483	Cns dna amp probe type 12-25		\$416.78	\$416.78	\$416.78	\$416.78	100.00%	\$395.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87486	Chlmyd pneum dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87490	Chlmyd trach dna dir probe		\$22.75	\$22.75	\$22.75	\$22.75	100.00%	\$21.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87491	Chlmyd trach dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87492	Chlmyd trach dna quant		\$53.47	\$53.47	\$53.47	\$53.47	100.00%	\$50.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87493	C diff amplified probe		\$37.27	\$37.27	\$37.27	\$37.27	100.00%	\$35.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87496	Cytomeg dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87497	Cytomeg dna quant		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87498	Enterovirus probe&revrs trns		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87500	Vanomycin dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87501	Influenza dna amp prob 1+		\$51.31	\$51.31	\$51.31	\$51.31	100.00%	\$48.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87502	Influenza dna amp probe		\$95.80	\$95.80	\$95.80	\$95.80	100.00%	\$91.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87503	Influenza dna amp prob addl		\$29.22	\$29.22	\$29.22	\$29.22	100.00%	\$27.76	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87507	ladna-dna/rna probe tq 12-25		\$416.78	\$416.78	\$416.78	\$416.78	100.00%	\$395.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87510	Gardner vag dna dir probe		\$20.05	\$20.05	\$20.05	\$20.05	100.00%	\$19.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87511	Gardner vag dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87512	Gardner vag dna quant		\$41.76	\$41.76	\$41.76	\$41.76	100.00%	\$39.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87517	Hepatitis b dna quant		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87521	Hepatitis c probe&rvrs trnsc		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87522	Hepatitis c revrs trnscrpj		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87529	Hsv dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87530	Hsv dna quant		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87532	Hhv-6 dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87533	Hhv-6 dna quant		\$41.76	\$41.76	\$41.76	\$41.76	100.00%	\$39.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87535	Hiv-1 probe&reverse trnscrpj		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87536	Hiv-1 quant&revrse trnscrpj		\$85.10	\$85.10	\$85.10	\$85.10	100.00%	\$80.85	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87538	Hiv-2 probe&revrse trnscrpj		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87541	Legion pneumo dna amp prob		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87551	Mycobacteria dna amp probe		\$48.24	\$48.24	\$48.24	\$48.24	100.00%	\$45.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87556	M.tuberculo dna amp probe		\$41.68	\$41.68	\$41.68	\$41.68	100.00%	\$39.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87561	M.avium-intra dna amp prob		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87563	M. genitalium amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87581	M.pneumon dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87590	N.gonorrhoeae dna dir prob		\$26.88	\$26.88	\$26.88	\$26.88	100.00%	\$25.54	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87591	N.gonorrhoeae dna amp prob		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87592	N.gonorrhoeae dna quant		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87624	Hpv high-risk types		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87625	Hpv types 16 & 18 only		\$40.55	\$40.55	\$40.55	\$40.55	100.00%	\$38.52	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87631	Resp virus 3-5 targets		\$142.63	\$142.63	\$142.63	\$142.63	100.00%	\$135.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87633	Resp virus 12-25 targets		\$416.78	\$416.78	\$416.78	\$416.78	100.00%	\$395.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87634	Rsv dna/rna amp probe		\$70.20	\$70.20	\$70.20	\$70.20	100.00%	\$66.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87635	Sars-cov-2 covid-19 amp prb		\$51.31	\$51.31	\$51.31	\$51.31	100.00%	\$48.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87636	Sarscov2 & inf a&b amp prb		\$142.63	\$142.63	\$142.63	\$142.63	100.00%	\$135.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87637	Sarscov2&inf a&b&rsv amp prb		\$142.63	\$142.63	\$142.63	\$142.63	100.00%	\$135.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87640	Staph a dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87641	Mr-staph dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87650	Strep a dna dir probe		\$20.05	\$20.05	\$20.05	\$20.05	100.00%	\$19.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87651	Strep a dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87652	Strep a dna quant		\$41.76	\$41.76	\$41.76	\$41.76	100.00%	\$39.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87653	Strep b dna amp probe		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87660	Trichomonas vagin dir probe		\$20.05	\$20.05	\$20.05	\$20.05	100.00%	\$19.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87661	Trichomonas vaginalis amplif		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87662	Zika virus dna/rna amp probe		\$51.31	\$51.31	\$51.31	\$51.31	100.00%	\$48.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87798	Detect agent nos dna amp		\$35.09	\$35.09	\$35.09	\$35.09	100.00%	\$33.34	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87799	Detect agent nos dna quant		\$42.84	\$42.84	\$42.84	\$42.84	100.00%	\$40.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87800	Detect agnt mult dna direc		\$43.67	\$43.67	\$43.67	\$43.67	100.00%	\$41.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87801	Detect agnt mult dna ampli		\$70.20	\$70.20	\$70.20	\$70.20	100.00%	\$66.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87804	Influenza assay w/optic		\$16.55	\$16.55	\$16.55	\$16.55	100.00%	\$15.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87806	Hiv ag w/hiv1&2 antb w/optic		\$32.77	\$32.77	\$32.77	\$32.77	100.00%	\$31.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87807	Rsv assay w/optic		\$13.10	\$13.10	\$13.10	\$13.10	100.00%	\$12.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87808	Trichomonas assay w/optic		\$15.29	\$15.29	\$15.29	\$15.29	100.00%	\$14.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87809	Adenovirus assay w/optic		\$21.76	\$21.76	\$21.76	\$21.76	100.00%	\$20.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87880	Strep a assay w/optic		\$16.53	\$16.53	\$16.53	\$16.53	100.00%	\$15.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87899	Agent nos assay w/optic		\$16.07	\$16.07	\$16.07	\$16.07	100.00%	\$15.27	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87900	Phenotype infect agent drug		\$130.35	\$130.35	\$130.35	\$130.35	100.00%	\$123.83	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87901	Nfct agt gntyp alys hiv1 rev		\$257.45	\$257.45	\$257.45	\$257.45	100.00%	\$244.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87902	Nfct agt gntyp alys hep c		\$257.45	\$257.45	\$257.45	\$257.45	100.00%	\$244.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87903	Phenotype dna hiv w/culture		\$488.66	\$488.66	\$488.66	\$488.66	100.00%	\$464.23	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	87904	Phenotype dna hiv w/clt add		\$26.07	\$26.07	\$26.07	\$26.07	100.00%	\$24.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87905	Sialidase enzyme assay		\$12.22	\$12.22	\$12.22	\$12.22	100.00%	\$11.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87906	Nfct agt gntyp alys hiv1		\$128.73	\$128.73	\$128.73	\$128.73	100.00%	\$122.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87910	Nfct agt gntyp alys cmv		\$257.45	\$257.45	\$257.45	\$257.45	100.00%	\$244.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	87912	Nfct agt gntyp alys hep b		\$257.45	\$257.45	\$257.45	\$257.45	100.00%	\$244.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88104	Cytopath fl nongyn smears	26	\$22.17	\$27.13	\$27.13	\$27.13	81.73%	\$22.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88104	Cytopath fl nongyn smears	TC	\$36.74	\$51.38	\$51.38	\$51.38	71.51%	\$36.74	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88104	Cytopath fl nongyn smears		\$57.35	\$78.50	\$78.50	\$78.50	73.05%	\$57.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88108	Cytopath concentrate tech	26	\$22.82	\$22.05	\$22.05	\$22.05	103.50%	\$20.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88108	Cytopath concentrate tech	TC	\$38.25	\$49.35	\$49.35	\$49.35	77.51%	\$38.25	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88108	Cytopath concentrate tech		\$55.15	\$71.40	\$71.40	\$71.40	77.24%	\$55.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88112	Cytopath cell enhance tech	26	\$28.08	\$27.13	\$27.13	\$27.13	103.51%	\$25.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88112	Cytopath cell enhance tech	TC	\$41.11	\$43.39	\$43.39	\$43.39	94.75%	\$41.11	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88112	Cytopath cell enhance tech		\$70.96	\$70.52	\$70.52	\$70.52	100.63%	\$66.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88120	Cytp urne 3-5 probes ea spec		\$536.66	\$607.38	\$607.38	\$607.38	88.36%	\$536.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88121	Cytp urine 3-5 probes cmptr	26	\$40.47	\$47.42	\$47.42	\$47.42	85.34%	\$40.47	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88121	Cytp urine 3-5 probes cmptr	TC	\$322.79	\$391.73	\$391.73	\$391.73	82.40%	\$322.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88121	Cytp urine 3-5 probes cmptr		\$377.79	\$439.15	\$439.15	\$439.15	86.03%	\$377.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88142	Cytopath c/v thin layer		\$14.96	\$20.26	\$20.26	\$20.26	73.84%	\$14.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88147	Cytopath c/v automated		\$35.36	\$50.56	\$50.56	\$50.56	69.94%	\$35.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88160	Cytopath smear other source	26	\$22.64	\$25.11	\$25.11	\$25.11	90.15%	\$22.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88161	Cytopath smear other source	26	\$22.64	\$24.76	\$24.76	\$24.76	91.42%	\$22.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88161	Cytopath smear other source		\$63.06	\$84.55	\$84.55	\$84.55	74.58%	\$63.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88172	Cytp dx eval fna 1st ea site	26	\$30.61	\$34.64	\$34.64	\$34.64	88.36%	\$30.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88172	Cytp dx eval fna 1st ea site	TC	\$22.64	\$22.71	\$22.71	\$22.71	99.70%	\$21.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88172	Cytp dx eval fna 1st ea site		\$53.61	\$57.35	\$57.35	\$57.35	93.47%	\$53.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88173	Cytopath eval fna report	26	\$57.07	\$68.57	\$68.57	\$68.57	83.23%	\$57.07	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88173	Cytopath eval fna report	TC	\$80.44	\$104.93	\$104.93	\$104.93	76.66%	\$80.44	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88173	Cytopath eval fna report		\$133.85	\$173.50	\$173.50	\$173.50	77.15%	\$133.85	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88175	Cytopath c/v auto fluid redo		\$19.42	\$26.61	\$26.61	\$26.61	72.98%	\$19.42	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	88177	Cytp fna eval ea addl	26	\$18.65	\$21.38	\$21.38	\$21.38	87.24%	\$18.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88177	Cytp fna eval ea addl	TC	\$6.97	\$8.76	\$8.76	\$8.76	79.54%	\$6.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88177	Cytp fna eval ea addl		\$24.21	\$30.14	\$30.14	\$30.14	80.32%	\$24.21	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88182	Cell marker study	26	\$36.57	\$37.68	\$37.68	\$37.68	97.06%	\$35.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88182	Cell marker study		\$126.03	\$174.00	\$174.00	\$174.00	72.43%	\$126.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88184	Flowcytometry/ tc 1 marker		\$58.98	\$81.87	\$81.87	\$81.87	72.04%	\$58.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88185	Flowcytometry/tc add-on		\$19.57	\$24.89	\$24.89	\$24.89	78.64%	\$19.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88187	Flowcytometry/read 2-8		\$36.84	\$35.47	\$35.47	\$35.47	103.86%	\$33.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88188	Flowcytometry/read 9-15		\$67.46	\$61.19	\$61.19	\$61.19	110.24%	\$58.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88189	Flowcytometry/read 16 & >		\$88.83	\$82.73	\$82.73	\$82.73	107.38%	\$78.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88230	Tissue culture lymphocyte		\$116.49	\$116.49	\$116.49	\$116.49	100.00%	\$110.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88233	Tissue culture skin/biopsy		\$140.73	\$140.73	\$140.73	\$140.73	100.00%	\$133.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88235	Tissue culture placenta		\$150.30	\$150.30	\$150.30	\$150.30	100.00%	\$142.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88237	Tissue culture bone marrow		\$143.75	\$143.75	\$143.75	\$143.75	100.00%	\$136.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88239	Tissue culture tumor		\$147.52	\$147.52	\$147.52	\$147.52	100.00%	\$140.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88240	Cell cryopreserve/storage		\$13.07	\$13.07	\$13.07	\$13.07	100.00%	\$12.42	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88261	Chromosome analysis 5		\$264.34	\$264.34	\$264.34	\$264.34	100.00%	\$251.12	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88262	Chromosome analysis 15-20		\$125.49	\$125.49	\$125.49	\$125.49	100.00%	\$119.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88264	Chromosome analysis 20-25		\$144.61	\$144.61	\$144.61	\$144.61	100.00%	\$137.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88267	Chromosome analys placenta		\$188.57	\$188.57	\$188.57	\$188.57	100.00%	\$179.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88269	Chromosome analys amniotic		\$173.66	\$173.66	\$173.66	\$173.66	100.00%	\$164.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88271	Cytogenetics dna probe		\$21.42	\$21.42	\$21.42	\$21.42	100.00%	\$20.35	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88273	Cytogenetics 10-30		\$34.81	\$34.81	\$34.81	\$34.81	100.00%	\$33.07	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88274	Cytogenetics 25-99		\$42.38	\$42.38	\$42.38	\$42.38	100.00%	\$40.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88275	Cytogenetics 100-300		\$51.19	\$51.19	\$51.19	\$51.19	100.00%	\$48.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88280	Chromosome karyotype study		\$33.47	\$33.47	\$33.47	\$33.47	100.00%	\$31.80	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88285	Chromosome count additional		\$26.91	\$26.91	\$26.91	\$26.91	100.00%	\$25.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88289	Chromosome study additional		\$34.43	\$34.43	\$34.43	\$34.43	100.00%	\$32.71	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88291	Cyto/molecular report		\$27.68	\$34.12	\$34.12	\$34.12	81.12%	\$27.68	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88300	Surgical path gross	26	\$4.34	\$4.36	\$4.36	\$4.36	99.50%	\$4.14	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	88300	Surgical path gross	TC	\$11.78	\$12.54	\$12.54	\$12.54	93.91%	\$11.78	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88300	Surgical path gross		\$16.30	\$16.91	\$16.91	\$16.91	96.42%	\$16.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88302	Tissue exam by pathologist	26	\$6.61	\$6.74	\$6.74	\$6.74	98.07%	\$6.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88302	Tissue exam by pathologist	TC	\$22.58	\$27.97	\$27.97	\$27.97	80.74%	\$22.58	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88302	Tissue exam by pathologist		\$33.97	\$34.71	\$34.71	\$34.71	97.88%	\$32.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88304	Tissue exam by pathologist	26	\$11.14	\$11.16	\$11.16	\$11.16	99.80%	\$10.60	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88304	Tissue exam by pathologist	TC	\$27.22	\$33.57	\$33.57	\$33.57	81.07%	\$27.22	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88304	Tissue exam by pathologist		\$44.53	\$44.74	\$44.74	\$44.74	99.54%	\$42.50	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88305	Tissue exam by pathologist	26	\$38.40	\$36.66	\$36.66	\$36.66	104.75%	\$34.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88305	Tissue exam by pathologist	TC	\$30.13	\$37.43	\$37.43	\$37.43	80.50%	\$30.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88305	Tissue exam by pathologist		\$66.10	\$74.09	\$74.09	\$74.09	89.22%	\$66.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88307	Tissue exam by pathologist	26	\$67.14	\$80.47	\$80.47	\$80.47	83.44%	\$67.14	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88307	Tissue exam by pathologist	TC	\$181.18	\$219.47	\$219.47	\$219.47	82.55%	\$181.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88307	Tissue exam by pathologist		\$245.66	\$299.94	\$299.94	\$299.94	81.90%	\$245.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88309	Tissue exam by pathologist	26	\$118.18	\$141.95	\$141.95	\$141.95	83.26%	\$118.18	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88309	Tissue exam by pathologist	TC	\$256.09	\$308.15	\$308.15	\$308.15	83.10%	\$256.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88309	Tissue exam by pathologist		\$372.91	\$450.10	\$450.10	\$450.10	82.85%	\$372.91	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88311	Decalcify tissue	26	\$10.09	\$11.83	\$11.83	\$11.83	85.27%	\$10.09	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88311	Decalcify tissue	TC	\$7.19	\$9.04	\$9.04	\$9.04	79.55%	\$7.19	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88311	Decalcify tissue		\$17.56	\$20.87	\$20.87	\$20.87	84.13%	\$17.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88312	Special stains group 1	26	\$21.61	\$26.11	\$26.11	\$26.11	82.78%	\$21.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88312	Special stains group 1	TC	\$74.84	\$91.41	\$91.41	\$91.41	81.87%	\$74.84	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88312	Special stains group 1		\$97.00	\$117.52	\$117.52	\$117.52	82.54%	\$97.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88313	Special stains group 2	26	\$9.79	\$11.83	\$11.83	\$11.83	82.73%	\$9.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88313	Special stains group 2	TC	\$60.61	\$74.94	\$74.94	\$74.94	80.88%	\$60.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88313	Special stains group 2		\$69.90	\$86.77	\$86.77	\$86.77	80.56%	\$69.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88314	Histochemical stains add-on	26	\$16.79	\$19.93	\$19.93	\$19.93	84.24%	\$16.79	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88314	Histochemical stains add-on		\$85.00	\$92.34	\$92.34	\$92.34	92.05%	\$85.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88319	Enzyme histochemistry	26	\$21.92	\$26.47	\$26.47	\$26.47	82.81%	\$21.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88319	Enzyme histochemistry		\$120.58	\$142.69	\$142.69	\$142.69	84.50%	\$120.58	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	88321	Consltj&reprt sld prep elswr		\$69.01	\$98.26	\$98.26	\$98.26	70.23%	\$69.01	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88323	Consltj&reprt matrl prep sld	26	\$71.40	\$86.84	\$86.84	\$86.84	82.22%	\$71.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88323	Consltj&reprt matrl prep sld		\$94.95	\$117.96	\$117.96	\$117.96	80.49%	\$94.95	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88325	Consltj compre rvw rec reprt		\$111.24	\$157.12	\$157.12	\$157.12	70.80%	\$111.24	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88329	Path consltj drg SURGERY		\$48.49	\$56.53	\$56.53	\$56.53	85.78%	\$48.49	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88331	Path consltj SURGERY 1 blk 1spc	26	\$50.64	\$60.81	\$60.81	\$60.81	83.28%	\$50.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88331	Path consltj SURGERY 1 blk 1spc	TC	\$35.64	\$43.39	\$43.39	\$43.39	82.14%	\$35.64	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88331	Path consltj SURGERY 1 blk 1spc		\$86.62	\$104.20	\$104.20	\$104.20	83.13%	\$86.62	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88332	Path consltj SURGERY ea add blk	26	\$25.03	\$29.89	\$29.89	\$29.89	83.75%	\$25.03	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88332	Path consltj SURGERY ea add blk	TC	\$21.41	\$26.21	\$26.21	\$26.21	81.68%	\$21.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88332	Path consltj SURGERY ea add blk		\$46.08	\$56.10	\$56.10	\$56.10	82.14%	\$46.08	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88333	Path consltj SURGERY cyto xm 1	26	\$50.63	\$60.44	\$60.44	\$60.44	83.76%	\$50.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88333	Path consltj SURGERY cyto xm 1	TC	\$27.81	\$33.57	\$33.57	\$33.57	82.83%	\$27.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88333	Path consltj SURGERY cyto xm 1		\$78.92	\$94.02	\$94.02	\$94.02	83.94%	\$78.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88334	Path consltj SURGERY cyto xm ea	26	\$30.66	\$36.69	\$36.69	\$36.69	83.57%	\$30.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88341	Imhchem/imcytchm ea add antib	26	\$28.80	\$27.48	\$27.48	\$27.48	104.81%	\$26.10	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88341	Imhchem/imcytchm ea add antib	TC	\$50.82	\$66.95	\$66.95	\$66.95	75.91%	\$50.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88341	Imhchem/imcytchm ea add antib		\$75.77	\$94.43	\$94.43	\$94.43	80.24%	\$75.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88342	Imhchem/imcytchm 1st antib	26	\$34.59	\$34.28	\$34.28	\$34.28	100.91%	\$32.56	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88342	Imhchem/imcytchm 1st antib	TC	\$57.13	\$75.99	\$75.99	\$75.99	75.18%	\$57.13	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88342	Imhchem/imcytchm 1st antib		\$86.45	\$110.27	\$110.27	\$110.27	78.40%	\$86.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88344	Imhchem/imcytchm ea mlt antib	26	\$34.59	\$37.68	\$37.68	\$37.68	91.80%	\$34.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88344	Imhchem/imcytchm ea mlt antib	TC	\$113.16	\$142.94	\$142.94	\$142.94	79.17%	\$113.16	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88344	Imhchem/imcytchm ea mlt antib		\$146.67	\$180.61	\$180.61	\$180.61	81.21%	\$146.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88346	Imflur 1st 1antb stain px	26	\$36.93	\$35.27	\$35.27	\$35.27	104.71%	\$33.51	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88346	Imflur 1st 1antb stain px	TC	\$101.26	\$121.13	\$121.13	\$121.13	83.60%	\$101.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88346	Imflur 1st 1antb stain px		\$131.93	\$156.40	\$156.40	\$156.40	84.35%	\$131.93	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88348	Electron microscopy dx	26	\$76.51	\$75.75	\$75.75	\$75.75	101.00%	\$71.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88348	Electron microscopy dx		\$392.98	\$506.21	\$506.21	\$506.21	77.63%	\$392.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88350	Imflur ea addl 1antb stn px	26	\$28.16	\$28.48	\$28.48	\$28.48	98.86%	\$27.06	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	88350	Imflur ea addl 1antb stn px	TC	\$76.29	\$90.36	\$90.36	\$90.36	84.43%	\$76.29	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88350	Imflur ea addl 1antb stn px		\$101.66	\$118.84	\$118.84	\$118.84	85.54%	\$101.66	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88356	Analysis nerve		\$208.53	\$242.67	\$242.67	\$242.67	85.93%	\$208.53	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88360	Tumor immunohistochem/manual	26	\$42.50	\$40.71	\$40.71	\$40.71	104.39%	\$38.68	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88360	Tumor immunohistochem/manual	TC	\$67.00	\$84.40	\$84.40	\$84.40	79.38%	\$67.00	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88360	Tumor immunohistochem/manual		\$103.41	\$125.11	\$125.11	\$125.11	82.65%	\$103.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88361	Tumor immunohistochem/comput	26	\$39.41	\$42.67	\$42.67	\$42.67	92.37%	\$39.41	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88361	Tumor immunohistochem/comput	TC	\$65.26	\$81.24	\$81.24	\$81.24	80.33%	\$65.26	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88361	Tumor immunohistochem/comput		\$102.98	\$123.91	\$123.91	\$123.91	83.11%	\$102.98	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88363	Xm archive tissue molec anal		\$19.90	\$23.48	\$23.48	\$23.48	84.75%	\$19.90	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88364	Insitu hybridization (fish)	26	\$27.81	\$33.23	\$33.23	\$33.23	83.70%	\$27.81	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88364	Insitu hybridization (fish)	TC	\$89.36	\$105.78	\$105.78	\$105.78	84.48%	\$89.36	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88364	Insitu hybridization (fish)		\$118.67	\$139.01	\$139.01	\$139.01	85.37%	\$118.67	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88365	Insitu hybridization (fish)	26	\$41.67	\$42.07	\$42.07	\$42.07	99.05%	\$39.97	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88365	Insitu hybridization (fish)	TC	\$119.77	\$142.86	\$142.86	\$142.86	83.84%	\$119.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88365	Insitu hybridization (fish)		\$154.65	\$184.93	\$184.93	\$184.93	83.63%	\$154.65	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88368	Insitu hybridization manual	26	\$42.46	\$41.37	\$41.37	\$41.37	102.64%	\$39.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88368	Insitu hybridization manual		\$148.77	\$154.09	\$154.09	\$154.09	96.55%	\$146.38	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88369	M/phmtrc alyshquant/semiq		\$98.87	\$133.75	\$133.75	\$133.75	73.92%	\$98.87	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88374	M/phmtrc alyshquant/semiq	26	\$38.31	\$41.29	\$41.29	\$41.29	92.77%	\$38.31	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88374	M/phmtrc alyshquant/semiq	TC	\$226.40	\$259.66	\$259.66	\$259.66	87.19%	\$226.40	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88374	M/phmtrc alyshquant/semiq		\$282.17	\$300.95	\$300.95	\$300.95	93.76%	\$282.17	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88377	M/phmtrc alyshquant/semiq	26	\$55.61	\$62.67	\$62.67	\$62.67	88.73%	\$55.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88377	M/phmtrc alyshquant/semiq	TC	\$289.05	\$350.64	\$350.64	\$350.64	82.43%	\$289.05	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88377	M/phmtrc alyshquant/semiq		\$349.70	\$413.32	\$413.32	\$413.32	84.61%	\$349.70	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88380	Microdissection laser		\$135.61	\$128.73	\$128.73	\$128.73	105.34%	\$122.30	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88381	Microdissection manual	26	\$24.13	\$22.97	\$22.97	\$22.97	105.07%	\$21.82	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88381	Microdissection manual	TC	\$154.48	\$187.58	\$187.58	\$187.58	82.36%	\$154.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88381	Microdissection manual		\$181.63	\$210.54	\$210.54	\$210.54	86.27%	\$181.63	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	88720	Bilirubin total transcut		\$5.02	\$5.02	\$5.02	\$5.02	100.00%	\$4.77	The Medicare benchmark rate is the Medicare non-facility rate

Laboratory and Pathology	88738	Hgb quant transcutaneous		\$5.02	\$5.02	\$5.02	\$5.02	100.00%	\$4.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89050	Body fluid cell count		\$4.72	\$4.72	\$4.72	\$4.72	100.00%	\$4.48	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89051	Body fluid cell count		\$5.60	\$5.60	\$5.60	\$5.60	100.00%	\$5.32	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89055	Leukocyte assessment fecal		\$4.27	\$4.27	\$4.27	\$4.27	100.00%	\$4.06	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89060	Exam synovial fluid crystals	26	\$14.57	\$17.60	\$17.60	\$17.60	82.80%	\$14.57	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89060	Exam synovial fluid crystals		\$7.33	\$7.33	\$7.33	\$7.33	100.00%	\$6.96	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89125	Specimen fat stain		\$5.88	\$5.88	\$5.88	\$5.88	100.00%	\$5.59	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89160	Exam feces for meat fibers		\$4.85	\$4.85	\$4.85	\$4.85	100.00%	\$4.61	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89320	Semen anal vol/count/mot		\$12.31	\$12.31	\$12.31	\$12.31	100.00%	\$11.69	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89321	Semen anal sperm detection		\$12.05	\$12.05	\$12.05	\$12.05	100.00%	\$11.45	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	89322	Semen anal strict criteria		\$15.50	\$15.50	\$15.50	\$15.50	100.00%	\$14.73	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	G0416	Prostate biopsy, any mthd	26	\$154.94	\$174.32	\$174.32	\$174.32	88.88%	\$154.94	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	G0416	Prostate biopsy, any mthd	TC	\$201.44	\$201.17	\$201.17	\$201.17	100.13%	\$191.11	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	G0416	Prostate biopsy, any mthd		\$375.94	\$375.49	\$375.49	\$375.49	100.12%	\$356.72	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	G0433	Elisa hiv-1/hiv-2 screen		\$14.92	\$18.29	\$18.29	\$18.29	81.57%	\$14.92	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	G0452	Molecular pathology interpr	26	\$38.77	\$46.48	\$46.48	\$46.48	83.42%	\$38.77	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	P9612	Catheterize for urine spec		\$3.15	\$8.83	\$8.83	\$8.83	35.67%	\$3.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	P9615	Urine specimen collect mult		\$3.15	\$8.83	\$8.83	\$8.83	35.67%	\$3.15	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	Q0111	Wet mounts/ w preparations		\$12.99	\$17.76	\$17.76	\$17.76	73.14%	\$12.99	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	Q0112	Potassium hydroxide preps		\$5.83	\$5.83	\$5.83	\$5.83	100.00%	\$5.54	The Medicare benchmark rate is the Medicare non-facility rate
Laboratory and Pathology	Q0114	Fern test		\$9.74	\$9.74	\$9.74	\$9.74	100.00%	\$9.25	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59000	Amniocentesis diagnostic		\$120.01	\$120.18	\$80.22	\$120.18	99.86%	\$114.17	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59001	Amniocentesis therapeutic		\$177.00	\$176.11	\$176.11	\$176.11	100.50%	\$167.31	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59012	Fetal cord puncture prenatal		\$199.77	\$198.86	\$198.86	\$198.86	100.46%	\$188.92	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59015	Chorion biopsy		\$159.29	\$159.14	\$130.04	\$159.14	100.10%	\$151.18	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59025	Fetal non-stress test		\$50.03	\$50.03	\$50.03	\$50.03	100.00%	\$47.53	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59051	Fetal monitor/interpret only		\$41.46	\$41.33	\$41.33	\$41.33	100.32%	\$39.26	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59070	Transabdom amnioinfus w/us		\$404.55	\$401.79	\$304.69	\$401.79	100.69%	\$381.70	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59120	Treat ectopic pregnancy		\$824.29	\$819.71	\$819.71	\$819.71	100.56%	\$778.73	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59121	Treat ectopic pregnancy		\$824.18	\$819.81	\$819.81	\$819.81	100.53%	\$778.82	The Medicare benchmark rate is the Medicare non-facility rate

Maternity	59130	Treat ectopic pregnancy		\$955.61	\$949.77	\$949.77	\$949.77	100.62%	\$902.28	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59140	Treat ectopic pregnancy		\$424.54	\$422.29	\$422.29	\$422.29	100.53%	\$401.18	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59150	Treat ectopic pregnancy		\$818.31	\$795.25	\$795.25	\$795.25	102.90%	\$755.48	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59151	Treat ectopic pregnancy		\$782.38	\$777.67	\$777.67	\$777.67	100.61%	\$738.78	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59160	D & c after delivery		\$284.09	\$279.70	\$189.97	\$279.70	101.57%	\$265.71	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59200	Insert cervical dilator		\$110.41	\$107.85	\$43.71	\$107.85	102.37%	\$102.46	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59300	Episiotomy or vaginal repair		\$238.16	\$234.78	\$146.80	\$234.78	101.44%	\$223.04	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59320	Revision of cervix		\$190.76	\$150.48	\$150.48	\$150.48	126.77%	\$142.95	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59350	Repair of uterus		\$276.44	\$274.20	\$274.20	\$274.20	100.82%	\$260.49	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59400	Obstetrical care		\$2,428.11	\$2,426.62	\$2,426.62	\$2,426.62	100.06%	\$2,305.29	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59409	Obstetrical care		\$797.78	\$790.65	\$790.65	\$790.65	100.90%	\$751.12	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59410	Obstetrical care		\$1,059.04	\$1,072.69	\$1,072.69	\$1,072.69	98.73%	\$1,019.05	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59412	Antepartum manipulation		\$123.26	\$101.84	\$101.84	\$101.84	121.04%	\$96.74	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59414	Deliver placenta		\$100.73	\$89.24	\$89.24	\$89.24	112.87%	\$84.78	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59425	Antepartum care only		\$570.01	\$568.02	\$428.52	\$568.02	100.35%	\$539.62	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59426	Antepartum care only		\$1,043.06	\$1,038.75	\$786.73	\$1,038.75	100.42%	\$986.81	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59430	Care after delivery		\$271.40	\$268.47	\$177.33	\$268.47	101.09%	\$255.05	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59510	Cesarean delivery		\$2,676.71	\$2,689.70	\$2,689.70	\$2,689.70	99.52%	\$2,555.21	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59514	Cesarean delivery only		\$948.69	\$894.34	\$894.34	\$894.34	106.08%	\$849.62	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59515	Cesarean delivery		\$1,300.61	\$1,329.07	\$1,329.07	\$1,329.07	97.86%	\$1,262.61	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59525	Remove uterus after cesarean		\$476.44	\$473.66	\$473.66	\$473.66	100.59%	\$449.98	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59610	Vbac delivery		\$2,530.12	\$2,535.00	\$2,535.00	\$2,535.00	99.81%	\$2,408.25	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59612	Vbac delivery only		\$899.20	\$892.64	\$892.64	\$892.64	100.73%	\$848.01	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59614	Vbac care after delivery		\$1,138.42	\$1,154.22	\$1,154.22	\$1,154.22	98.63%	\$1,096.51	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59618	Attempted vbc delivery		\$2,713.40	\$2,717.23	\$2,717.23	\$2,717.23	99.86%	\$2,581.37	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59620	Attempted vbc delivery only		\$1,024.66	\$924.71	\$924.71	\$924.71	110.81%	\$878.47	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59622	Attempted vbc after care		\$1,350.86	\$1,378.04	\$1,378.04	\$1,378.04	98.03%	\$1,309.14	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59812	Treatment of miscarriage		\$372.77	\$369.46	\$310.93	\$369.46	100.90%	\$350.99	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59820	Care of miscarriage		\$453.86	\$450.33	\$394.25	\$450.33	100.78%	\$427.82	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59821	Treatment of miscarriage		\$445.95	\$442.27	\$383.73	\$442.27	100.83%	\$420.16	The Medicare benchmark rate is the Medicare non-facility rate

Maternity	59830	Treat uterus infection		\$472.27	\$469.51	\$469.51	\$469.51	100.59%	\$446.04	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59870	Evacuate mole of uterus		\$551.29	\$547.08	\$547.08	\$547.08	100.77%	\$519.73	The Medicare benchmark rate is the Medicare non-facility rate
Maternity	59871	Remove cerclage suture		\$132.79	\$132.75	\$132.75	\$132.75	100.03%	\$126.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92920	Prq cardiac angioplast 1 art		\$469.87	\$510.02	\$510.02	\$510.02	92.13%	\$469.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92924	Prq card angio/athrect 1 art		\$558.58	\$608.33	\$608.33	\$608.33	91.82%	\$558.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92928	Prq card stent w/angio 1 vsl		\$521.79	\$567.46	\$567.46	\$567.46	91.95%	\$521.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92933	Prq card stent/ath/angio		\$583.48	\$636.40	\$636.40	\$636.40	91.68%	\$583.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92937	Prq revasc byp graft 1 vsl		\$522.19	\$567.40	\$567.40	\$567.40	92.03%	\$522.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92941	Prq card revasc mi 1 vsl		\$584.62	\$637.15	\$637.15	\$637.15	91.76%	\$584.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92943	Prq card revasc chronic 1vsl		\$584.62	\$637.07	\$637.07	\$637.07	91.77%	\$584.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92950	Heart/lung resuscitation cpr		\$282.57	\$331.35	\$180.63	\$331.35	85.28%	\$282.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92960	Cardioversion electric ext		\$89.72	\$156.76	\$107.34	\$156.76	57.23%	\$89.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92961	Cardioversion electric int		\$199.94	\$237.25	\$237.25	\$237.25	84.27%	\$199.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92973	Prq coronary mech thrombect		\$142.96	\$170.04	\$170.04	\$170.04	84.08%	\$142.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92974	Cath place cardio brachytx		\$154.94	\$155.83	\$155.83	\$155.83	99.43%	\$148.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92977	Dissolve clot heart vessel		\$55.46	\$57.13	\$57.13	\$57.13	97.07%	\$54.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92978	Endoluminl ivus oct c 1st	26	\$76.87	\$91.49	\$91.49	\$91.49	84.02%	\$76.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92979	Endoluminl ivus oct c ea	26	\$61.34	\$72.65	\$72.65	\$72.65	84.43%	\$61.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92986	Revision of aortic valve		\$1,077.80	\$1,293.64	\$1,293.64	\$1,293.64	83.31%	\$1,077.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92987	Revision of mitral valve		\$1,114.76	\$1,333.13	\$1,333.13	\$1,333.13	83.62%	\$1,114.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92990	Revision of pulmonary valve		\$888.69	\$1,068.50	\$1,068.50	\$1,068.50	83.17%	\$888.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92997	Pul art balloon repr percut		\$655.81	\$614.03	\$614.03	\$614.03	106.80%	\$583.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	92998	Pul art balloon repr percut		\$285.44	\$307.23	\$307.23	\$307.23	92.91%	\$285.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93000	Electrocardiogram complete		\$15.05	\$14.67	\$14.67	\$14.67	102.61%	\$13.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93005	Electrocardiogram tracing		\$6.55	\$6.58	\$6.58	\$6.58	99.47%	\$6.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93010	Electrocardiogram report		\$8.35	\$8.08	\$8.08	\$8.08	103.31%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93015	Cardiovascular stress test		\$74.69	\$74.29	\$74.29	\$74.29	100.54%	\$70.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93016	Cardiovascular stress test		\$23.19	\$20.98	\$20.98	\$20.98	110.52%	\$19.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93017	Cardiovascular stress test		\$38.24	\$39.46	\$39.46	\$39.46	96.91%	\$37.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93018	Cardiovascular stress test		\$14.33	\$13.85	\$13.85	\$13.85	103.49%	\$13.15	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Cardiology	93040	Rhythm ecg with report		\$13.59	\$13.30	\$13.30	\$13.30	102.22%	\$12.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93041	Rhythm ecg tracing		\$5.46	\$6.58	\$6.58	\$6.58	82.92%	\$5.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93042	Rhythm ecg report		\$5.64	\$6.71	\$6.71	\$6.71	84.05%	\$5.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93224	Ecg monit/reprt up to 48 hrs		\$77.89	\$74.90	\$74.90	\$74.90	103.99%	\$71.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93225	Ecg monit/reprt up to 48 hrs		\$19.87	\$19.20	\$19.20	\$19.20	103.47%	\$18.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93226	Ecg monit/reprt up to 48 hrs		\$33.03	\$37.43	\$37.43	\$37.43	88.24%	\$33.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93227	Ecg monit/reprt up to 48 hrs		\$18.90	\$18.27	\$18.27	\$18.27	103.46%	\$17.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93228	Remote 30 day ecg rev/report		\$21.24	\$24.99	\$24.99	\$24.99	84.98%	\$21.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93229	Remote 30 day ecg tech supp		\$778.27	\$855.29	\$855.29	\$855.29	91.00%	\$778.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93260	Prgrmg dev eval impltbl sys	26	\$38.36	\$40.91	\$40.91	\$40.91	93.76%	\$38.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93260	Prgrmg dev eval impltbl sys		\$66.50	\$77.64	\$77.64	\$77.64	85.65%	\$66.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93261	Interrogate subq defib	26	\$33.53	\$35.19	\$35.19	\$35.19	95.27%	\$33.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93261	Interrogate subq defib		\$61.62	\$71.57	\$71.57	\$71.57	86.09%	\$61.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93264	Rem mntr wrls p-art prs snr		\$42.19	\$52.33	\$35.15	\$52.33	80.62%	\$42.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93268	Ecg record/review		\$160.73	\$182.94	\$182.94	\$182.94	87.86%	\$160.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93270	Remote 30 day ecg rev/report		\$8.99	\$8.69	\$8.69	\$8.69	103.48%	\$8.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93271	Ecg/monitoring and analysis		\$132.97	\$150.30	\$150.30	\$150.30	88.47%	\$132.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93272	Ecg/review interpret only		\$24.79	\$23.96	\$23.96	\$23.96	103.48%	\$22.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93278	Ecg/signal-averaged	26	\$13.37	\$12.52	\$12.52	\$12.52	106.79%	\$11.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93279	Prgrmg dev eval pm/ldls pm	26	\$29.45	\$30.77	\$30.77	\$30.77	95.70%	\$29.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93279	Prgrmg dev eval pm/ldls pm		\$59.53	\$69.25	\$69.25	\$69.25	85.96%	\$59.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93280	Pm device progr eval dual	26	\$35.34	\$36.55	\$36.55	\$36.55	96.68%	\$34.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93280	Pm device progr eval dual	TC	\$38.94	\$44.44	\$44.44	\$44.44	87.62%	\$38.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93280	Pm device progr eval dual		\$70.45	\$80.99	\$80.99	\$80.99	86.98%	\$70.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93281	Pm device progr eval multi	26	\$41.27	\$40.91	\$40.91	\$40.91	100.87%	\$38.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93281	Pm device progr eval multi		\$74.48	\$86.06	\$86.06	\$86.06	86.55%	\$74.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93282	Prgrmg eval implantable dfb	26	\$38.52	\$40.56	\$40.56	\$40.56	94.96%	\$38.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93282	Prgrmg eval implantable dfb		\$70.93	\$81.50	\$81.50	\$81.50	87.03%	\$70.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93283	Prgrmg eval implantable dfb	26	\$46.98	\$55.11	\$55.11	\$55.11	85.25%	\$46.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93283	Prgrmg eval implantable dfb		\$86.22	\$99.90	\$99.90	\$99.90	86.30%	\$86.22	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Cardiology	93284	Prgrmg eval implantable dfb	26	\$57.65	\$59.87	\$59.87	\$59.87	96.29%	\$56.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93284	Prgrmg eval implantable dfb	TC	\$41.90	\$47.95	\$47.95	\$47.95	87.39%	\$41.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93284	Prgrmg eval implantable dfb		\$92.88	\$107.81	\$107.81	\$107.81	86.15%	\$92.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93285	Prgrmg dev eval scrms ip	26	\$24.08	\$25.01	\$25.01	\$25.01	96.29%	\$23.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93285	Prgrmg dev eval scrms ip		\$53.78	\$61.74	\$61.74	\$61.74	87.11%	\$53.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93286	Peri-px eval pm/ldls pm ip	26	\$12.55	\$14.55	\$14.55	\$14.55	86.27%	\$12.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93287	Peri-px device eval & prgr	26	\$18.77	\$21.33	\$21.33	\$21.33	87.98%	\$18.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93288	Interrog evl pm/ldls pm ip	26	\$19.75	\$20.31	\$20.31	\$20.31	97.23%	\$19.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93288	Interrog evl pm/ldls pm ip	TC	\$33.03	\$37.78	\$37.78	\$37.78	87.43%	\$33.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93288	Interrog evl pm/ldls pm ip		\$50.36	\$58.09	\$58.09	\$58.09	86.69%	\$50.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93289	Interrog device eval heart	26	\$35.64	\$35.81	\$35.81	\$35.81	99.54%	\$34.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93289	Interrog device eval heart	TC	\$33.33	\$38.13	\$38.13	\$38.13	87.41%	\$33.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93289	Interrog device eval heart		\$63.97	\$73.94	\$73.94	\$73.94	86.52%	\$63.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93290	Interrog dev eval icpms ip	26	\$17.62	\$20.59	\$20.59	\$20.59	85.59%	\$17.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93290	Interrog dev eval icpms ip		\$47.99	\$54.86	\$54.86	\$54.86	87.47%	\$47.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93291	Interrog dev eval scrms ip	26	\$18.57	\$17.60	\$17.60	\$17.60	105.53%	\$16.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93291	Interrog dev eval scrms ip	TC	\$29.19	\$32.87	\$32.87	\$32.87	88.80%	\$29.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93291	Interrog dev eval scrms ip		\$44.30	\$50.47	\$50.47	\$50.47	87.77%	\$44.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93294	Rem interrog evl pm/ldls pm		\$29.91	\$29.30	\$29.30	\$29.30	102.10%	\$27.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93295	Dev interrog remote 1/2/mlt		\$37.70	\$36.37	\$36.37	\$36.37	103.65%	\$34.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93296	Rem interrog evl pm/ids		\$24.23	\$22.36	\$22.36	\$22.36	108.37%	\$21.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93297	Rem interrog dev eval icpms		\$21.77	\$62.44	\$62.44	\$62.44	34.87%	\$21.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93298	Rem interrog dev eval scrms		\$24.08	\$105.83	\$105.83	\$105.83	22.75%	\$24.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93303	Echo transthoracic	26	\$66.85	\$60.84	\$60.84	\$60.84	109.87%	\$57.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93303	Echo transthoracic		\$195.33	\$228.17	\$228.17	\$228.17	85.61%	\$195.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93304	Echo transthoracic	26	\$36.95	\$35.46	\$35.46	\$35.46	104.22%	\$33.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93304	Echo transthoracic		\$137.80	\$161.84	\$161.84	\$161.84	85.15%	\$137.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93306	Tte w/doppler complete	26	\$57.72	\$68.24	\$68.24	\$68.24	84.58%	\$57.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93306	Tte w/doppler complete	TC	\$139.38	\$135.42	\$135.42	\$135.42	102.92%	\$128.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93306	Tte w/doppler complete		\$215.13	\$203.67	\$203.67	\$203.67	105.63%	\$193.48	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Cardiology	93307	Tte w/o doppler complete	26	\$44.68	\$42.91	\$42.91	\$42.91	104.12%	\$40.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93307	Tte w/o doppler complete		\$145.78	\$141.61	\$141.61	\$141.61	102.95%	\$134.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93308	Tte f-up or lmtd	26	\$25.49	\$24.64	\$24.64	\$24.64	103.44%	\$23.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93308	Tte f-up or lmtd	TC	\$65.26	\$78.01	\$78.01	\$78.01	83.65%	\$65.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93308	Tte f-up or lmtd		\$107.64	\$102.66	\$102.66	\$102.66	104.85%	\$97.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93312	Echo transesophageal	26	\$89.14	\$104.96	\$104.96	\$104.96	84.92%	\$89.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93313	Echo transesophageal		\$11.39	\$11.03	\$11.03	\$11.03	103.29%	\$10.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93314	Echo transesophageal	26	\$73.93	\$87.16	\$87.16	\$87.16	84.82%	\$73.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93314	Echo transesophageal		\$198.84	\$233.10	\$233.10	\$233.10	85.30%	\$198.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93315	Echo transesophageal	26	\$116.98	\$124.63	\$124.63	\$124.63	93.86%	\$116.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93316	Echo transesophageal		\$25.94	\$25.36	\$25.36	\$25.36	102.27%	\$24.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93317	Echo transesophageal	26	\$73.70	\$86.42	\$86.42	\$86.42	85.28%	\$73.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93318	Echo transesophageal intraop	26	\$92.17	\$99.98	\$99.98	\$99.98	92.19%	\$92.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93320	Doppler echo exam heart	26	\$18.20	\$17.58	\$17.58	\$17.58	103.51%	\$16.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93320	Doppler echo exam heart		\$54.04	\$52.56	\$52.56	\$52.56	102.82%	\$49.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93321	Doppler echo exam heart	26	\$7.30	\$7.06	\$7.06	\$7.06	103.39%	\$6.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93321	Doppler echo exam heart		\$26.90	\$25.99	\$25.99	\$25.99	103.51%	\$24.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93325	Doppler color flow add-on	26	\$3.16	\$3.05	\$3.05	\$3.05	103.61%	\$2.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93325	Doppler color flow add-on	TC	\$22.13	\$21.38	\$21.38	\$21.38	103.50%	\$20.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93325	Doppler color flow add-on		\$25.30	\$24.43	\$24.43	\$24.43	103.56%	\$23.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93350	Stress tte only	26	\$70.33	\$68.24	\$68.24	\$68.24	103.06%	\$64.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93350	Stress tte only		\$198.27	\$192.17	\$192.17	\$192.17	103.17%	\$182.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93351	Stress tte complete	26	\$81.39	\$81.75	\$81.75	\$81.75	99.56%	\$77.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93351	Stress tte complete	TC	\$141.93	\$158.83	\$158.83	\$158.83	89.36%	\$141.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93351	Stress tte complete		\$223.34	\$240.59	\$240.59	\$240.59	92.83%	\$223.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93352	Admin ecg contrast agent		\$31.15	\$36.02	\$36.02	\$36.02	86.48%	\$31.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93355	Echo transesophageal (tee)		\$187.06	\$221.18	\$221.18	\$221.18	84.57%	\$187.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93356	Myocrd strain img spckl trck		\$39.74	\$38.40	\$11.41	\$38.40	103.50%	\$36.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93451	Right heart cath	26	\$125.03	\$126.61	\$126.61	\$126.61	98.75%	\$120.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93452	Left hrt cath w/ventrclgrphy	26	\$218.98	\$228.37	\$228.37	\$228.37	95.89%	\$216.95	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Cardiology	93453	R&I hrt cath w/ventriclgrphy	26	\$287.18	\$304.93	\$304.93	\$304.93	94.18%	\$287.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93454	Coronary artery angio s&i	26	\$220.78	\$230.69	\$230.69	\$230.69	95.70%	\$219.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93455	Coronary art/grft angio s&i	26	\$254.90	\$268.75	\$268.75	\$268.75	94.85%	\$254.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93456	R hrt coronary artery angio	26	\$282.71	\$300.58	\$300.58	\$300.58	94.05%	\$282.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93457	R hrt art/grft angio	26	\$317.01	\$337.48	\$337.48	\$337.48	93.94%	\$317.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93458	L hrt artery/ventricle angio	26	\$269.38	\$284.66	\$284.66	\$284.66	94.63%	\$269.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93458	L hrt artery/ventricle angio		\$933.52	\$1,061.38	\$1,061.38	\$1,061.38	87.95%	\$933.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93459	L hrt art/grft angio	26	\$303.30	\$322.44	\$322.44	\$322.44	94.06%	\$303.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93460	R&I hrt art/ventricle angio	26	\$337.97	\$360.65	\$360.65	\$360.65	93.71%	\$337.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93461	R&I hrt art/ventricle angio	26	\$372.76	\$398.70	\$398.70	\$398.70	93.49%	\$372.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93462	L hrt cath trnsptl puncture		\$170.70	\$200.43	\$200.43	\$200.43	85.17%	\$170.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93463	Drug admin & hemodynmc meas		\$91.26	\$96.05	\$96.05	\$96.05	95.01%	\$91.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93464	Exercise w/hemodynamic meas	26	\$80.30	\$87.26	\$87.26	\$87.26	92.02%	\$80.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93503	Insert/place heart catheter		\$88.95	\$85.73	\$85.73	\$85.73	103.75%	\$81.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93505	Biopsy of heart lining	26	\$184.89	\$220.43	\$220.43	\$220.43	83.88%	\$184.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93563	Njx cgen car cth slctv c ang		\$47.32	\$50.23	\$50.23	\$50.23	94.21%	\$47.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93565	Njx car cth slctv lv/la ang		\$37.52	\$26.04	\$26.04	\$26.04	144.09%	\$24.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93566	Njx car cth slctv rv/ra ang		\$46.72	\$25.21	\$25.21	\$25.21	185.30%	\$23.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93567	Njx car cth sprlv aortgrphy		\$52.80	\$36.30	\$36.30	\$36.30	145.44%	\$34.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93568	Njx car cth nslc p-art angrp		\$47.05	\$45.00	\$45.00	\$45.00	104.56%	\$42.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93571	Heart flow reserve measure	26	\$71.09	\$69.66	\$69.66	\$69.66	102.05%	\$66.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93572	Heart flow reserve measure	26	\$52.32	\$50.70	\$50.70	\$50.70	103.19%	\$48.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93580	Transcath closure of asd		\$789.08	\$942.36	\$942.36	\$942.36	83.73%	\$789.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93581	Transcath closure of vsd		\$1,072.32	\$1,277.54	\$1,277.54	\$1,277.54	83.94%	\$1,072.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93582	Perq transcath closure pda		\$600.85	\$637.47	\$637.47	\$637.47	94.26%	\$600.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93583	Perq transcath septal reduxn		\$668.74	\$715.55	\$715.55	\$715.55	93.46%	\$668.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93590	Perq transcath cls mitral		\$102.38	\$1,049.97	\$1,049.97	\$1,049.97	9.75%	\$102.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93592	Perq transcath closure each		\$322.11	\$378.64	\$378.64	\$378.64	85.07%	\$322.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93609	Map tachycardia add-on	26	\$225.41	\$263.41	\$263.41	\$263.41	85.57%	\$225.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93610	Intra-atrial pacing	26	\$133.49	\$155.81	\$155.81	\$155.81	85.68%	\$133.49	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Cardiology	93612	Intraventricular pacing	26	\$132.38	\$153.58	\$153.58	\$153.58	86.20%	\$132.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93613	Electrophys map 3d add-on		\$301.19	\$281.70	\$281.70	\$281.70	106.92%	\$267.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93616	Esophageal recording	26	\$60.08	\$57.43	\$57.43	\$57.43	104.62%	\$54.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93619	Electrophysiology evaluation	26	\$317.00	\$372.00	\$372.00	\$372.00	85.22%	\$317.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93620	Electrophysiology evaluation	26	\$623.57	\$596.75	\$596.75	\$596.75	104.49%	\$566.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93621	Electrophysiology evaluation	26	\$82.77	\$79.35	\$79.35	\$79.35	104.32%	\$75.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93622	Electrophysiology evaluation	26	\$177.42	\$163.72	\$163.72	\$163.72	108.37%	\$155.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93623	Stimulation pacing heart	26	\$85.37	\$66.51	\$66.51	\$66.51	128.37%	\$63.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93640	Evaluation heart device	26	\$190.53	\$170.34	\$170.34	\$170.34	111.85%	\$161.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93641	Electrophysiology evaluation	26	\$310.37	\$297.65	\$297.65	\$297.65	104.28%	\$282.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93642	Electrophysiology evaluation	26	\$263.66	\$242.95	\$242.95	\$242.95	108.53%	\$230.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93650	Ablate heart dysrhythm focus		\$615.96	\$563.09	\$563.09	\$563.09	109.39%	\$534.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93653	Compre ep eval tx svt		\$677.95	\$807.77	\$807.77	\$807.77	83.93%	\$677.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93654	Compre ep eval tx vt		\$906.79	\$973.11	\$973.11	\$973.11	93.18%	\$906.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93655	Icar cath abltj dsrct arrhyt		\$309.68	\$296.07	\$296.07	\$296.07	104.60%	\$281.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93656	Compre ep eval abltj atr fib		\$909.65	\$916.00	\$916.00	\$916.00	99.31%	\$870.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93657	Tx l/r atrial fib addl		\$309.68	\$296.42	\$296.42	\$296.42	104.47%	\$281.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93660	Tilt table evaluation	26	\$97.72	\$90.31	\$90.31	\$90.31	108.21%	\$85.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93660	Tilt table evaluation		\$176.65	\$166.84	\$166.84	\$166.84	105.88%	\$158.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93662	Intracardiac ecg (ice)	26	\$75.81	\$69.40	\$69.40	\$69.40	109.24%	\$65.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93668	Peripheral vascular rehab		\$15.06	\$15.35	\$15.35	\$15.35	98.13%	\$14.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93701	Bioimpedance cv analysis		\$28.57	\$28.32	\$28.32	\$28.32	100.89%	\$26.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93750	Interrogation vad in person		\$34.65	\$51.25	\$39.33	\$51.25	67.61%	\$34.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93792	Pt/caregiver traing home inr		\$55.26	\$73.73	\$73.73	\$73.73	74.95%	\$55.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93793	Anticoag mgmt pt warfarin		\$11.80	\$11.57	\$11.57	\$11.57	101.96%	\$10.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93797	Cardiac rehab		\$14.10	\$17.53	\$8.77	\$17.53	80.43%	\$14.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Cardiology	93798	Cardiac rehab/monitor		\$21.95	\$26.42	\$13.45	\$26.42	83.08%	\$21.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92502	Ear and throat examination		\$87.62	\$96.88	\$96.88	\$96.88	90.44%	\$87.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92504	Ear microscopy examination		\$24.97	\$30.15	\$9.12	\$30.15	82.82%	\$24.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92507	Speech/hearing therapy		\$72.01	\$78.10	\$78.10	\$78.10	92.21%	\$72.01	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Ear, Nose, and Throat	92508	Speech/hearing therapy		\$20.79	\$25.02	\$25.02	\$25.02	83.10%	\$20.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92511	Nasopharyngoscopy		\$39.35	\$122.17	\$38.39	\$122.17	32.21%	\$39.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92512	Nasal function studies		\$53.91	\$66.53	\$27.27	\$66.53	81.04%	\$53.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92520	Laryngeal function studies		\$72.68	\$90.84	\$40.01	\$90.84	80.01%	\$72.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92521	Evaluation of speech fluency		\$115.64	\$136.05	\$136.05	\$136.05	85.00%	\$115.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92522	Evaluate speech production		\$96.89	\$113.67	\$113.67	\$113.67	85.24%	\$96.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92523	Speech sound lang comprehen		\$197.61	\$233.25	\$233.25	\$233.25	84.72%	\$197.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92524	Behavral qualit analys voice		\$95.36	\$111.92	\$111.92	\$111.92	85.21%	\$95.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92526	Oral function therapy		\$74.24	\$86.80	\$86.80	\$86.80	85.53%	\$74.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92537	Caloric vstblr test w/rec	26	\$25.60	\$30.92	\$30.92	\$30.92	82.79%	\$25.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92537	Caloric vstblr test w/rec		\$33.96	\$40.66	\$40.66	\$40.66	83.52%	\$33.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92538	Caloric vstblr test w/rec	26	\$13.20	\$15.95	\$15.95	\$15.95	82.76%	\$13.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92538	Caloric vstblr test w/rec		\$18.94	\$22.88	\$22.88	\$22.88	82.76%	\$18.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92540	Basic vestibular evaluation	26	\$64.34	\$77.17	\$77.17	\$77.17	83.37%	\$64.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92540	Basic vestibular evaluation		\$91.85	\$109.69	\$109.69	\$109.69	83.73%	\$91.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92541	Spontaneous nystagmus test		\$26.42	\$25.54	\$25.54	\$25.54	103.45%	\$24.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92542	Positional nystagmus test		\$30.29	\$29.28	\$29.28	\$29.28	103.47%	\$27.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92546	Sinusoidal rotational test		\$109.47	\$138.85	\$138.85	\$138.85	78.84%	\$109.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92547	Supplemental electrical test		\$9.29	\$11.22	\$11.22	\$11.22	82.82%	\$9.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92548	Cdp-sot 6 cond w/i&r		\$49.87	\$48.19	\$48.19	\$48.19	103.48%	\$45.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92550	Tympanometry & reflex thresh		\$18.66	\$22.18	\$22.18	\$22.18	84.11%	\$18.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92551	Pure tone hearing test air		\$12.97	\$13.24	\$13.24	\$13.24	97.93%	\$12.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92552	Pure tone audiometry air		\$30.70	\$39.88	\$39.88	\$39.88	76.97%	\$30.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92553	Audiometry air & bone		\$37.68	\$48.30	\$48.30	\$48.30	78.02%	\$37.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92555	Speech threshold audiometry		\$23.74	\$30.42	\$30.42	\$30.42	78.04%	\$23.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92556	Speech audiometry complete		\$36.80	\$47.24	\$47.24	\$47.24	77.89%	\$36.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92557	Comprehensive hearing test		\$31.05	\$37.16	\$31.90	\$37.16	83.56%	\$31.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92558	Evoked auditory test qual		\$11.09	\$9.48	\$8.43	\$9.48	116.93%	\$9.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92563	Tone decay hearing test		\$29.82	\$36.38	\$36.38	\$36.38	81.97%	\$29.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92565	Stenger test pure tone		\$17.35	\$22.01	\$22.01	\$22.01	78.84%	\$17.35	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Ear, Nose, and Throat	92567	Tympanometry		\$13.91	\$16.80	\$10.84	\$16.80	82.79%	\$13.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92568	Acoustic refl threshold tst		\$12.85	\$15.26	\$14.91	\$15.26	84.19%	\$12.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92570	Acoustic immittance testing		\$27.05	\$32.68	\$29.17	\$32.68	82.78%	\$27.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92575	Sensorineural acuity test		\$64.61	\$77.66	\$77.66	\$77.66	83.19%	\$64.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92579	Visual audiometry (vra)		\$37.89	\$45.07	\$37.01	\$45.07	84.07%	\$37.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92582	Conditioning play audiometry		\$71.06	\$91.06	\$91.06	\$91.06	78.04%	\$71.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92583	Select picture audiometry		\$46.97	\$59.86	\$59.86	\$59.86	78.46%	\$46.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92584	Electrocochleography		\$96.61	\$114.57	\$114.57	\$114.57	84.32%	\$96.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92587	Evoked auditory test limited	26	\$14.88	\$17.98	\$17.98	\$17.98	82.77%	\$14.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92587	Evoked auditory test limited	TC	\$4.26	\$3.78	\$3.78	\$3.78	112.68%	\$3.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92587	Evoked auditory test limited		\$22.87	\$21.76	\$21.76	\$21.76	105.11%	\$20.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92588	Evoked auditory tst complete	26	\$23.93	\$28.54	\$28.54	\$28.54	83.83%	\$23.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92588	Evoked auditory tst complete		\$35.63	\$33.73	\$33.73	\$33.73	105.64%	\$32.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92597	Oral speech device eval		\$65.56	\$73.87	\$73.87	\$73.87	88.75%	\$65.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92601	Cochlear implt f/up exam <7		\$136.09	\$161.90	\$122.99	\$161.90	84.06%	\$136.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92602	Reprogram cochlear implt <7		\$86.36	\$102.28	\$69.33	\$102.28	84.43%	\$86.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92603	Cochlear implt f/up exam 7/>		\$127.44	\$152.16	\$119.56	\$152.16	83.75%	\$127.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92604	Reprogram cochlear implt 7/>		\$77.14	\$91.84	\$66.25	\$91.84	83.99%	\$77.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92606	Non-speech device service		\$70.62	\$79.67	\$68.11	\$79.67	88.64%	\$70.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92607	Ex for speech device rx 1hr		\$108.32	\$127.25	\$127.25	\$127.25	85.13%	\$108.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92608	Ex for speech device rx addl		\$47.47	\$49.98	\$49.98	\$49.98	94.98%	\$47.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92609	Use of speech device service		\$90.91	\$106.11	\$106.11	\$106.11	85.67%	\$90.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92610	Evaluate swallowing function		\$74.44	\$87.48	\$71.36	\$87.48	85.09%	\$74.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92611	Motion fluoroscopy/swallow		\$80.00	\$94.21	\$94.21	\$94.21	84.92%	\$80.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92612	Endoscopy swallow (fees) vid		\$68.99	\$206.55	\$66.70	\$206.55	33.40%	\$68.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92613	Endoscopy swallow (fees) i&r		\$30.49	\$36.49	\$36.49	\$36.49	83.55%	\$30.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92625	Tinnitus assessment		\$61.85	\$68.43	\$61.07	\$68.43	90.38%	\$61.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92626	Eval aud funcj 1st hour		\$76.90	\$88.04	\$74.72	\$88.04	87.35%	\$76.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92627	Eval aud funcj ea addl 15		\$18.05	\$20.81	\$17.66	\$20.81	86.73%	\$18.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ear, Nose, and Throat	92640	Aud brainstem implt programg		\$92.47	\$110.63	\$93.81	\$110.63	83.58%	\$92.47	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - EEG Ambulatory Monitoring	95700	EEG CONT REC W/VID EEG TECH		\$279.03	\$259.12	\$259.12	\$259.12	107.68%	\$246.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95705	EEG W/O VID 2-12 HR UNMNTR		\$279.03	\$103.65	\$103.65	\$103.65	269.20%	\$98.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95708	EEG WO VID EA 12-26HR UNMNTR		\$529.19	\$155.47	\$155.47	\$155.47	340.38%	\$147.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95709	EEG W/O VID EA 12-26HR INTMT		\$529.19	\$861.30	\$861.30	\$861.30	61.44%	\$529.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95710	EEG W/O VID EA 12-26HR CONT		\$529.19	\$1,076.88	\$1,076.88	\$1,076.88	49.14%	\$529.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95712	VEEG 2-12 HR INTMT MNTR		\$279.03	\$518.23	\$518.23	\$518.23	53.84%	\$279.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95713	VEEG 2-12 HR CONT MNTR		\$529.19	\$647.79	\$647.79	\$647.79	81.69%	\$529.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95714	VEEG EA 12-26 HR UNMNTR		\$529.19	\$207.29	\$207.29	\$207.29	255.29%	\$196.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95715	VEEG EA 12-26HR INTMT MNTR		\$529.19	\$1,036.46	\$1,036.46	\$1,036.46	51.06%	\$529.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95716	VEEG EA 12-26HR CONT MNTR		\$1,001.14	\$1,295.58	\$1,295.58	\$1,295.58	77.27%	\$1,001.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95717	EEG PHYS/QHP 2-12 HR W/O VID		\$115.98	\$107.26	\$107.26	\$107.26	108.13%	\$101.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95718	EEG PHYS/QHP 2-12 HR W/VEEG		\$152.76	\$136.28	\$136.28	\$136.28	112.09%	\$129.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95719	EEG PHYS/QHP EA INCR W/O VID		\$179.52	\$162.65	\$162.65	\$162.65	110.37%	\$154.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95720	EEG PHY/QHP EA INCR W/VEEG		\$236.43	\$209.83	\$209.83	\$209.83	112.68%	\$199.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95721	EEG PHY/QHP>36<60 HR W/O VID		\$238.46	\$209.91	\$209.91	\$209.91	113.60%	\$199.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95722	EEG PHY/QHP>36<60 HR W/VEEG		\$289.30	\$254.32	\$254.32	\$254.32	113.75%	\$241.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95723	EEG PHY/QHP>60<84 HR W/O VID		\$295.64	\$254.47	\$254.47	\$254.47	116.18%	\$241.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95724	EEG PHY/QHP>60<84 HR W/VEEG		\$369.47	\$319.92	\$319.92	\$319.92	115.49%	\$303.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - EEG Ambulatory Monitoring	95726	EEG PHY/QHP>84 HR W/VEEG		\$466.96	\$410.71	\$410.71	\$410.71	113.70%	\$390.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Health Education	97535	Self care mngmt training		\$28.77	\$33.60	\$33.60	\$33.60	85.62%	\$28.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92002	Intrm oph exam new patient		\$72.61	\$87.56	\$45.50	\$87.56	82.92%	\$72.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92004	Compre oph exam new pt 1/>		\$136.32	\$153.23	\$93.99	\$153.23	88.97%	\$136.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92012	Intrm oph exam est patient		\$78.74	\$91.98	\$50.27	\$91.98	85.60%	\$78.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92014	Compre oph exam est pt 1/>		\$113.66	\$129.72	\$75.74	\$129.72	87.62%	\$113.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92018	Compl oph exam general anes		\$129.01	\$139.57	\$139.57	\$139.57	92.44%	\$129.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92019	Lmtd oph exam general anes		\$62.68	\$72.95	\$72.95	\$72.95	85.92%	\$62.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92020	Gonioscopy		\$24.76	\$28.11	\$20.40	\$28.11	88.07%	\$24.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92025	Cptrized corneal topography	26	\$30.78	\$19.38	\$19.38	\$19.38	158.82%	\$18.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92025	Cptrized corneal topography	TC	\$18.42	\$18.15	\$18.15	\$18.15	101.48%	\$17.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92025	Cptrized corneal topography		\$30.78	\$37.53	\$37.53	\$37.53	82.01%	\$30.78	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Ophthalmology	92060	Sensorimotor examination	26	\$38.04	\$37.10	\$37.10	\$37.10	102.54%	\$35.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92060	Sensorimotor examination		\$60.11	\$65.76	\$65.76	\$65.76	91.40%	\$60.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92065	Orthop traing pfrmd phys/qhp		\$56.49	\$40.57	\$33.56	\$40.57	139.23%	\$38.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92071	Contact lens fitting for tx		\$32.83	\$36.79	\$32.23	\$36.79	89.23%	\$32.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92072	Fitg c-lens keratoconus 1st		\$106.29	\$127.64	\$93.29	\$127.64	83.27%	\$106.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92081	Limited visual field xm	26	\$14.98	\$15.95	\$15.95	\$15.95	93.92%	\$14.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92081	Limited visual field xm		\$28.23	\$34.45	\$34.45	\$34.45	81.94%	\$28.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92082	Intermediate visual field xm	26	\$21.00	\$20.71	\$20.71	\$20.71	101.41%	\$19.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92082	Intermediate visual field xm		\$45.60	\$48.67	\$48.67	\$48.67	93.69%	\$45.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92083	Extended visual field xm	26	\$26.12	\$26.87	\$26.87	\$26.87	97.22%	\$25.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92083	Extended visual field xm	TC	\$31.00	\$38.83	\$38.83	\$38.83	79.83%	\$31.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92083	Extended visual field xm		\$66.56	\$65.70	\$65.70	\$65.70	101.31%	\$62.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92100	Serial tonometry		\$72.85	\$88.32	\$32.23	\$88.32	82.49%	\$72.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92132	Cmptr ophth dx img ant segmt	26	\$16.87	\$16.30	\$16.30	\$16.30	103.50%	\$15.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92132	Cmptr ophth dx img ant segmt	TC	\$13.28	\$16.05	\$16.05	\$16.05	82.75%	\$13.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92132	Cmptr ophth dx img ant segmt		\$31.35	\$32.35	\$32.35	\$32.35	96.91%	\$30.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92133	Cmptr ophth img optic nerve	26	\$22.15	\$21.41	\$21.41	\$21.41	103.47%	\$20.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92133	Cmptr ophth img optic nerve	TC	\$13.28	\$16.05	\$16.05	\$16.05	82.75%	\$13.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92133	Cmptr ophth img optic nerve		\$38.46	\$37.46	\$37.46	\$37.46	102.68%	\$35.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92134	Cptr ophth dx img post segmt	26	\$25.22	\$24.84	\$24.84	\$24.84	101.54%	\$23.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92134	Cptr ophth dx img post segmt	TC	\$16.97	\$16.75	\$16.75	\$16.75	101.32%	\$15.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92134	Cptr ophth dx img post segmt		\$38.46	\$41.59	\$41.59	\$41.59	92.48%	\$38.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92136	Ophthalmic biometry	26	\$25.10	\$30.31	\$30.31	\$30.31	82.81%	\$25.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92136	Ophthalmic biometry	TC	\$18.42	\$18.15	\$18.15	\$18.15	101.48%	\$17.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92136	Ophthalmic biometry		\$49.59	\$48.46	\$48.46	\$48.46	102.32%	\$46.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92201	Opscopy extnd rta draw uni/bi		\$25.69	\$25.19	\$22.74	\$25.19	101.99%	\$23.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92202	Opscopy extnd on/mac draw		\$16.21	\$15.66	\$14.61	\$15.66	103.52%	\$14.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92227	Img rta detcj/mntr ds staff		\$14.45	\$18.50	\$18.50	\$18.50	78.10%	\$14.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92228	Img rta detc/mntr ds phy/qhp		\$24.72	\$30.57	\$30.57	\$30.57	80.87%	\$24.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92230	Fluorescein angiography i&r		\$96.24	\$142.94	\$34.63	\$142.94	67.33%	\$96.24	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Ophthalmology	92235	Fluorescein angrph mltiframe	26	\$43.75	\$42.27	\$42.27	\$42.27	103.51%	\$40.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92235	Fluorescein angrph mltiframe		\$117.68	\$169.43	\$169.43	\$169.43	69.46%	\$117.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92240	Icg angiography i&r uni/bi		\$167.29	\$195.89	\$195.89	\$195.89	85.40%	\$167.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92242	Fluorescein&icg angiography	26	\$56.24	\$54.08	\$54.08	\$54.08	103.99%	\$51.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92242	Fluorescein&icg angiography		\$222.62	\$293.76	\$293.76	\$293.76	75.78%	\$222.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92250	Fundus photography w/i&r	26	\$21.79	\$20.71	\$20.71	\$20.71	105.23%	\$19.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92250	Fundus photography w/i&r	TC	\$14.16	\$17.45	\$17.45	\$17.45	81.14%	\$14.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92250	Fundus photography w/i&r		\$39.48	\$38.16	\$38.16	\$38.16	103.47%	\$36.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92273	Full field erg w/i&r		\$108.69	\$131.24	\$131.24	\$131.24	82.82%	\$108.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92274	Multifocal erg w/i&r		\$95.28	\$92.87	\$92.87	\$92.87	102.59%	\$88.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92283	Extnd color vision xm		\$46.40	\$56.73	\$56.73	\$56.73	81.79%	\$46.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92284	Dx dark adaptation exam i&r		\$40.00	\$39.18	\$39.18	\$39.18	102.09%	\$37.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92285	External ocular photography	26	\$3.10	\$3.00	\$3.00	\$3.00	103.18%	\$2.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92285	External ocular photography	TC	\$19.83	\$21.31	\$21.31	\$21.31	93.07%	\$19.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92285	External ocular photography		\$19.83	\$24.31	\$24.31	\$24.31	81.57%	\$19.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92286	Ant sgm img i&r speclr mic		\$41.30	\$40.26	\$40.26	\$40.26	102.58%	\$38.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92287	Ant sgm img ir flrscn angrph	26	\$30.50	\$29.82	\$29.82	\$29.82	102.28%	\$28.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92287	Ant sgm img ir flrscn angrph		\$124.50	\$149.27	\$149.27	\$149.27	83.40%	\$124.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92311	Contact lens fitg aphakia 1		\$89.46	\$106.62	\$51.24	\$106.62	83.91%	\$89.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92312	Contact lens fitg aphakia ou		\$103.75	\$127.30	\$61.06	\$127.30	81.50%	\$103.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92313	C-lens fitg corneoslrl lens		\$85.02	\$101.60	\$42.71	\$101.60	83.68%	\$85.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92325	Modification of contact lens		\$39.13	\$43.04	\$43.04	\$43.04	90.92%	\$39.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Ophthalmology	92326	Replacement of contact lens		\$33.61	\$41.29	\$41.29	\$41.29	81.41%	\$33.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95004	Percut allergy skin tests		\$3.41	\$3.77	\$3.77	\$3.77	90.56%	\$3.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95012	Exhaled nitric oxide meas		\$16.19	\$19.90	\$19.90	\$19.90	81.34%	\$16.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95017	Perq & icut allg test venoms		\$7.75	\$8.93	\$3.68	\$8.93	86.75%	\$7.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95018	Perq&ic allg test drugs/biol		\$19.15	\$20.75	\$7.08	\$20.75	92.31%	\$19.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95024	Icut allergy test drug/bug		\$6.89	\$8.32	\$0.96	\$8.32	82.79%	\$6.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95027	Icut allergy titrate-airborn		\$4.71	\$5.17	\$5.17	\$5.17	91.15%	\$4.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95044	Allergy patch tests		\$4.28	\$5.18	\$5.18	\$5.18	82.59%	\$4.28	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	95070	Bronchial allergy tests		\$37.21	\$36.65	\$36.65	\$36.65	101.52%	\$34.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95076	Ingest challenge ini 120 min		\$102.23	\$126.99	\$73.71	\$126.99	80.50%	\$102.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95079	Ingest challenge addl 60 min		\$70.74	\$87.21	\$67.94	\$87.21	81.11%	\$70.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95115	Immunotherapy one injection		\$9.81	\$10.79	\$10.79	\$10.79	90.91%	\$9.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95117	Immunotherapy injections		\$12.62	\$12.89	\$12.89	\$12.89	97.88%	\$12.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95145	Antigen therapy services		\$28.60	\$38.04	\$2.99	\$38.04	75.18%	\$28.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95146	Antigen therapy services		\$52.69	\$70.99	\$2.99	\$70.99	74.22%	\$52.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95147	Antigen therapy services		\$50.96	\$68.19	\$2.99	\$68.19	74.74%	\$50.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95148	Antigen therapy services		\$75.34	\$101.48	\$2.99	\$101.48	74.24%	\$75.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95149	Antigen therapy services		\$99.74	\$135.13	\$2.99	\$135.13	73.81%	\$99.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95165	Antigen therapy services		\$12.91	\$15.26	\$3.34	\$15.26	84.61%	\$12.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95180	Rapid desensitization		\$115.12	\$141.85	\$102.59	\$141.85	81.15%	\$115.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95250	Cont gluc mntr phys/ghp eqp		\$125.73	\$154.98	\$154.98	\$154.98	81.13%	\$125.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95251	Cont gluc mntr analysis i&r		\$28.46	\$34.75	\$34.75	\$34.75	81.89%	\$28.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95812	Eeg 41-60 minutes	26	\$57.85	\$56.54	\$56.54	\$56.54	102.31%	\$53.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95812	Eeg 41-60 minutes		\$372.17	\$366.45	\$366.45	\$366.45	101.56%	\$348.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95813	Eeg extnd mntr 61-119 min	26	\$87.59	\$85.36	\$85.36	\$85.36	102.61%	\$81.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95813	Eeg extnd mntr 61-119 min	TC	\$299.36	\$377.48	\$377.48	\$377.48	79.30%	\$299.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95813	Eeg extnd mntr 61-119 min		\$470.87	\$462.84	\$462.84	\$462.84	101.73%	\$439.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95816	Eeg awake and drowsy	26	\$46.29	\$56.54	\$56.54	\$56.54	81.87%	\$46.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95816	Eeg awake and drowsy		\$283.97	\$412.99	\$412.99	\$412.99	68.76%	\$283.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95819	Eeg awake and asleep	26	\$46.29	\$56.54	\$56.54	\$56.54	81.87%	\$46.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95819	Eeg awake and asleep		\$383.38	\$476.01	\$476.01	\$476.01	80.54%	\$383.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95822	Eeg coma or sleep only	26	\$13.82	\$56.54	\$56.54	\$56.54	24.44%	\$13.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95829	Surgery electrocorticogram	26	\$188.13	\$326.95	\$326.95	\$326.95	57.54%	\$188.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95836	Ecog impltd brn npgt <30 d		\$108.58	\$105.54	\$105.54	\$105.54	102.88%	\$100.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95851	Range of motion measurements		\$18.02	\$22.47	\$7.75	\$22.47	80.20%	\$18.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95860	Muscle test one limb	26	\$41.49	\$50.49	\$50.49	\$50.49	82.18%	\$41.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95860	Muscle test one limb		\$95.73	\$116.31	\$116.31	\$116.31	82.31%	\$95.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95861	Muscle test 2 limbs	26	\$66.40	\$80.59	\$80.59	\$80.59	82.39%	\$66.40	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	95861	Muscle test 2 limbs		\$136.60	\$164.64	\$164.64	\$164.64	82.97%	\$136.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95863	Muscle test 3 limbs		\$177.63	\$214.19	\$214.19	\$214.19	82.93%	\$177.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95864	Muscle test 4 limbs	26	\$86.25	\$104.65	\$104.65	\$104.65	82.42%	\$86.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95864	Muscle test 4 limbs		\$199.12	\$239.45	\$239.45	\$239.45	83.16%	\$199.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95865	Muscle test larynx	26	\$84.14	\$82.02	\$82.02	\$82.02	102.58%	\$77.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95865	Muscle test larynx		\$88.28	\$153.45	\$153.45	\$153.45	57.53%	\$88.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95866	Muscle test hemidiaphragm		\$107.84	\$126.32	\$126.32	\$126.32	85.37%	\$107.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95867	Muscle test cran nerv unilat	26	\$41.53	\$41.28	\$41.28	\$41.28	100.61%	\$39.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95867	Muscle test cran nerv unilat		\$55.36	\$110.26	\$110.26	\$110.26	50.21%	\$55.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95868	Muscle test cran nerve bilat	26	\$53.18	\$62.00	\$62.00	\$62.00	85.77%	\$53.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95868	Muscle test cran nerve bilat		\$70.74	\$143.25	\$143.25	\$143.25	49.38%	\$70.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95869	Muscle test thor paraspinal	26	\$19.24	\$19.63	\$19.63	\$19.63	98.04%	\$18.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95869	Muscle test thor paraspinal		\$82.66	\$99.12	\$99.12	\$99.12	83.40%	\$82.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95870	Muscle test nonparaspinal	26	\$19.24	\$19.63	\$19.63	\$19.63	98.04%	\$18.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95870	Muscle test nonparaspinal		\$71.62	\$86.50	\$86.50	\$86.50	82.80%	\$71.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95873	Guide nerv destr elec stim	26	\$20.02	\$19.35	\$19.35	\$19.35	103.46%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95873	Guide nerv destr elec stim		\$70.71	\$73.33	\$73.33	\$73.33	96.43%	\$69.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95874	Guide nerv destr needle emg	26	\$20.02	\$19.35	\$19.35	\$19.35	103.46%	\$18.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95874	Guide nerv destr needle emg		\$66.53	\$79.29	\$79.29	\$79.29	83.91%	\$66.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95885	Musc tst done w/nerv tst lim	26	\$15.49	\$18.33	\$18.33	\$18.33	84.51%	\$15.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95885	Musc tst done w/nerv tst lim		\$53.16	\$64.25	\$64.25	\$64.25	82.74%	\$53.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95886	Musc test done w/n test comp	26	\$41.47	\$44.75	\$44.75	\$44.75	92.66%	\$41.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95886	Musc test done w/n test comp		\$83.14	\$99.44	\$99.44	\$99.44	83.61%	\$83.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95887	Musc tst done w/n tst nonext	26	\$32.55	\$36.57	\$36.57	\$36.57	89.02%	\$32.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95887	Musc tst done w/n tst nonext		\$71.42	\$85.64	\$85.64	\$85.64	83.40%	\$71.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95905	Motor &/ sens nrve cndj test		\$37.13	\$35.18	\$35.18	\$35.18	105.55%	\$33.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95907	Nvr cndj tst 1-2 studies	26	\$45.36	\$52.53	\$52.53	\$52.53	86.35%	\$45.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95907	Nvr cndj tst 1-2 studies		\$83.02	\$92.77	\$92.77	\$92.77	89.49%	\$83.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95908	Nrv cndj tst 3-4 studies	26	\$57.00	\$65.75	\$65.75	\$65.75	86.69%	\$57.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95908	Nrv cndj tst 3-4 studies		\$102.46	\$115.10	\$115.10	\$115.10	89.02%	\$102.46	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	95909	Nrv cndj tst 5-6 studies	26	\$68.06	\$78.62	\$78.62	\$78.62	86.57%	\$68.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95909	Nrv cndj tst 5-6 studies		\$122.77	\$138.13	\$138.13	\$138.13	88.88%	\$122.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95910	Nrv cndj test 7-8 studies	26	\$91.00	\$104.71	\$104.71	\$104.71	86.90%	\$91.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95910	Nrv cndj test 7-8 studies		\$161.56	\$180.35	\$180.35	\$180.35	89.58%	\$161.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95911	Nrv cndj test 9-10 studies	26	\$113.71	\$130.80	\$130.80	\$130.80	86.93%	\$113.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95911	Nrv cndj test 9-10 studies		\$195.61	\$217.31	\$217.31	\$217.31	90.02%	\$195.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95912	Nrv cndj test 11-12 studies	26	\$160.87	\$156.19	\$156.19	\$156.19	103.00%	\$148.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95912	Nrv cndj test 11-12 studies		\$250.99	\$253.84	\$253.84	\$253.84	98.88%	\$241.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95913	Nrv cndj test 13/> studies	26	\$190.67	\$184.65	\$184.65	\$184.65	103.26%	\$175.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95913	Nrv cndj test 13/> studies		\$265.43	\$292.81	\$292.81	\$292.81	90.65%	\$265.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95921	Autonomic nrv parasym inervj		\$74.32	\$90.54	\$90.54	\$90.54	82.09%	\$74.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95922	Autonomic nrv adrenrg inervj	26	\$41.69	\$45.66	\$45.66	\$45.66	91.31%	\$41.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95923	Autonomic nrv syst funj test	26	\$39.06	\$44.27	\$44.27	\$44.27	88.23%	\$39.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95923	Autonomic nrv syst funj test		\$105.38	\$126.57	\$126.57	\$126.57	83.26%	\$105.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95924	Ans parasymp & symp w/tilt		\$128.54	\$155.37	\$155.37	\$155.37	82.73%	\$128.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95925	Somatosensory testing	26	\$23.15	\$27.71	\$27.71	\$27.71	83.55%	\$23.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95926	Somatosensory testing	26	\$27.73	\$27.08	\$27.08	\$27.08	102.39%	\$25.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95929	C motor evoked lwr limbs	26	\$80.62	\$78.27	\$78.27	\$78.27	103.00%	\$74.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95930	Visual ep test cns w/i&r	26	\$18.11	\$18.33	\$18.33	\$18.33	98.81%	\$17.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95930	Visual ep test cns w/i&r		\$56.92	\$70.13	\$70.13	\$70.13	81.16%	\$56.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95933	Blink reflex test	26	\$25.69	\$31.14	\$31.14	\$31.14	82.50%	\$25.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95933	Blink reflex test		\$70.34	\$85.39	\$85.39	\$85.39	82.37%	\$70.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95937	Neuromuscular junction test	26	\$28.23	\$34.20	\$34.20	\$34.20	82.54%	\$28.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95937	Neuromuscular junction test		\$90.30	\$108.09	\$108.09	\$108.09	83.54%	\$90.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95938	Somatosensory testing	26	\$38.17	\$45.03	\$45.03	\$45.03	84.77%	\$38.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95938	Somatosensory testing		\$260.45	\$392.37	\$392.37	\$392.37	66.38%	\$260.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95939	C motor evoked upr&lwr limbs	26	\$100.43	\$117.51	\$117.51	\$117.51	85.47%	\$100.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95939	C motor evoked upr&lwr limbs		\$407.29	\$582.19	\$582.19	\$582.19	69.96%	\$407.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95955	Eeg during surgery	26	\$42.75	\$52.87	\$52.87	\$52.87	80.86%	\$42.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95955	Eeg during surgery		\$101.26	\$198.26	\$198.26	\$198.26	51.08%	\$101.26	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	95957	Eeg digital analysis	26	\$86.52	\$101.24	\$101.24	\$101.24	85.46%	\$86.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95957	Eeg digital analysis	TC	\$152.15	\$203.35	\$203.35	\$203.35	74.82%	\$152.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95957	Eeg digital analysis		\$235.35	\$304.59	\$304.59	\$304.59	77.27%	\$235.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95958	Eeg monitoring/function test	26	\$229.46	\$222.86	\$222.86	\$222.86	102.96%	\$211.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95961	Electrode stimulation brain	26	\$130.74	\$159.99	\$159.99	\$159.99	81.72%	\$130.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95961	Electrode stimulation brain		\$157.26	\$338.25	\$338.25	\$338.25	46.49%	\$157.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95962	Electrode stim brain add-on	26	\$140.44	\$171.10	\$171.10	\$171.10	82.08%	\$140.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95970	Alys npgt w/o prgrmg		\$18.07	\$18.88	\$18.18	\$18.88	95.71%	\$17.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95971	Alys smpl sp/pn npgt w/prgrm		\$39.77	\$48.78	\$38.61	\$48.78	81.53%	\$39.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95972	Alys cplx sp/pn npgt w/prgrm		\$55.53	\$57.79	\$39.91	\$57.79	96.09%	\$54.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95976	Alys smpl cn npgt prgrmg		\$37.49	\$39.39	\$38.69	\$39.39	95.18%	\$37.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95977	Alys cplx cn npgt prgrmg		\$55.66	\$52.48	\$51.42	\$52.48	106.07%	\$49.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95980	lo anal gast n-stim init		\$36.87	\$44.34	\$44.34	\$44.34	83.15%	\$36.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95981	lo anal gast n-stim subsq		\$32.60	\$40.11	\$17.68	\$40.11	81.28%	\$32.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95982	lo ga n-stim subsq w/reprog		\$49.16	\$60.52	\$35.98	\$60.52	81.24%	\$49.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95983	Alys brn npgt prgrmg 15 min		\$53.35	\$50.19	\$49.14	\$50.19	106.30%	\$47.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95984	Alys brn npgt prgrmg addl 15		\$44.87	\$43.77	\$43.07	\$43.77	102.52%	\$41.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95991	Spin/brain pump refill & main		\$94.16	\$114.54	\$39.53	\$114.54	82.21%	\$94.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	95992	Canalith repositioning proc		\$44.37	\$43.17	\$35.81	\$43.17	102.79%	\$41.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96004	Phys review of motion tests		\$76.15	\$107.41	\$107.41	\$107.41	70.90%	\$76.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96020	Functional brain mapping	26	\$130.35	\$155.75	\$155.75	\$155.75	83.69%	\$130.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96372	Ther/proph/diag inj sc/im		\$14.89	\$14.74	\$14.74	\$14.74	101.00%	\$14.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96373	Ther/proph/diag inj ia		\$15.40	\$19.30	\$19.30	\$19.30	79.80%	\$15.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96374	Ther/proph/diag inj iv push		\$44.12	\$38.14	\$38.14	\$38.14	115.69%	\$36.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96375	Tx/pro/dx inj new drug addon		\$16.45	\$15.90	\$15.90	\$15.90	103.47%	\$15.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96377	Applicaton on-body injector		\$21.24	\$18.95	\$18.95	\$18.95	112.09%	\$18.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96401	Chemo anti-neopl sq/im		\$62.46	\$74.75	\$74.75	\$74.75	83.56%	\$62.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96402	Chemo hormon antineopl sq/im		\$28.95	\$36.72	\$36.72	\$36.72	78.84%	\$28.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96405	Chemo intralesional up to 7		\$71.95	\$86.27	\$28.79	\$86.27	83.40%	\$71.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96406	Chemo intralesional over 7		\$112.40	\$134.70	\$44.62	\$134.70	83.44%	\$112.40	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	96409	Chemo iv push sngl drug		\$91.96	\$104.34	\$104.34	\$104.34	88.13%	\$91.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96411	Chemo iv push addl drug		\$53.07	\$56.61	\$56.61	\$56.61	93.75%	\$53.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96413	Chemo iv infusion 1 hr		\$129.87	\$135.05	\$135.05	\$135.05	96.16%	\$128.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96415	Chemo iv infusion addl hr		\$28.96	\$28.66	\$28.66	\$28.66	101.05%	\$27.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96416	Chemo prolong infuse w/pump		\$139.64	\$133.06	\$133.06	\$133.06	104.95%	\$126.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96417	Chemo iv infus each addl seq		\$63.30	\$66.33	\$66.33	\$66.33	95.43%	\$63.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96420	Chemo ia push tecniqe		\$24.00	\$106.55	\$106.55	\$106.55	22.52%	\$24.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96450	Chemotherapy into cns		\$162.87	\$166.66	\$75.87	\$166.66	97.73%	\$158.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96521	Refill/maint portable pump		\$115.16	\$129.55	\$129.55	\$129.55	88.89%	\$115.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96522	Refill/maint pump/resvr syst		\$100.29	\$122.89	\$122.89	\$122.89	81.61%	\$100.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96523	Irrig drug delivery device		\$21.95	\$26.15	\$26.15	\$26.15	83.93%	\$21.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96542	Chemotherapy injection		\$111.01	\$135.83	\$42.24	\$135.83	81.73%	\$111.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96567	Pdt dstr prmlg les skn		\$122.17	\$143.99	\$143.99	\$143.99	84.85%	\$122.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96900	Ultraviolet light therapy		\$21.12	\$26.21	\$26.21	\$26.21	80.57%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96904	Whole body photography		\$60.90	\$72.13	\$72.13	\$72.13	84.43%	\$60.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96910	Photochemotherapy with uv-b		\$102.35	\$124.63	\$124.63	\$124.63	82.12%	\$102.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96912	Photochemotherapy with uv-a		\$87.32	\$106.06	\$106.06	\$106.06	82.33%	\$87.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96920	Excimer lsr psriasis<250sqcm		\$133.89	\$161.59	\$63.80	\$161.59	82.86%	\$133.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	96921	Excimer lsr psriasis 250-500		\$146.91	\$177.07	\$72.26	\$177.07	82.97%	\$146.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	97802	Medical nutrition indiv in		\$32.97	\$37.34	\$32.43	\$37.34	88.30%	\$32.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	97803	Med nutrition indiv subseq		\$28.08	\$32.55	\$27.64	\$32.55	86.27%	\$28.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	97804	Medical nutrition group		\$14.14	\$17.08	\$15.67	\$17.08	82.81%	\$14.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98925	Osteopath manj 1-2 regions		\$26.15	\$32.03	\$22.92	\$32.03	81.63%	\$26.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98926	Osteopath manj 3-4 regions		\$37.45	\$45.96	\$34.74	\$45.96	81.49%	\$37.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98927	Osteopath manj 5-6 regions		\$48.46	\$59.88	\$46.21	\$59.88	80.93%	\$48.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98928	Osteopath manj 7-8 regions		\$59.56	\$73.02	\$58.30	\$73.02	81.56%	\$59.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98929	Osteopath manj 9-10 regions		\$69.92	\$85.89	\$69.77	\$85.89	81.40%	\$69.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98966	Hc pro phone call 5-10 min		\$13.68	\$13.22	\$11.47	\$13.22	103.48%	\$12.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98967	Hc pro phone call 11-20 min		\$24.82	\$24.34	\$22.23	\$24.34	101.98%	\$23.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	98968	Hc pro phone call 21-30 min		\$34.59	\$33.43	\$30.97	\$33.43	103.48%	\$31.76	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	99151	Mod sed same phys/qhp <5 yrs		\$64.20	\$62.82	\$23.91	\$62.82	102.20%	\$59.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99152	Mod sed same phys/qhp 5/>yrs		\$42.96	\$52.33	\$12.02	\$52.33	82.10%	\$42.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99153	Mod sed same phys/qhp ea		\$11.80	\$12.12	\$12.12	\$12.12	97.38%	\$11.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99155	Mod sed oth phys/qhp <5 yrs		\$55.24	\$81.45	\$81.45	\$81.45	67.82%	\$55.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99156	Mod sed oth phys/qhp 5/>yrs		\$61.72	\$74.06	\$74.06	\$74.06	83.33%	\$61.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99157	Mod sed other phys/qhp ea		\$50.82	\$58.99	\$58.99	\$58.99	86.15%	\$50.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99183	Hyperbaric oxygen therapy		\$111.51	\$104.95	\$104.95	\$104.95	106.25%	\$99.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99195	Phlebotomy		\$83.78	\$100.15	\$100.15	\$100.15	83.66%	\$83.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99202	Office o/p new sf 15 min		\$49.39	\$74.07	\$47.43	\$74.07	66.68%	\$49.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99203	Office o/p new low 30 min		\$102.87	\$113.82	\$81.93	\$113.82	90.38%	\$102.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99204	Office o/p new mod 45 min		\$136.94	\$170.26	\$133.46	\$170.26	80.43%	\$136.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99205	Office o/p new hi 60 min		\$186.02	\$224.32	\$181.55	\$224.32	82.93%	\$186.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99211	Off/op est may x req phy/qhp		\$19.74	\$24.19	\$8.77	\$24.19	81.60%	\$19.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99212	Office o/p est sf 10 min		\$47.49	\$58.09	\$35.30	\$58.09	81.76%	\$47.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99213	Office o/p est low 20 min		\$75.50	\$92.99	\$66.00	\$92.99	81.19%	\$75.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99214	Office o/p est mod 30 min		\$106.67	\$131.02	\$97.37	\$131.02	81.42%	\$106.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99215	Office o/p est hi 40 min		\$149.29	\$184.13	\$144.52	\$184.13	81.08%	\$149.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99221	1st hosp ip/obs sf/low 40		\$81.63	\$82.43	\$82.43	\$82.43	99.03%	\$78.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99222	1st hosp ip/obs moderate 55		\$112.35	\$130.38	\$130.38	\$130.38	86.17%	\$112.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99223	1st hosp ip/obs high 75		\$165.22	\$172.97	\$172.97	\$172.97	95.52%	\$164.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99231	Sbsq hosp ip/obs sf/low 25		\$34.04	\$49.35	\$49.35	\$49.35	68.98%	\$34.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99232	Sbsq hosp ip/obs moderate 35		\$65.13	\$78.74	\$78.74	\$78.74	82.72%	\$65.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99233	Sbsq hosp ip/obs high 50		\$97.95	\$118.43	\$118.43	\$118.43	82.71%	\$97.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99234	Hosp ip/obs sm dt sf/low 45		\$117.23	\$97.38	\$97.38	\$97.38	120.39%	\$92.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99235	Hosp ip/obs same date mod 70		\$154.60	\$159.14	\$159.14	\$159.14	97.15%	\$151.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99236	Hosp ip/obs same date hi 85		\$192.31	\$207.77	\$207.77	\$207.77	92.56%	\$192.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99238	Hosp ip/obs dschrg mgmt 30/<		\$62.30	\$81.40	\$81.40	\$81.40	76.54%	\$62.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99239	Hosp ip/obs dschrg mgmt >30		\$94.56	\$114.83	\$114.83	\$114.83	82.35%	\$94.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99281	Emr dpt vst mayx req phy/qhp		\$11.96	\$11.32	\$11.32	\$11.32	105.68%	\$10.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99282	Emergency dept visit sf mdm		\$35.04	\$41.32	\$41.32	\$41.32	84.80%	\$35.04	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	99283	Emergency dept visit low mdm		\$58.60	\$70.28	\$70.28	\$70.28	83.38%	\$58.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99284	Emergency dept visit mod mdm		\$104.15	\$119.55	\$119.55	\$119.55	87.12%	\$104.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99285	Emergency dept visit hi mdm		\$155.27	\$173.12	\$173.12	\$173.12	89.69%	\$155.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99291	Critical care first hour		\$241.33	\$276.82	\$211.28	\$276.82	87.18%	\$241.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99292	Critical care addl 30 min		\$107.47	\$120.38	\$106.36	\$120.38	89.27%	\$107.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99304	1st nf care sf/low mdm 25		\$138.56	\$80.70	\$80.70	\$80.70	171.70%	\$76.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99305	1st nf care moderate mdm 35		\$110.03	\$134.13	\$134.13	\$134.13	82.03%	\$110.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99306	1st nf care high mdm 50		\$150.32	\$183.01	\$183.01	\$183.01	82.14%	\$150.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99307	Sbsq nf care sf mdm 10		\$36.55	\$40.64	\$40.64	\$40.64	89.94%	\$36.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99308	Sbsq nf care low mdm 20		\$61.56	\$75.19	\$75.19	\$75.19	81.87%	\$61.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99309	Sbsq nf care moderate mdm 30		\$88.23	\$108.66	\$108.66	\$108.66	81.20%	\$88.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99310	Sbsq nf care high mdm 45		\$126.71	\$154.84	\$154.84	\$154.84	81.83%	\$126.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99315	Nf dschrg mgmt 30 min/less		\$67.50	\$82.18	\$82.18	\$82.18	82.14%	\$67.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99316	Nf dschrg mgmt 30 min+		\$108.28	\$131.68	\$131.68	\$131.68	82.23%	\$108.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99341	Home/res vst new sf mdm 15		\$54.24	\$49.65	\$49.65	\$49.65	109.24%	\$47.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99342	Home/res vst new low mdm 30		\$74.88	\$78.60	\$78.60	\$78.60	95.27%	\$74.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99344	Home/res vst new mod mdm 60		\$148.21	\$142.77	\$142.77	\$142.77	103.81%	\$135.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99345	Home/res vst new high mdm 75		\$167.06	\$202.97	\$202.97	\$202.97	82.31%	\$167.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99347	Home/res vst est sf mdm 20		\$49.11	\$45.60	\$45.60	\$45.60	107.71%	\$43.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99348	Home/res vst est low mdm 30		\$73.84	\$77.07	\$77.07	\$77.07	95.81%	\$73.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99349	Home/res vst est mod mdm 40		\$105.23	\$127.99	\$127.99	\$127.99	82.22%	\$105.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99350	Home/res vst est high mdm 60		\$153.47	\$186.29	\$186.29	\$186.29	82.38%	\$153.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99415	Prolng clin staff svc 1st hr		\$8.79	\$21.58	\$21.58	\$21.58	40.73%	\$8.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99416	Prolng clin staff svc ea add		\$7.49	\$10.09	\$10.09	\$10.09	74.23%	\$7.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99441	Phone e/m phys/qhp 5-10 min		\$47.05	\$57.81	\$35.03	\$57.81	81.38%	\$47.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99442	Phone e/m phys/qhp 11-20 min		\$75.50	\$92.72	\$65.73	\$92.72	81.43%	\$75.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99443	Phone e/m phys/qhp 21-30 min		\$106.23	\$131.02	\$97.37	\$131.02	81.08%	\$106.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99460	Init nb em per day hosp		\$96.05	\$92.54	\$92.54	\$92.54	103.79%	\$87.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99461	Init nb em per day non-fac		\$99.88	\$93.83	\$60.88	\$93.83	106.45%	\$89.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99462	Sbsq nb em per day hosp		\$42.76	\$40.70	\$40.70	\$40.70	105.05%	\$38.67	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Other Physician Services	99463	Same day nb discharge		\$116.38	\$108.20	\$108.20	\$108.20	107.56%	\$102.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99464	Attendance at delivery		\$72.11	\$72.36	\$72.36	\$72.36	99.65%	\$68.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99465	Nb resuscitation		\$149.99	\$141.67	\$141.67	\$141.67	105.87%	\$134.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99468	Neonate crit care initial		\$947.71	\$891.04	\$891.04	\$891.04	106.36%	\$846.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99469	Neonate crit care subsq		\$397.68	\$385.31	\$385.31	\$385.31	103.21%	\$366.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99471	Ped critical care initial		\$795.17	\$771.80	\$771.80	\$771.80	103.03%	\$733.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99472	Ped critical care subsq		\$408.43	\$395.07	\$395.07	\$395.07	103.38%	\$375.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99475	Ped crit care age 2-5 init		\$585.56	\$555.48	\$555.48	\$555.48	105.41%	\$527.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99476	Ped crit care age 2-5 subsq		\$354.02	\$334.44	\$334.44	\$334.44	105.85%	\$317.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99477	Init day hosp neonate care		\$352.63	\$337.55	\$337.55	\$337.55	104.47%	\$320.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99478	Ic lbw inf < 1500 gm subsq		\$139.86	\$132.91	\$132.91	\$132.91	105.23%	\$126.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99479	Ic lbw inf 1500-2500 g subsq		\$126.83	\$120.81	\$120.81	\$120.81	104.98%	\$114.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99480	Ic inf pbw 2501-5000 g subsq		\$122.12	\$116.05	\$116.05	\$116.05	105.23%	\$110.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Other Physician Services	99497	Advncd care plan 30 min		\$68.56	\$83.23	\$75.52	\$83.23	82.38%	\$68.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70100	X-ray exam of jaw <4views	26	\$9.21	\$8.77	\$8.77	\$8.77	105.03%	\$8.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70100	X-ray exam of jaw <4views	TC	\$26.06	\$31.82	\$31.82	\$31.82	81.89%	\$26.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70100	X-ray exam of jaw <4views		\$33.31	\$40.59	\$40.59	\$40.59	82.06%	\$33.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70110	X-ray exam of jaw 4/> views	26	\$12.20	\$11.82	\$11.82	\$11.82	103.23%	\$11.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70110	X-ray exam of jaw 4/> views	TC	\$27.51	\$33.57	\$33.57	\$33.57	81.94%	\$27.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70110	X-ray exam of jaw 4/> views		\$37.29	\$45.39	\$45.39	\$45.39	82.15%	\$37.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70130	X-ray exam of mastoids	26	\$17.43	\$16.17	\$16.17	\$16.17	107.83%	\$15.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70130	X-ray exam of mastoids		\$53.95	\$64.46	\$64.46	\$64.46	83.69%	\$53.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70140	X-ray exam of facial bones	26	\$8.11	\$9.45	\$9.45	\$9.45	85.78%	\$8.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70140	X-ray exam of facial bones	TC	\$19.68	\$23.76	\$23.76	\$23.76	82.83%	\$19.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70140	X-ray exam of facial bones		\$27.78	\$33.21	\$33.21	\$33.21	83.64%	\$27.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70150	X-ray exam of facial bones	26	\$12.20	\$12.50	\$12.50	\$12.50	97.57%	\$11.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70150	X-ray exam of facial bones	TC	\$30.13	\$36.73	\$36.73	\$36.73	82.03%	\$30.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70150	X-ray exam of facial bones		\$40.47	\$49.23	\$49.23	\$49.23	82.20%	\$40.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70160	X-ray exam of nasal bones	26	\$8.71	\$8.08	\$8.08	\$8.08	107.76%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70160	X-ray exam of nasal bones	TC	\$26.06	\$31.12	\$31.12	\$31.12	83.74%	\$26.06	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	70160	X-ray exam of nasal bones		\$33.04	\$39.20	\$39.20	\$39.20	84.28%	\$33.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70190	X-ray exam of eye sockets		\$32.41	\$39.14	\$39.14	\$39.14	82.80%	\$32.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70200	X-ray exam of eye sockets	26	\$12.20	\$13.53	\$13.53	\$13.53	90.20%	\$12.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70200	X-ray exam of eye sockets	TC	\$30.13	\$36.38	\$36.38	\$36.38	82.82%	\$30.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70200	X-ray exam of eye sockets		\$41.32	\$49.90	\$49.90	\$49.90	82.80%	\$41.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70210	X-ray exam of sinuses	26	\$6.98	\$8.43	\$8.43	\$8.43	82.77%	\$6.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70210	X-ray exam of sinuses	TC	\$20.84	\$25.16	\$25.16	\$25.16	82.82%	\$20.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70210	X-ray exam of sinuses		\$27.82	\$33.60	\$33.60	\$33.60	82.81%	\$27.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70220	X-ray exam of sinuses	26	\$8.66	\$10.46	\$10.46	\$10.46	82.78%	\$8.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70220	X-ray exam of sinuses	TC	\$23.74	\$28.67	\$28.67	\$28.67	82.81%	\$23.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70220	X-ray exam of sinuses		\$32.40	\$39.13	\$39.13	\$39.13	82.80%	\$32.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70240	X-ray exam pituitary saddle		\$28.37	\$34.27	\$34.27	\$34.27	82.79%	\$28.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70250	X-ray exam of skull	26	\$7.25	\$8.77	\$8.77	\$8.77	82.68%	\$7.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70250	X-ray exam of skull	TC	\$23.74	\$28.67	\$28.67	\$28.67	82.81%	\$23.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70250	X-ray exam of skull		\$31.00	\$37.44	\$37.44	\$37.44	82.81%	\$31.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70260	X-ray exam of skull	26	\$13.93	\$13.53	\$13.53	\$13.53	102.99%	\$12.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70260	X-ray exam of skull	TC	\$29.61	\$32.87	\$32.87	\$32.87	90.07%	\$29.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70260	X-ray exam of skull		\$43.52	\$46.40	\$46.40	\$46.40	93.79%	\$43.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70328	X-ray exam of jaw joint	26	\$7.25	\$8.77	\$8.77	\$8.77	82.68%	\$7.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70328	X-ray exam of jaw joint		\$29.84	\$36.03	\$36.03	\$36.03	82.81%	\$29.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70330	X-ray exam of jaw joints	26	\$12.20	\$11.48	\$11.48	\$11.48	106.25%	\$10.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70330	X-ray exam of jaw joints	TC	\$36.22	\$43.74	\$43.74	\$43.74	82.81%	\$36.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70330	X-ray exam of jaw joints		\$45.73	\$55.22	\$55.22	\$55.22	82.81%	\$45.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70336	Magnetic image jaw joint	26	\$57.99	\$69.74	\$69.74	\$69.74	83.15%	\$57.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70336	Magnetic image jaw joint		\$238.73	\$282.70	\$282.70	\$282.70	84.45%	\$238.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70355	Panoramic x-ray of jaws	26	\$9.21	\$9.79	\$9.79	\$9.79	94.07%	\$9.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70355	Panoramic x-ray of jaws	TC	\$12.54	\$9.04	\$9.04	\$9.04	138.74%	\$8.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70360	X-ray exam of neck	26	\$7.25	\$8.77	\$8.77	\$8.77	82.68%	\$7.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70360	X-ray exam of neck	TC	\$19.96	\$23.76	\$23.76	\$23.76	84.01%	\$19.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70360	X-ray exam of neck		\$27.22	\$32.53	\$32.53	\$32.53	83.68%	\$27.22	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	70450	Ct head/brain w/o dye	26	\$41.88	\$40.14	\$40.14	\$40.14	104.34%	\$38.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70450	Ct head/brain w/o dye	TC	\$75.77	\$72.48	\$72.48	\$72.48	104.54%	\$68.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70450	Ct head/brain w/o dye		\$117.65	\$112.62	\$112.62	\$112.62	104.47%	\$106.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70460	Ct head/brain w/dye	26	\$59.46	\$53.59	\$53.59	\$53.59	110.96%	\$50.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70460	Ct head/brain w/dye	TC	\$108.43	\$104.03	\$104.03	\$104.03	104.23%	\$98.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70460	Ct head/brain w/dye		\$164.22	\$157.62	\$157.62	\$157.62	104.19%	\$149.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70470	Ct head/brain w/o & w/dye	26	\$66.86	\$60.31	\$60.31	\$60.31	110.85%	\$57.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70470	Ct head/brain w/o & w/dye	TC	\$130.48	\$124.28	\$124.28	\$124.28	104.99%	\$118.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70470	Ct head/brain w/o & w/dye		\$193.22	\$184.60	\$184.60	\$184.60	104.67%	\$175.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70480	Ct orbit/ear/fossa w/o dye	26	\$50.77	\$61.00	\$61.00	\$61.00	83.23%	\$50.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70480	Ct orbit/ear/fossa w/o dye	TC	\$139.31	\$107.81	\$107.81	\$107.81	129.22%	\$102.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70480	Ct orbit/ear/fossa w/o dye		\$186.32	\$168.81	\$168.81	\$168.81	110.37%	\$160.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70481	Ct orbit/ear/fossa w/dye	26	\$55.78	\$53.59	\$53.59	\$53.59	104.09%	\$50.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70481	Ct orbit/ear/fossa w/dye		\$201.51	\$192.59	\$192.59	\$192.59	104.63%	\$182.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70482	Ct orbit/ear/fossa w/o&w/dye	26	\$62.37	\$59.96	\$59.96	\$59.96	104.01%	\$56.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70482	Ct orbit/ear/fossa w/o&w/dye		\$235.32	\$224.91	\$224.91	\$224.91	104.63%	\$213.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70486	Ct maxillofacial w/o dye	26	\$42.24	\$40.49	\$40.49	\$40.49	104.33%	\$38.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70486	Ct maxillofacial w/o dye	TC	\$100.45	\$95.97	\$95.97	\$95.97	104.67%	\$91.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70486	Ct maxillofacial w/o dye		\$142.69	\$136.45	\$136.45	\$136.45	104.57%	\$129.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70487	Ct maxillofacial w/dye	26	\$157.78	\$53.24	\$53.24	\$53.24	296.37%	\$50.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70487	Ct maxillofacial w/dye	TC	\$113.15	\$108.51	\$108.51	\$108.51	104.28%	\$103.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70487	Ct maxillofacial w/dye		\$168.93	\$161.75	\$161.75	\$161.75	104.44%	\$153.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70488	Ct maxillofacial w/o & w/dye	26	\$62.74	\$59.96	\$59.96	\$59.96	104.63%	\$56.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70488	Ct maxillofacial w/o & w/dye		\$205.93	\$196.16	\$196.16	\$196.16	104.98%	\$186.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70490	Ct soft tissue neck w/o dye	26	\$50.77	\$60.65	\$60.65	\$60.65	83.71%	\$50.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70490	Ct soft tissue neck w/o dye	TC	\$102.99	\$98.42	\$98.42	\$98.42	104.64%	\$93.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70490	Ct soft tissue neck w/o dye		\$166.43	\$159.07	\$159.07	\$159.07	104.63%	\$151.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70491	Ct soft tissue neck w/dye	26	\$72.50	\$65.41	\$65.41	\$65.41	110.85%	\$62.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70491	Ct soft tissue neck w/dye	TC	\$137.02	\$130.59	\$130.59	\$130.59	104.92%	\$124.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70491	Ct soft tissue neck w/dye		\$205.39	\$196.00	\$196.00	\$196.00	104.79%	\$186.20	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	70492	Ct sft tsue nck w/o & w/dye	26	\$75.72	\$76.19	\$76.19	\$76.19	99.39%	\$72.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70492	Ct sft tsue nck w/o & w/dye		\$247.03	\$235.17	\$235.17	\$235.17	105.04%	\$223.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70496	Ct angiography head	26	\$86.96	\$82.58	\$82.58	\$82.58	105.31%	\$78.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70496	Ct angiography head	TC	\$221.40	\$211.49	\$211.49	\$211.49	104.69%	\$200.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70496	Ct angiography head		\$307.82	\$294.07	\$294.07	\$294.07	104.68%	\$279.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70498	Ct angiography neck	26	\$86.96	\$82.58	\$82.58	\$82.58	105.31%	\$78.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70498	Ct angiography neck	TC	\$221.03	\$211.14	\$211.14	\$211.14	104.69%	\$200.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70498	Ct angiography neck		\$307.45	\$293.71	\$293.71	\$293.71	104.68%	\$279.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70540	Mri orbit/face/neck w/o dye	26	\$70.61	\$63.70	\$63.70	\$63.70	110.85%	\$60.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70540	Mri orbit/face/neck w/o dye	TC	\$187.82	\$178.26	\$178.26	\$178.26	105.36%	\$169.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70540	Mri orbit/face/neck w/o dye		\$254.07	\$241.96	\$241.96	\$241.96	105.00%	\$229.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70542	Mri orbit/face/neck w/dye	26	\$63.91	\$76.54	\$76.54	\$76.54	83.50%	\$63.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70543	Mri orbt/fac/nck w/o &w/dye	26	\$84.53	\$101.46	\$101.46	\$101.46	83.32%	\$84.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70543	Mri orbt/fac/nck w/o &w/dye	TC	\$275.11	\$260.56	\$260.56	\$260.56	105.58%	\$247.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70543	Mri orbt/fac/nck w/o &w/dye		\$380.78	\$362.02	\$362.02	\$362.02	105.18%	\$343.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70544	Mr angiography head w/o dye	26	\$58.69	\$56.64	\$56.64	\$56.64	103.62%	\$53.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70544	Mr angiography head w/o dye	TC	\$182.02	\$173.98	\$173.98	\$173.98	104.62%	\$165.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70544	Mr angiography head w/o dye		\$241.32	\$230.62	\$230.62	\$230.62	104.64%	\$219.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70545	Mr angiography head w/dye	26	\$58.69	\$56.64	\$56.64	\$56.64	103.62%	\$53.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70545	Mr angiography head w/dye		\$254.94	\$243.24	\$243.24	\$243.24	104.81%	\$231.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70546	Mr angiograph head w/o&w/dye	26	\$72.85	\$70.09	\$70.09	\$70.09	103.94%	\$66.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70546	Mr angiograph head w/o&w/dye		\$370.11	\$353.71	\$353.71	\$353.71	104.64%	\$336.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70547	Mr angiography neck w/o dye	26	\$58.69	\$56.64	\$56.64	\$56.64	103.62%	\$53.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70547	Mr angiography neck w/o dye	TC	\$182.38	\$174.33	\$174.33	\$174.33	104.62%	\$165.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70547	Mr angiography neck w/o dye		\$241.69	\$230.97	\$230.97	\$230.97	104.64%	\$219.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70548	Mr angiography neck w/dye	26	\$59.13	\$71.11	\$71.11	\$71.11	83.15%	\$59.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70549	Mr angiograph neck w/o&w/dye	26	\$86.88	\$84.96	\$84.96	\$84.96	102.26%	\$80.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70549	Mr angiograph neck w/o&w/dye		\$387.58	\$369.98	\$369.98	\$369.98	104.76%	\$351.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70551	Mri brain stem w/o dye	26	\$77.67	\$70.09	\$70.09	\$70.09	110.82%	\$66.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70551	Mri brain stem w/o dye	TC	\$145.36	\$139.00	\$139.00	\$139.00	104.57%	\$132.05	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	70551	Mri brain stem w/o dye		\$218.58	\$209.09	\$209.09	\$209.09	104.54%	\$198.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70552	Mri brain stem w/dye	26	\$87.92	\$84.29	\$84.29	\$84.29	104.31%	\$80.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70552	Mri brain stem w/dye	TC	\$215.08	\$204.48	\$204.48	\$204.48	105.19%	\$194.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70552	Mri brain stem w/dye		\$303.05	\$288.76	\$288.76	\$288.76	104.95%	\$274.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70553	Mri brain stem w/o & w/dye	26	\$107.61	\$108.18	\$108.18	\$108.18	99.47%	\$102.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70553	Mri brain stem w/o & w/dye	TC	\$243.55	\$231.47	\$231.47	\$231.47	105.22%	\$219.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70553	Mri brain stem w/o & w/dye		\$356.52	\$339.65	\$339.65	\$339.65	104.97%	\$322.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70554	Fmri brain by tech	26	\$89.53	\$100.39	\$100.39	\$100.39	89.18%	\$89.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70555	Fmri brain by phys/psych	26	\$98.79	\$117.97	\$117.97	\$117.97	83.74%	\$98.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70557	Mri brain w/o dye	26	\$129.54	\$152.41	\$152.41	\$152.41	84.99%	\$129.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70558	Mri brain w/dye	26	\$138.18	\$168.01	\$168.01	\$168.01	82.25%	\$138.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	70559	Mri brain w/o & w/dye	26	\$139.39	\$156.59	\$156.59	\$156.59	89.01%	\$139.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71045	X-ray exam chest 1 view	26	\$11.44	\$8.42	\$8.42	\$8.42	135.90%	\$8.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71045	X-ray exam chest 1 view	TC	\$15.02	\$18.15	\$18.15	\$18.15	82.75%	\$15.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71045	X-ray exam chest 1 view		\$27.06	\$26.57	\$26.57	\$26.57	101.85%	\$25.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71046	X-ray exam chest 2 views	26	\$17.56	\$10.46	\$10.46	\$10.46	167.86%	\$9.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71046	X-ray exam chest 2 views	TC	\$20.26	\$24.46	\$24.46	\$24.46	82.83%	\$20.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71046	X-ray exam chest 2 views		\$35.56	\$34.92	\$34.92	\$34.92	101.83%	\$33.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71047	X-ray exam chest 3 views	26	\$23.65	\$13.19	\$13.19	\$13.19	179.30%	\$12.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71047	X-ray exam chest 3 views	TC	\$25.48	\$30.77	\$30.77	\$30.77	82.81%	\$25.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71047	X-ray exam chest 3 views		\$44.06	\$43.96	\$43.96	\$43.96	100.23%	\$41.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71048	X-ray exam chest 4+ views	26	\$29.75	\$14.53	\$14.53	\$14.53	204.71%	\$13.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71048	X-ray exam chest 4+ views	TC	\$27.51	\$32.87	\$32.87	\$32.87	83.68%	\$27.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71048	X-ray exam chest 4+ views		\$52.58	\$47.41	\$47.41	\$47.41	110.91%	\$45.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71100	X-ray exam ribs uni 2 views	26	\$8.95	\$10.46	\$10.46	\$10.46	85.55%	\$8.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71100	X-ray exam ribs uni 2 views	TC	\$22.87	\$27.62	\$27.62	\$27.62	82.82%	\$22.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71100	X-ray exam ribs uni 2 views		\$31.81	\$38.08	\$38.08	\$38.08	83.54%	\$31.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71101	X-ray exam unilat ribs/chest	26	\$12.20	\$12.84	\$12.84	\$12.84	95.02%	\$12.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71101	X-ray exam unilat ribs/chest	TC	\$25.78	\$31.12	\$31.12	\$31.12	82.84%	\$25.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71101	X-ray exam unilat ribs/chest		\$39.79	\$43.96	\$43.96	\$43.96	90.51%	\$39.79	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	71110	X-ray exam ribs bil 3 views	26	\$11.48	\$13.86	\$13.86	\$13.86	82.82%	\$11.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71110	X-ray exam ribs bil 3 views	TC	\$31.32	\$31.82	\$31.82	\$31.82	98.42%	\$30.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71110	X-ray exam ribs bil 3 views		\$43.52	\$45.68	\$45.68	\$45.68	95.26%	\$43.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71111	X-ray exam ribs/chest4/> vws	26	\$14.79	\$15.49	\$15.49	\$15.49	95.46%	\$14.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71111	X-ray exam ribs/chest4/> vws	TC	\$32.45	\$39.18	\$39.18	\$39.18	82.82%	\$32.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71111	X-ray exam ribs/chest4/> vws		\$48.75	\$54.68	\$54.68	\$54.68	89.16%	\$48.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71120	X-ray exam breastbone 2/>vws	26	\$8.71	\$9.44	\$9.44	\$9.44	92.27%	\$8.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71120	X-ray exam breastbone 2/>vws	TC	\$21.12	\$25.51	\$25.51	\$25.51	82.78%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71120	X-ray exam breastbone 2/>vws		\$28.94	\$34.95	\$34.95	\$34.95	82.80%	\$28.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71130	X-ray strenoclavic jt 3/>vws	26	\$8.66	\$10.46	\$10.46	\$10.46	82.78%	\$8.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71130	X-ray strenoclavic jt 3/>vws		\$35.59	\$42.98	\$42.98	\$42.98	82.80%	\$35.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71250	Ct thorax dx c-	26	\$47.02	\$51.21	\$51.21	\$51.21	91.82%	\$47.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71250	Ct thorax dx c-	TC	\$94.28	\$90.01	\$90.01	\$90.01	104.75%	\$85.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71250	Ct thorax dx c-		\$147.59	\$141.22	\$141.22	\$141.22	104.51%	\$134.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71260	Ct thorax dx c+	26	\$57.56	\$55.30	\$55.30	\$55.30	104.09%	\$52.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71260	Ct thorax dx c+	TC	\$127.94	\$122.53	\$122.53	\$122.53	104.41%	\$116.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71260	Ct thorax dx c+		\$185.50	\$177.83	\$177.83	\$177.83	104.32%	\$168.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71270	Ct thorax dx c-/c+	26	\$61.40	\$59.02	\$59.02	\$59.02	104.04%	\$56.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71270	Ct thorax dx c-/c+	TC	\$157.70	\$150.22	\$150.22	\$150.22	104.98%	\$142.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71270	Ct thorax dx c-/c+		\$219.11	\$209.24	\$209.24	\$209.24	104.72%	\$198.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71275	Ct angiography chest	26	\$71.66	\$85.90	\$85.90	\$85.90	83.42%	\$71.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71275	Ct angiography chest	TC	\$223.94	\$213.94	\$213.94	\$213.94	104.67%	\$203.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71275	Ct angiography chest		\$313.51	\$299.84	\$299.84	\$299.84	104.56%	\$284.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71550	Mri chest w/o dye	26	\$76.27	\$69.07	\$69.07	\$69.07	110.43%	\$65.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71550	Mri chest w/o dye		\$382.48	\$362.58	\$362.58	\$362.58	105.49%	\$344.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71551	Mri chest w/dye	26	\$68.28	\$81.91	\$81.91	\$81.91	83.36%	\$68.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71552	Mri chest w/o & w/dye	26	\$89.26	\$106.83	\$106.83	\$106.83	83.56%	\$89.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71552	Mri chest w/o & w/dye		\$533.67	\$505.41	\$505.41	\$505.41	105.59%	\$480.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71555	Mri angio chest w or w/o dye	26	\$82.45	\$84.59	\$84.59	\$84.59	97.47%	\$80.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	71555	Mri angio chest w or w/o dye	TC	\$286.37	\$272.75	\$272.75	\$272.75	104.99%	\$259.11	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	71555	Mri angio chest w or w/o dye		\$374.86	\$357.34	\$357.34	\$357.34	104.90%	\$339.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72020	X-ray exam of spine 1 view	26	\$8.09	\$7.75	\$7.75	\$7.75	104.43%	\$7.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72020	X-ray exam of spine 1 view	TC	\$14.74	\$17.45	\$17.45	\$17.45	84.47%	\$14.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72020	X-ray exam of spine 1 view		\$21.14	\$25.20	\$25.20	\$25.20	83.90%	\$21.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72040	X-ray exam neck spine 2-3 vw	26	\$8.95	\$10.81	\$10.81	\$10.81	82.78%	\$8.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72040	X-ray exam neck spine 2-3 vw	TC	\$25.19	\$30.42	\$30.42	\$30.42	82.81%	\$25.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72040	X-ray exam neck spine 2-3 vw		\$34.14	\$41.23	\$41.23	\$41.23	82.80%	\$34.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72050	X-ray exam neck spine 4/5vws	26	\$16.01	\$12.84	\$12.84	\$12.84	124.69%	\$12.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72050	X-ray exam neck spine 4/5vws	TC	\$35.06	\$43.04	\$43.04	\$43.04	81.46%	\$35.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72050	X-ray exam neck spine 4/5vws		\$45.98	\$55.88	\$55.88	\$55.88	82.29%	\$45.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72052	X-ray exam neck spine 6/>vws	26	\$17.43	\$14.47	\$14.47	\$14.47	120.44%	\$13.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72052	X-ray exam neck spine 6/>vws	TC	\$41.74	\$50.75	\$50.75	\$50.75	82.25%	\$41.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72052	X-ray exam neck spine 6/>vws		\$53.71	\$65.22	\$65.22	\$65.22	82.35%	\$53.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72070	X-ray exam thorac spine 2vws	26	\$8.71	\$9.79	\$9.79	\$9.79	88.97%	\$8.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72070	X-ray exam thorac spine 2vws	TC	\$20.26	\$24.46	\$24.46	\$24.46	82.83%	\$20.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72070	X-ray exam thorac spine 2vws		\$28.36	\$34.25	\$34.25	\$34.25	82.80%	\$28.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72072	X-ray exam thorac spine 3vws	26	\$8.94	\$10.80	\$10.80	\$10.80	82.80%	\$8.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72072	X-ray exam thorac spine 3vws	TC	\$24.90	\$30.42	\$30.42	\$30.42	81.85%	\$24.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72072	X-ray exam thorac spine 3vws		\$33.83	\$41.22	\$41.22	\$41.22	82.08%	\$33.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72074	X-ray exam thorac spine4/>vw	26	\$9.78	\$11.82	\$11.82	\$11.82	82.75%	\$9.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72074	X-ray exam thorac spine4/>vw	TC	\$28.39	\$34.63	\$34.63	\$34.63	81.99%	\$28.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72074	X-ray exam thorac spine4/>vw		\$38.17	\$46.44	\$46.44	\$46.44	82.18%	\$38.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72080	X-ray exam thoracolmb 2/> vw	26	\$8.37	\$10.13	\$10.13	\$10.13	82.66%	\$8.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72080	X-ray exam thoracolmb 2/> vw	TC	\$21.42	\$25.86	\$25.86	\$25.86	82.82%	\$21.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72080	X-ray exam thoracolmb 2/> vw		\$29.79	\$35.99	\$35.99	\$35.99	82.78%	\$29.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72081	X-ray exam entire spi 1 vw	26	\$10.35	\$12.50	\$12.50	\$12.50	82.77%	\$10.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72081	X-ray exam entire spi 1 vw	TC	\$26.35	\$31.82	\$31.82	\$31.82	82.80%	\$26.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72081	X-ray exam entire spi 1 vw		\$36.70	\$44.33	\$44.33	\$44.33	82.80%	\$36.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72082	X-ray exam entire spi 2/3 vw	26	\$12.54	\$15.16	\$15.16	\$15.16	82.73%	\$12.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72082	X-ray exam entire spi 2/3 vw	TC	\$48.12	\$58.11	\$58.11	\$58.11	82.81%	\$48.12	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	72082	X-ray exam entire spi 2/3 vw		\$60.67	\$73.27	\$73.27	\$73.27	82.80%	\$60.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72083	X-ray exam entire spi 4/5 vw	26	\$14.30	\$17.28	\$17.28	\$17.28	82.77%	\$14.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72083	X-ray exam entire spi 4/5 vw	TC	\$53.94	\$65.47	\$65.47	\$65.47	82.39%	\$53.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72083	X-ray exam entire spi 4/5 vw		\$68.24	\$82.75	\$82.75	\$82.75	82.47%	\$68.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72084	X-ray exam entire spi 6/> vw	26	\$16.77	\$19.92	\$19.92	\$19.92	84.20%	\$16.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72084	X-ray exam entire spi 6/> vw	TC	\$68.96	\$82.92	\$82.92	\$82.92	83.16%	\$68.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72084	X-ray exam entire spi 6/> vw		\$85.73	\$102.84	\$102.84	\$102.84	83.36%	\$85.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72100	X-ray exam l-s spine 2/3 vws	26	\$10.46	\$10.81	\$10.81	\$10.81	96.75%	\$10.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72100	X-ray exam l-s spine 2/3 vws	TC	\$25.48	\$30.77	\$30.77	\$30.77	82.81%	\$25.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72100	X-ray exam l-s spine 2/3 vws		\$34.43	\$41.58	\$41.58	\$41.58	82.80%	\$34.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72110	X-ray exam l-2 spine 4/>vws	26	\$16.01	\$12.50	\$12.50	\$12.50	128.03%	\$11.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72110	X-ray exam l-2 spine 4/>vws	TC	\$33.90	\$41.64	\$41.64	\$41.64	81.42%	\$33.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72110	X-ray exam l-2 spine 4/>vws		\$52.24	\$54.14	\$54.14	\$54.14	96.49%	\$51.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72114	X-ray exam l-s spine bending	26	\$18.90	\$14.47	\$14.47	\$14.47	130.59%	\$13.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72114	X-ray exam l-s spine bending	TC	\$41.16	\$49.35	\$49.35	\$49.35	83.41%	\$41.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72114	X-ray exam l-s spine bending		\$64.43	\$63.82	\$63.82	\$63.82	100.96%	\$60.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72120	X-ray bend only l-s spine	26	\$11.48	\$10.81	\$10.81	\$10.81	106.18%	\$10.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72120	X-ray bend only l-s spine	TC	\$26.06	\$31.47	\$31.47	\$31.47	82.81%	\$26.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72120	X-ray bend only l-s spine		\$35.01	\$42.28	\$42.28	\$42.28	82.80%	\$35.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72125	Ct neck spine w/o dye	26	\$47.02	\$47.20	\$47.20	\$47.20	99.62%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72125	Ct neck spine w/o dye	TC	\$95.00	\$91.06	\$91.06	\$91.06	104.33%	\$86.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72125	Ct neck spine w/o dye		\$143.90	\$138.26	\$138.26	\$138.26	104.08%	\$131.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72126	Ct neck spine w/dye	26	\$63.99	\$57.66	\$57.66	\$57.66	110.98%	\$54.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72126	Ct neck spine w/dye		\$187.58	\$179.49	\$179.49	\$179.49	104.51%	\$170.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72127	Ct neck spine w/o & w/dye	26	\$66.51	\$59.96	\$59.96	\$59.96	110.92%	\$56.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72127	Ct neck spine w/o & w/dye		\$220.08	\$210.54	\$210.54	\$210.54	104.53%	\$200.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72128	Ct chest spine w/o dye	26	\$47.20	\$47.20	\$47.20	\$47.20	100.00%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72128	Ct chest spine w/o dye	TC	\$95.00	\$90.71	\$90.71	\$90.71	104.73%	\$86.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72128	Ct chest spine w/o dye		\$143.90	\$137.91	\$137.91	\$137.91	104.35%	\$131.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72129	Ct chest spine w/dye	26	\$64.34	\$57.93	\$57.93	\$57.93	111.06%	\$55.04	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	72129	Ct chest spine w/dye		\$188.94	\$180.82	\$180.82	\$180.82	104.49%	\$171.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72130	Ct chest spine w/o & w/dye	26	\$66.86	\$60.31	\$60.31	\$60.31	110.85%	\$57.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72131	Ct lumbar spine w/o dye	26	\$47.02	\$47.20	\$47.20	\$47.20	99.62%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72131	Ct lumbar spine w/o dye	TC	\$94.28	\$90.01	\$90.01	\$90.01	104.75%	\$85.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72131	Ct lumbar spine w/o dye		\$143.18	\$137.21	\$137.21	\$137.21	104.35%	\$130.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72132	Ct lumbar spine w/dye	26	\$60.01	\$57.66	\$57.66	\$57.66	104.08%	\$54.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72132	Ct lumbar spine w/dye		\$187.95	\$179.84	\$179.84	\$179.84	104.51%	\$170.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72133	Ct lumbar spine w/o & w/dye	26	\$66.86	\$59.96	\$59.96	\$59.96	111.50%	\$56.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72141	Mri neck spine w/o dye	26	\$73.22	\$70.09	\$70.09	\$70.09	104.47%	\$66.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72141	Mri neck spine w/o dye	TC	\$139.19	\$133.05	\$133.05	\$133.05	104.62%	\$126.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72141	Mri neck spine w/o dye		\$212.40	\$203.13	\$203.13	\$203.13	104.56%	\$192.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72142	Mri neck spine w/dye	26	\$87.92	\$84.91	\$84.91	\$84.91	103.54%	\$80.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72142	Mri neck spine w/dye		\$308.66	\$294.30	\$294.30	\$294.30	104.88%	\$279.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72146	Mri chest spine w/o dye	26	\$73.22	\$70.09	\$70.09	\$70.09	104.47%	\$66.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72146	Mri chest spine w/o dye	TC	\$139.19	\$132.70	\$132.70	\$132.70	104.89%	\$126.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72146	Mri chest spine w/o dye		\$212.40	\$202.78	\$202.78	\$202.78	104.74%	\$192.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72147	Mri chest spine w/dye	26	\$87.92	\$84.29	\$84.29	\$84.29	104.31%	\$80.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72147	Mri chest spine w/dye		\$306.12	\$291.57	\$291.57	\$291.57	104.99%	\$276.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72148	Mri lumbar spine w/o dye	26	\$77.67	\$70.44	\$70.44	\$70.44	110.27%	\$66.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72148	Mri lumbar spine w/o dye	TC	\$139.91	\$133.40	\$133.40	\$133.40	104.88%	\$126.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72148	Mri lumbar spine w/o dye		\$213.13	\$203.84	\$203.84	\$203.84	104.56%	\$193.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72149	Mri lumbar spine w/dye	26	\$87.92	\$84.56	\$84.56	\$84.56	103.97%	\$80.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72149	Mri lumbar spine w/dye	TC	\$215.05	\$204.48	\$204.48	\$204.48	105.17%	\$194.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72149	Mri lumbar spine w/dye		\$303.23	\$289.04	\$289.04	\$289.04	104.91%	\$274.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72156	Mri neck spine w/o & w/dye	26	\$116.67	\$108.53	\$108.53	\$108.53	107.50%	\$103.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72156	Mri neck spine w/o & w/dye	TC	\$245.35	\$232.87	\$232.87	\$232.87	105.36%	\$221.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72156	Mri neck spine w/o & w/dye		\$358.34	\$341.40	\$341.40	\$341.40	104.96%	\$324.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72157	Mri chest spine w/o & w/dye	26	\$116.39	\$108.53	\$108.53	\$108.53	107.24%	\$103.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72157	Mri chest spine w/o & w/dye	TC	\$246.09	\$233.57	\$233.57	\$233.57	105.36%	\$221.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72157	Mri chest spine w/o & w/dye		\$359.06	\$342.10	\$342.10	\$342.10	104.96%	\$325.00	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	72158	Mri lumbar spine w/o & w/dye	26	\$107.61	\$108.53	\$108.53	\$108.53	99.15%	\$103.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72158	Mri lumbar spine w/o & w/dye	TC	\$244.63	\$232.17	\$232.17	\$232.17	105.37%	\$220.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72158	Mri lumbar spine w/o & w/dye		\$357.61	\$340.70	\$340.70	\$340.70	104.96%	\$323.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72159	Mr angio spine w/o&w/dye	26	\$77.50	\$85.31	\$85.31	\$85.31	90.85%	\$77.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72170	X-ray exam of pelvis	26	\$8.71	\$8.43	\$8.43	\$8.43	103.28%	\$8.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72170	X-ray exam of pelvis	TC	\$17.06	\$20.61	\$20.61	\$20.61	82.79%	\$17.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72170	X-ray exam of pelvis		\$26.13	\$29.04	\$29.04	\$29.04	89.98%	\$26.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72190	X-ray exam of pelvis	26	\$11.15	\$12.17	\$12.17	\$12.17	91.63%	\$11.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72190	X-ray exam of pelvis	TC	\$26.35	\$31.82	\$31.82	\$31.82	82.80%	\$26.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72190	X-ray exam of pelvis		\$36.42	\$43.99	\$43.99	\$43.99	82.79%	\$36.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72191	Ct angiograph pelv w/o&w/dye	26	\$70.50	\$84.52	\$84.52	\$84.52	83.42%	\$70.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72192	Ct pelvis w/o dye	26	\$47.02	\$51.55	\$51.55	\$51.55	91.22%	\$47.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72192	Ct pelvis w/o dye	TC	\$93.91	\$89.66	\$89.66	\$89.66	104.74%	\$85.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72192	Ct pelvis w/o dye		\$147.58	\$141.20	\$141.20	\$141.20	104.52%	\$134.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72193	Ct pelvis w/dye	26	\$61.04	\$54.95	\$54.95	\$54.95	111.09%	\$52.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72193	Ct pelvis w/dye	TC	\$197.63	\$189.83	\$189.83	\$189.83	104.11%	\$180.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72193	Ct pelvis w/dye		\$273.38	\$244.78	\$244.78	\$244.78	111.69%	\$232.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72194	Ct pelvis w/o & w/dye	26	\$63.99	\$57.31	\$57.31	\$57.31	111.66%	\$54.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72194	Ct pelvis w/o & w/dye	TC	\$197.63	\$212.96	\$212.96	\$212.96	92.80%	\$197.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72194	Ct pelvis w/o & w/dye		\$273.38	\$270.27	\$270.27	\$270.27	101.15%	\$256.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72195	Mri pelvis w/o dye	26	\$57.72	\$69.42	\$69.42	\$69.42	83.15%	\$57.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72195	Mri pelvis w/o dye	TC	\$184.92	\$175.46	\$175.46	\$175.46	105.39%	\$166.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72195	Mri pelvis w/o dye		\$257.08	\$244.88	\$244.88	\$244.88	104.98%	\$232.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72196	Mri pelvis w/dye	26	\$87.92	\$81.56	\$81.56	\$81.56	107.80%	\$77.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72196	Mri pelvis w/dye		\$301.85	\$286.73	\$286.73	\$286.73	105.27%	\$272.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72197	Mri pelvis w/o & w/dye	26	\$86.50	\$103.84	\$103.84	\$103.84	83.30%	\$86.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72197	Mri pelvis w/o & w/dye	TC	\$270.76	\$256.00	\$256.00	\$256.00	105.76%	\$243.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72197	Mri pelvis w/o & w/dye		\$378.89	\$359.84	\$359.84	\$359.84	105.29%	\$341.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72198	Mr angio pelvis w/o & w/dye	26	\$79.49	\$84.26	\$84.26	\$84.26	94.34%	\$79.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72198	Mr angio pelvis w/o & w/dye		\$379.59	\$361.92	\$361.92	\$361.92	104.88%	\$343.82	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	72200	X-ray exam si joints	26	\$8.87	\$8.08	\$8.08	\$8.08	109.74%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72200	X-ray exam si joints	TC	\$21.71	\$26.56	\$26.56	\$26.56	81.73%	\$21.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72200	X-ray exam si joints		\$28.40	\$34.65	\$34.65	\$34.65	81.97%	\$28.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72202	X-ray exam si joints 3/> vws	26	\$10.02	\$10.80	\$10.80	\$10.80	92.81%	\$10.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72202	X-ray exam si joints 3/> vws	TC	\$24.90	\$30.07	\$30.07	\$30.07	82.81%	\$24.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72202	X-ray exam si joints 3/> vws		\$33.83	\$40.87	\$40.87	\$40.87	82.78%	\$33.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72220	X-ray exam sacrum tailbone	26	\$8.87	\$8.43	\$8.43	\$8.43	105.18%	\$8.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72220	X-ray exam sacrum tailbone	TC	\$21.12	\$25.51	\$25.51	\$25.51	82.78%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72220	X-ray exam sacrum tailbone		\$28.10	\$33.95	\$33.95	\$33.95	82.78%	\$28.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72295	X-ray of lower spine disk	26	\$32.95	\$39.47	\$39.47	\$39.47	83.49%	\$32.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	72295	X-ray of lower spine disk		\$95.30	\$115.45	\$115.45	\$115.45	82.54%	\$95.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73000	X-ray exam of collar bone	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73000	X-ray exam of collar bone	TC	\$21.12	\$25.86	\$25.86	\$25.86	81.66%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73000	X-ray exam of collar bone		\$27.83	\$33.96	\$33.96	\$33.96	81.95%	\$27.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73010	X-ray exam of shoulder blade	26	\$7.26	\$8.78	\$8.78	\$8.78	82.65%	\$7.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73010	X-ray exam of shoulder blade	TC	\$14.79	\$16.05	\$16.05	\$16.05	92.16%	\$14.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73010	X-ray exam of shoulder blade		\$21.78	\$24.83	\$24.83	\$24.83	87.71%	\$21.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73020	X-ray exam of shoulder	26	\$6.13	\$7.41	\$7.41	\$7.41	82.71%	\$6.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73020	X-ray exam of shoulder	TC	\$12.41	\$15.00	\$15.00	\$15.00	82.75%	\$12.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73020	X-ray exam of shoulder		\$18.54	\$22.41	\$22.41	\$22.41	82.74%	\$18.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73030	X-ray exam of shoulder	26	\$7.55	\$9.12	\$9.12	\$9.12	82.79%	\$7.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73030	X-ray exam of shoulder	TC	\$22.29	\$27.27	\$27.27	\$27.27	81.75%	\$22.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73030	X-ray exam of shoulder		\$29.84	\$36.38	\$36.38	\$36.38	82.01%	\$29.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73040	Contrast x-ray of shoulder	26	\$22.28	\$26.66	\$26.66	\$26.66	83.58%	\$22.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73040	Contrast x-ray of shoulder		\$113.95	\$137.34	\$137.34	\$137.34	82.97%	\$113.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73050	X-ray exam of shoulders	26	\$7.55	\$9.12	\$9.12	\$9.12	82.79%	\$7.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73050	X-ray exam of shoulders	TC	\$17.06	\$20.96	\$20.96	\$20.96	81.41%	\$17.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73050	X-ray exam of shoulders		\$24.60	\$30.07	\$30.07	\$30.07	81.80%	\$24.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73060	X-ray exam of humerus	26	\$6.97	\$7.75	\$7.75	\$7.75	89.97%	\$6.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73060	X-ray exam of humerus	TC	\$21.12	\$25.51	\$25.51	\$25.51	82.78%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	73060	X-ray exam of humerus		\$27.83	\$33.26	\$33.26	\$33.26	83.68%	\$27.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73070	X-ray exam of elbow	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73070	X-ray exam of elbow	TC	\$18.51	\$22.36	\$22.36	\$22.36	82.79%	\$18.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73070	X-ray exam of elbow		\$25.21	\$30.46	\$30.46	\$30.46	82.78%	\$25.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73080	X-ray exam of elbow	26	\$6.98	\$8.43	\$8.43	\$8.43	82.77%	\$6.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73080	X-ray exam of elbow	TC	\$21.12	\$25.86	\$25.86	\$25.86	81.66%	\$21.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73080	X-ray exam of elbow		\$28.10	\$34.30	\$34.30	\$34.30	81.93%	\$28.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73085	Contrast x-ray of elbow	26	\$22.56	\$25.60	\$25.60	\$25.60	88.11%	\$22.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73085	Contrast x-ray of elbow		\$96.53	\$104.05	\$104.05	\$104.05	92.78%	\$96.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73090	X-ray exam of forearm	26	\$6.41	\$7.75	\$7.75	\$7.75	82.74%	\$6.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73090	X-ray exam of forearm	TC	\$18.80	\$22.71	\$22.71	\$22.71	82.79%	\$18.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73090	X-ray exam of forearm		\$25.21	\$30.46	\$30.46	\$30.46	82.78%	\$25.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73092	X-ray exam of arm infant	26	\$6.41	\$7.75	\$7.75	\$7.75	82.74%	\$6.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73092	X-ray exam of arm infant	TC	\$20.84	\$25.16	\$25.16	\$25.16	82.82%	\$20.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73092	X-ray exam of arm infant		\$27.24	\$32.91	\$32.91	\$32.91	82.77%	\$27.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73100	X-ray exam of wrist	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73100	X-ray exam of wrist	TC	\$22.57	\$27.27	\$27.27	\$27.27	82.78%	\$22.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73100	X-ray exam of wrist		\$29.27	\$35.36	\$35.36	\$35.36	82.77%	\$29.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73110	X-ray exam of wrist	26	\$6.98	\$8.43	\$8.43	\$8.43	82.77%	\$6.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73110	X-ray exam of wrist	TC	\$28.39	\$34.63	\$34.63	\$34.63	81.99%	\$28.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73110	X-ray exam of wrist		\$35.36	\$43.06	\$43.06	\$43.06	82.12%	\$35.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73115	Contrast x-ray of wrist	26	\$22.56	\$27.01	\$27.01	\$27.01	83.53%	\$22.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73115	Contrast x-ray of wrist		\$117.44	\$140.85	\$140.85	\$140.85	83.38%	\$117.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73120	X-ray exam of hand	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73120	X-ray exam of hand	TC	\$20.26	\$24.81	\$24.81	\$24.81	81.66%	\$20.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73120	X-ray exam of hand		\$26.95	\$32.91	\$32.91	\$32.91	81.89%	\$26.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73130	X-ray exam of hand	26	\$6.98	\$8.43	\$8.43	\$8.43	82.77%	\$6.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73130	X-ray exam of hand	TC	\$24.90	\$30.42	\$30.42	\$30.42	81.85%	\$24.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73130	X-ray exam of hand		\$31.88	\$38.85	\$38.85	\$38.85	82.05%	\$31.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73140	X-ray exam of finger(s)	26	\$5.58	\$6.74	\$6.74	\$6.74	82.78%	\$5.58	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	73140	X-ray exam of finger(s)	TC	\$27.22	\$33.22	\$33.22	\$33.22	81.93%	\$27.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73140	X-ray exam of finger(s)		\$32.79	\$39.96	\$39.96	\$39.96	82.05%	\$32.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73200	Ct upper extremity w/o dye	26	\$47.02	\$47.20	\$47.20	\$47.20	99.62%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73200	Ct upper extremity w/o dye	TC	\$131.66	\$124.71	\$124.71	\$124.71	105.57%	\$118.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73200	Ct upper extremity w/o dye		\$180.56	\$171.91	\$171.91	\$171.91	105.03%	\$163.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73201	Ct upper extremity w/dye	26	\$57.19	\$54.95	\$54.95	\$54.95	104.09%	\$52.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73201	Ct upper extremity w/dye		\$225.42	\$214.28	\$214.28	\$214.28	105.20%	\$203.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73202	Ct uppr extremity w/o&w/dye	26	\$63.99	\$57.31	\$57.31	\$57.31	111.66%	\$54.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73206	Ct angio upr extrm w/o&w/dye	26	\$70.50	\$84.52	\$84.52	\$84.52	83.42%	\$70.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73206	Ct angio upr extrm w/o&w/dye		\$324.59	\$316.68	\$316.68	\$316.68	102.50%	\$300.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73218	Mri upper extremity w/o dye	26	\$53.58	\$64.40	\$64.40	\$64.40	83.20%	\$53.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73218	Mri upper extremity w/o dye	TC	\$276.56	\$261.26	\$261.26	\$261.26	105.86%	\$248.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73218	Mri upper extremity w/o dye		\$343.54	\$325.66	\$325.66	\$325.66	105.49%	\$309.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73219	Mri upper extremity w/dye	26	\$63.91	\$76.89	\$76.89	\$76.89	83.12%	\$63.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73220	Mri uppr extremity w/o&w/dye	26	\$108.83	\$101.81	\$101.81	\$101.81	106.90%	\$96.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73220	Mri uppr extremity w/o&w/dye	TC	\$357.14	\$337.32	\$337.32	\$337.32	105.87%	\$320.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73220	Mri uppr extremity w/o&w/dye		\$463.16	\$439.13	\$439.13	\$439.13	105.47%	\$417.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73221	Mri joint upr extrem w/o dye	26	\$61.80	\$64.40	\$64.40	\$64.40	95.96%	\$61.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73221	Mri joint upr extrem w/o dye	TC	\$159.15	\$152.32	\$152.32	\$152.32	104.48%	\$144.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73221	Mri joint upr extrem w/o dye		\$226.49	\$216.72	\$216.72	\$216.72	104.51%	\$205.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73222	Mri joint upr extrem w/dye	26	\$64.21	\$77.24	\$77.24	\$77.24	83.13%	\$64.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73222	Mri joint upr extrem w/dye	TC	\$273.12	\$258.46	\$258.46	\$258.46	105.67%	\$245.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73222	Mri joint upr extrem w/dye		\$353.37	\$335.70	\$335.70	\$335.70	105.26%	\$318.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73223	Mri joint upr extr w/o&w/dye	26	\$85.11	\$102.16	\$102.16	\$102.16	83.31%	\$85.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73223	Mri joint upr extr w/o&w/dye	TC	\$330.64	\$312.44	\$312.44	\$312.44	105.83%	\$296.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73223	Mri joint upr extr w/o&w/dye		\$437.03	\$414.59	\$414.59	\$414.59	105.41%	\$393.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73225	Mr angio upr extr w/o&w/dye	26	\$75.32	\$81.91	\$81.91	\$81.91	91.96%	\$75.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73501	X-ray exam hip uni 1 view	26	\$7.55	\$9.12	\$9.12	\$9.12	82.79%	\$7.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73501	X-ray exam hip uni 1 view	TC	\$20.84	\$25.16	\$25.16	\$25.16	82.82%	\$20.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73501	X-ray exam hip uni 1 view		\$28.38	\$34.28	\$34.28	\$34.28	82.79%	\$28.38	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	73502	X-ray exam hip uni 2-3 views	26	\$8.95	\$10.81	\$10.81	\$10.81	82.78%	\$8.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73502	X-ray exam hip uni 2-3 views	TC	\$31.58	\$38.83	\$38.83	\$38.83	81.32%	\$31.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73502	X-ray exam hip uni 2-3 views		\$40.52	\$49.64	\$49.64	\$49.64	81.62%	\$40.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73503	X-ray exam hip uni 4/> views	26	\$11.85	\$13.19	\$13.19	\$13.19	89.84%	\$11.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73503	X-ray exam hip uni 4/> views		\$51.20	\$62.54	\$62.54	\$62.54	81.87%	\$51.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73521	X-ray exam hips bi 2 views	26	\$8.95	\$10.81	\$10.81	\$10.81	82.78%	\$8.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73521	X-ray exam hips bi 2 views	TC	\$26.64	\$32.17	\$32.17	\$32.17	82.80%	\$26.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73521	X-ray exam hips bi 2 views		\$35.59	\$42.98	\$42.98	\$42.98	82.80%	\$35.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73522	X-ray exam hips bi 3-4 views	26	\$11.76	\$14.21	\$14.21	\$14.21	82.75%	\$11.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73522	X-ray exam hips bi 3-4 views	TC	\$34.49	\$41.99	\$41.99	\$41.99	82.14%	\$34.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73522	X-ray exam hips bi 3-4 views		\$46.25	\$56.20	\$56.20	\$56.20	82.30%	\$46.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73523	X-ray exam hips bi 5/> views	26	\$13.32	\$15.16	\$15.16	\$15.16	87.87%	\$13.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73523	X-ray exam hips bi 5/> views	TC	\$40.87	\$49.35	\$49.35	\$49.35	82.82%	\$40.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73523	X-ray exam hips bi 5/> views		\$53.41	\$64.51	\$64.51	\$64.51	82.80%	\$53.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73525	Contrast x-ray of hip	26	\$26.47	\$28.26	\$28.26	\$28.26	93.67%	\$26.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73525	Contrast x-ray of hip		\$113.09	\$134.39	\$134.39	\$134.39	84.15%	\$113.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73551	X-ray exam of femur 1	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73551	X-ray exam of femur 1	TC	\$18.51	\$22.36	\$22.36	\$22.36	82.79%	\$18.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73551	X-ray exam of femur 1		\$25.21	\$30.46	\$30.46	\$30.46	82.78%	\$25.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73552	X-ray exam of femur 2/>	26	\$7.25	\$8.77	\$8.77	\$8.77	82.68%	\$7.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73552	X-ray exam of femur 2/>	TC	\$23.45	\$28.32	\$28.32	\$28.32	82.81%	\$23.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73552	X-ray exam of femur 2/>		\$30.70	\$37.09	\$37.09	\$37.09	82.78%	\$30.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73560	X-ray exam of knee 1 or 2	26	\$6.70	\$8.10	\$8.10	\$8.10	82.74%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73560	X-ray exam of knee 1 or 2	TC	\$22.87	\$27.62	\$27.62	\$27.62	82.82%	\$22.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73560	X-ray exam of knee 1 or 2		\$29.57	\$35.71	\$35.71	\$35.71	82.80%	\$29.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73562	X-ray exam of knee 3	26	\$7.55	\$9.12	\$9.12	\$9.12	82.79%	\$7.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73562	X-ray exam of knee 3	TC	\$27.51	\$33.57	\$33.57	\$33.57	81.94%	\$27.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73562	X-ray exam of knee 3		\$35.06	\$42.69	\$42.69	\$42.69	82.12%	\$35.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73564	X-ray exam knee 4 or more	26	\$9.24	\$11.16	\$11.16	\$11.16	82.78%	\$9.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73564	X-ray exam knee 4 or more	TC	\$31.00	\$38.13	\$38.13	\$38.13	81.30%	\$31.00	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	73564	X-ray exam knee 4 or more		\$40.24	\$49.29	\$49.29	\$49.29	81.63%	\$40.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73565	X-ray exam of knees	26	\$6.99	\$8.10	\$8.10	\$8.10	86.32%	\$6.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73565	X-ray exam of knees	TC	\$27.51	\$33.57	\$33.57	\$33.57	81.94%	\$27.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73565	X-ray exam of knees		\$34.51	\$41.67	\$41.67	\$41.67	82.81%	\$34.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73580	Contrast x-ray of knee joint		\$110.27	\$114.96	\$114.96	\$114.96	95.92%	\$109.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73590	X-ray exam of lower leg	26	\$6.97	\$7.75	\$7.75	\$7.75	89.97%	\$6.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73590	X-ray exam of lower leg	TC	\$20.84	\$25.16	\$25.16	\$25.16	82.82%	\$20.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73590	X-ray exam of lower leg		\$27.24	\$32.91	\$32.91	\$32.91	82.77%	\$27.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73592	X-ray exam of leg infant	26	\$6.97	\$7.75	\$7.75	\$7.75	89.97%	\$6.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73592	X-ray exam of leg infant	TC	\$20.84	\$25.16	\$25.16	\$25.16	82.82%	\$20.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73592	X-ray exam of leg infant		\$27.24	\$32.91	\$32.91	\$32.91	82.77%	\$27.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73600	X-ray exam of ankle	26	\$6.70	\$7.75	\$7.75	\$7.75	86.49%	\$6.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73600	X-ray exam of ankle	TC	\$21.42	\$25.86	\$25.86	\$25.86	82.82%	\$21.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73600	X-ray exam of ankle		\$28.11	\$33.61	\$33.61	\$33.61	83.64%	\$28.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73610	X-ray exam of ankle	26	\$6.98	\$8.43	\$8.43	\$8.43	82.77%	\$6.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73610	X-ray exam of ankle	TC	\$24.90	\$29.72	\$29.72	\$29.72	83.79%	\$24.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73610	X-ray exam of ankle		\$31.88	\$38.15	\$38.15	\$38.15	83.56%	\$31.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73620	X-ray exam of foot	26	\$6.12	\$7.40	\$7.40	\$7.40	82.74%	\$6.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73620	X-ray exam of foot	TC	\$18.22	\$22.36	\$22.36	\$22.36	81.49%	\$18.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73620	X-ray exam of foot		\$24.34	\$29.75	\$29.75	\$29.75	81.80%	\$24.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73630	X-ray exam of foot	26	\$6.69	\$8.08	\$8.08	\$8.08	82.77%	\$6.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73630	X-ray exam of foot	TC	\$22.87	\$27.62	\$27.62	\$27.62	82.82%	\$22.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73630	X-ray exam of foot		\$29.55	\$35.70	\$35.70	\$35.70	82.78%	\$29.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73650	X-ray exam of heel	26	\$6.41	\$7.75	\$7.75	\$7.75	82.74%	\$6.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73650	X-ray exam of heel	TC	\$18.22	\$22.01	\$22.01	\$22.01	82.79%	\$18.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73650	X-ray exam of heel		\$24.63	\$29.75	\$29.75	\$29.75	82.78%	\$24.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73660	X-ray exam of toe(s)	26	\$5.28	\$6.39	\$6.39	\$6.39	82.63%	\$5.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73660	X-ray exam of toe(s)	TC	\$19.96	\$24.11	\$24.11	\$24.11	82.79%	\$19.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73660	X-ray exam of toe(s)		\$25.25	\$30.50	\$30.50	\$30.50	82.79%	\$25.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73700	Ct lower extremity w/o dye	26	\$47.02	\$47.20	\$47.20	\$47.20	99.62%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	73700	Ct lower extremity w/o dye	TC	\$94.64	\$90.36	\$90.36	\$90.36	104.74%	\$85.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73700	Ct lower extremity w/o dye		\$143.54	\$137.56	\$137.56	\$137.56	104.35%	\$130.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73701	Ct lower extremity w/dye	26	\$57.19	\$54.95	\$54.95	\$54.95	104.09%	\$52.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73701	Ct lower extremity w/dye		\$185.50	\$177.48	\$177.48	\$177.48	104.52%	\$168.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73702	Ct lwr extremity w/o&w/dye	26	\$59.64	\$57.31	\$57.31	\$57.31	104.07%	\$54.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73702	Ct lwr extremity w/o&w/dye		\$217.70	\$208.23	\$208.23	\$208.23	104.55%	\$197.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73706	Ct angio lwr extr w/o&w/dye	26	\$74.16	\$88.94	\$88.94	\$88.94	83.38%	\$74.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73706	Ct angio lwr extr w/o&w/dye		\$324.59	\$344.51	\$344.51	\$344.51	94.22%	\$324.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73718	Mri lower extremity w/o dye	26	\$53.28	\$63.70	\$63.70	\$63.70	83.64%	\$53.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73718	Mri lower extremity w/o dye	TC	\$184.56	\$175.11	\$175.11	\$175.11	105.40%	\$166.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73718	Mri lower extremity w/o dye		\$251.16	\$238.81	\$238.81	\$238.81	105.17%	\$226.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73719	Mri lower extremity w/dye	26	\$63.91	\$76.54	\$76.54	\$76.54	83.50%	\$63.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73720	Mri lwr extremity w/o&w/dye	26	\$108.83	\$101.46	\$101.46	\$101.46	107.27%	\$96.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73720	Mri lwr extremity w/o&w/dye	TC	\$273.30	\$258.81	\$258.81	\$258.81	105.60%	\$245.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73720	Mri lwr extremity w/o&w/dye		\$379.33	\$360.26	\$360.26	\$360.26	105.29%	\$342.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73721	Mri jnt of lwr extre w/o dye	26	\$61.80	\$64.40	\$64.40	\$64.40	95.96%	\$61.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73721	Mri jnt of lwr extre w/o dye	TC	\$159.15	\$151.97	\$151.97	\$151.97	104.72%	\$144.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73721	Mri jnt of lwr extre w/o dye		\$226.12	\$216.37	\$216.37	\$216.37	104.50%	\$205.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73722	Mri joint of lwr extr w/dye	26	\$64.21	\$76.89	\$76.89	\$76.89	83.51%	\$64.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73722	Mri joint of lwr extr w/dye	TC	\$273.47	\$259.16	\$259.16	\$259.16	105.52%	\$246.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73722	Mri joint of lwr extr w/dye		\$353.73	\$336.05	\$336.05	\$336.05	105.26%	\$319.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73723	Mri joint lwr extr w/o&w/dye	26	\$84.82	\$101.81	\$101.81	\$101.81	83.31%	\$84.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73723	Mri joint lwr extr w/o&w/dye	TC	\$329.55	\$311.03	\$311.03	\$311.03	105.95%	\$295.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73723	Mri joint lwr extr w/o&w/dye		\$435.58	\$412.84	\$412.84	\$412.84	105.51%	\$392.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73725	Mr ang lwr ext w or w/o dye	26	\$78.01	\$84.85	\$84.85	\$84.85	91.94%	\$78.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	73725	Mr ang lwr ext w or w/o dye	TC	\$338.41	\$274.50	\$274.50	\$274.50	123.28%	\$260.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74018	X-ray exam abdomen 1 view	26	\$11.94	\$8.77	\$8.77	\$8.77	136.17%	\$8.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74018	X-ray exam abdomen 1 view	TC	\$18.51	\$22.71	\$22.71	\$22.71	81.51%	\$18.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74018	X-ray exam abdomen 1 view		\$25.77	\$31.48	\$31.48	\$31.48	81.87%	\$25.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74019	X-ray exam abdomen 2 views	26	\$18.52	\$10.80	\$10.80	\$10.80	171.53%	\$10.26	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	74019	X-ray exam abdomen 2 views	TC	\$22.57	\$27.27	\$27.27	\$27.27	82.78%	\$22.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74019	X-ray exam abdomen 2 views		\$36.51	\$38.06	\$38.06	\$38.06	95.92%	\$36.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74021	X-ray exam abdomen 3+ views	26	\$25.10	\$12.84	\$12.84	\$12.84	195.48%	\$12.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74021	X-ray exam abdomen 3+ views	TC	\$26.35	\$31.82	\$31.82	\$31.82	82.80%	\$26.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74021	X-ray exam abdomen 3+ views		\$45.51	\$44.66	\$44.66	\$44.66	101.90%	\$42.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74022	X-ray exam complete abdomen	26	\$12.82	\$15.14	\$15.14	\$15.14	84.66%	\$12.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74022	X-ray exam complete abdomen	TC	\$30.13	\$36.73	\$36.73	\$36.73	82.03%	\$30.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74022	X-ray exam complete abdomen		\$42.94	\$51.87	\$51.87	\$51.87	82.78%	\$42.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74150	Ct abdomen w/o dye	26	\$56.61	\$56.30	\$56.30	\$56.30	100.55%	\$53.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74150	Ct abdomen w/o dye		\$151.42	\$144.91	\$144.91	\$144.91	104.49%	\$137.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74160	Ct abdomen w/dye	26	\$67.21	\$60.31	\$60.31	\$60.31	111.43%	\$57.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74160	Ct abdomen w/dye	TC	\$186.32	\$188.78	\$188.78	\$188.78	98.70%	\$179.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74160	Ct abdomen w/dye		\$273.38	\$249.09	\$249.09	\$249.09	109.75%	\$236.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74170	Ct abdomen w/o & w/dye	26	\$73.64	\$66.08	\$66.08	\$66.08	111.44%	\$62.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74170	Ct abdomen w/o & w/dye	TC	\$181.04	\$214.02	\$214.02	\$214.02	84.59%	\$181.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74170	Ct abdomen w/o & w/dye		\$273.38	\$280.09	\$280.09	\$280.09	97.60%	\$266.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74174	Ct angio abd&pelv w/o&w/dye	26	\$92.54	\$103.41	\$103.41	\$103.41	89.49%	\$92.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74174	Ct angio abd&pelv w/o&w/dye	TC	\$317.94	\$302.55	\$302.55	\$302.55	105.09%	\$287.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74174	Ct angio abd&pelv w/o&w/dye		\$425.62	\$405.96	\$405.96	\$405.96	104.84%	\$385.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74175	Ct angio abdom w/o & w/dye	26	\$71.36	\$85.55	\$85.55	\$85.55	83.41%	\$71.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74175	Ct angio abdom w/o & w/dye	TC	\$301.42	\$240.58	\$240.58	\$240.58	125.29%	\$228.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74175	Ct angio abdom w/o & w/dye		\$361.30	\$326.13	\$326.13	\$326.13	110.78%	\$309.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74176	Ct abd & pelvis w/o contrast	26	\$73.14	\$82.24	\$82.24	\$82.24	88.93%	\$73.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74176	Ct abd & pelvis w/o contrast	TC	\$114.83	\$111.66	\$111.66	\$111.66	102.83%	\$106.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74176	Ct abd & pelvis w/o contrast		\$187.97	\$193.91	\$193.91	\$193.91	96.94%	\$184.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74177	Ct abd & pelv w/contrast	26	\$76.70	\$85.98	\$85.98	\$85.98	89.21%	\$76.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74177	Ct abd & pelv w/contrast	TC	\$201.36	\$237.85	\$237.85	\$237.85	84.66%	\$201.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74177	Ct abd & pelv w/contrast		\$273.31	\$323.83	\$323.83	\$323.83	84.40%	\$273.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74178	Ct abd & pelv 1/> regns	26	\$84.88	\$94.73	\$94.73	\$94.73	89.60%	\$84.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74178	Ct abd & pelv 1/> regns	TC	\$289.50	\$268.62	\$268.62	\$268.62	107.77%	\$255.19	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	74178	Ct abd & pelv 1/> regns		\$374.37	\$363.35	\$363.35	\$363.35	103.03%	\$345.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74181	Mri abdomen w/o dye	26	\$76.61	\$69.07	\$69.07	\$69.07	110.92%	\$65.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74181	Mri abdomen w/o dye		\$219.33	\$208.77	\$208.77	\$208.77	105.06%	\$198.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74182	Mri abdomen w/dye	26	\$68.28	\$81.56	\$81.56	\$81.56	83.72%	\$68.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74182	Mri abdomen w/dye		\$340.87	\$323.54	\$323.54	\$323.54	105.36%	\$307.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74183	Mri abdomen w/o & w/dye	26	\$86.50	\$103.84	\$103.84	\$103.84	83.30%	\$86.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74183	Mri abdomen w/o & w/dye	TC	\$272.21	\$257.40	\$257.40	\$257.40	105.75%	\$244.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74183	Mri abdomen w/o & w/dye		\$380.34	\$361.24	\$361.24	\$361.24	105.29%	\$343.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74185	Mri angio abdom w orw/o dye	26	\$79.49	\$84.26	\$84.26	\$84.26	94.34%	\$79.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74185	Mri angio abdom w orw/o dye		\$378.87	\$360.51	\$360.51	\$360.51	105.09%	\$342.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74190	X-ray exam of peritoneum	26	\$18.29	\$21.84	\$21.84	\$21.84	83.75%	\$18.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74220	X-ray xm esophagus 1cntrst	26	\$23.94	\$28.32	\$28.32	\$28.32	84.54%	\$23.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74220	X-ray xm esophagus 1cntrst		\$85.72	\$101.15	\$101.15	\$101.15	84.74%	\$85.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74221	X-ray xm esophagus 2cntrst	26	\$39.09	\$33.00	\$33.00	\$33.00	118.45%	\$31.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74221	X-ray xm esophagus 2cntrst		\$122.91	\$113.90	\$113.90	\$113.90	107.91%	\$108.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74230	X-ray xm swlng funcj c+	26	\$26.13	\$25.27	\$25.27	\$25.27	103.41%	\$24.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74230	X-ray xm swlng funcj c+		\$109.91	\$130.00	\$130.00	\$130.00	84.55%	\$109.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74240	X-ray xm upr gi trc 1cntrst	26	\$31.82	\$38.11	\$38.11	\$38.11	83.50%	\$31.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74240	X-ray xm upr gi trc 1cntrst	TC	\$75.42	\$89.31	\$89.31	\$89.31	84.45%	\$75.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74240	X-ray xm upr gi trc 1cntrst		\$107.24	\$127.42	\$127.42	\$127.42	84.17%	\$107.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74246	X-ray xm upr gi trc 2cntrst	26	\$35.18	\$42.44	\$42.44	\$42.44	82.89%	\$35.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74246	X-ray xm upr gi trc 2cntrst		\$121.64	\$144.37	\$144.37	\$144.37	84.26%	\$121.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74248	X-ray sm int f-thru std	26	\$39.09	\$33.00	\$33.00	\$33.00	118.45%	\$31.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74248	X-ray sm int f-thru std		\$92.98	\$85.15	\$85.15	\$85.15	109.19%	\$80.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74250	X-ray xm sm int 1cntrst std	26	\$31.81	\$38.09	\$38.09	\$38.09	83.50%	\$31.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74250	X-ray xm sm int 1cntrst std		\$106.65	\$126.35	\$126.35	\$126.35	84.41%	\$106.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74251	X-ray xm sm int 2cntrst std	26	\$46.32	\$55.28	\$55.28	\$55.28	83.79%	\$46.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74261	Ct colonography dx	26	\$94.61	\$113.28	\$113.28	\$113.28	83.52%	\$94.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74261	Ct colonography dx		\$374.80	\$442.54	\$442.54	\$442.54	84.69%	\$374.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74270	X-ray xm colon 1cntrst std	26	\$40.82	\$48.89	\$48.89	\$48.89	83.49%	\$40.82	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	74270	X-ray xm colon 1cntrst std		\$133.95	\$159.23	\$159.23	\$159.23	84.12%	\$133.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74280	X-ray xm colon 2cntrst std	26	\$49.62	\$59.63	\$59.63	\$59.63	83.22%	\$49.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74280	X-ray xm colon 2cntrst std		\$193.21	\$228.43	\$228.43	\$228.43	84.58%	\$193.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74283	Ther nma rdctj intus/obstrcj	26	\$82.66	\$99.62	\$99.62	\$99.62	82.97%	\$82.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74300	X-ray bile ducts/pancreas	26	\$13.93	\$13.12	\$13.12	\$13.12	106.21%	\$12.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74328	X-ray bile duct endoscopy	26	\$26.13	\$22.98	\$22.98	\$22.98	113.70%	\$21.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74329	X-ray for pancreas endoscopy	26	\$24.13	\$23.33	\$23.33	\$23.33	103.42%	\$22.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74330	X-ray bile/panc endoscopy	26	\$26.13	\$26.98	\$26.98	\$26.98	96.86%	\$25.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74340	X-ray guide for gi tube	26	\$26.13	\$25.25	\$25.25	\$25.25	103.47%	\$23.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74400	Urography iv +-kub tomog	26	\$25.66	\$23.23	\$23.23	\$23.23	110.48%	\$22.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74400	Urography iv +-kub tomog		\$118.01	\$140.85	\$140.85	\$140.85	83.78%	\$118.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74420	Urography rtrgr +-kub	26	\$20.11	\$24.31	\$24.31	\$24.31	82.73%	\$20.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74420	Urography rtrgr +-kub		\$66.21	\$81.02	\$81.02	\$81.02	81.72%	\$66.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74425	Urography antegrade rs&i	26	\$19.84	\$23.62	\$23.62	\$23.62	83.99%	\$19.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74425	Urography antegrade rs&i		\$118.78	\$141.67	\$141.67	\$141.67	83.84%	\$118.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74430	Contrast x-ray bladder	26	\$17.06	\$15.14	\$15.14	\$15.14	112.66%	\$14.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74430	Contrast x-ray bladder		\$35.39	\$42.76	\$42.76	\$42.76	82.77%	\$35.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74450	X-ray urethra/bladder	26	\$16.37	\$15.55	\$15.55	\$15.55	105.24%	\$14.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74455	X-ray urethra/bladder	26	\$17.43	\$15.55	\$15.55	\$15.55	112.06%	\$14.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74455	X-ray urethra/bladder	TC	\$78.03	\$93.16	\$93.16	\$93.16	83.76%	\$78.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74455	X-ray urethra/bladder		\$90.91	\$108.72	\$108.72	\$108.72	83.62%	\$90.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74485	Dilation urtr/urt rs&i	26	\$32.36	\$38.84	\$38.84	\$38.84	83.32%	\$32.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74712	Mri fetal sngl/1st gestation	26	\$130.52	\$142.30	\$142.30	\$142.30	91.72%	\$130.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74712	Mri fetal sngl/1st gestation	TC	\$248.26	\$293.51	\$293.51	\$293.51	84.58%	\$248.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74740	X-ray female genital tract	26	\$17.43	\$18.21	\$18.21	\$18.21	95.73%	\$17.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	74740	X-ray female genital tract		\$82.94	\$97.70	\$97.70	\$97.70	84.89%	\$82.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75557	Cardiac mri for morph	26	\$101.16	\$110.00	\$110.00	\$110.00	91.97%	\$101.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75557	Cardiac mri for morph	TC	\$196.17	\$186.32	\$186.32	\$186.32	105.28%	\$177.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75557	Cardiac mri for morph		\$310.68	\$296.32	\$296.32	\$296.32	104.85%	\$281.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75559	Cardiac mri w/stress img	26	\$129.37	\$136.86	\$136.86	\$136.86	94.52%	\$129.37	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	75561	Cardiac mri for morph w/dye	26	\$111.87	\$121.81	\$121.81	\$121.81	91.84%	\$111.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75561	Cardiac mri for morph w/dye	TC	\$281.10	\$266.17	\$266.17	\$266.17	105.61%	\$252.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75561	Cardiac mri for morph w/dye		\$407.84	\$387.98	\$387.98	\$387.98	105.12%	\$368.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75563	Card mri w/stress img & dye	26	\$134.59	\$139.44	\$139.44	\$139.44	96.52%	\$132.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75565	Card mri veloc flow mapping	26	\$9.78	\$11.82	\$11.82	\$11.82	82.75%	\$9.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75565	Card mri veloc flow mapping	TC	\$38.83	\$36.80	\$36.80	\$36.80	105.50%	\$34.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75565	Card mri veloc flow mapping		\$51.06	\$48.62	\$48.62	\$48.62	105.01%	\$46.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75571	Ct hrt w/o dye w/ca test	26	\$23.09	\$27.30	\$27.30	\$27.30	84.59%	\$23.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75571	Ct hrt w/o dye w/ca test	TC	\$65.55	\$79.07	\$79.07	\$79.07	82.90%	\$65.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75571	Ct hrt w/o dye w/ca test		\$88.65	\$106.36	\$106.36	\$106.36	83.35%	\$88.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75572	Ct hrt w/3d image	26	\$68.40	\$81.95	\$81.95	\$81.95	83.46%	\$68.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75573	Ct hrt c+ strux cgen hrt ds	26	\$99.64	\$119.71	\$119.71	\$119.71	83.23%	\$99.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75574	Ct angio hrt w/3d image	26	\$93.80	\$112.65	\$112.65	\$112.65	83.27%	\$93.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75574	Ct angio hrt w/3d image		\$308.46	\$342.29	\$342.29	\$342.29	90.12%	\$308.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75600	Contrast exam thoracic aorta	26	\$19.16	\$22.93	\$22.93	\$22.93	83.58%	\$19.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75605	Contrast exam thoracic aorta	26	\$43.40	\$52.50	\$52.50	\$52.50	82.67%	\$43.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75605	Contrast exam thoracic aorta		\$130.60	\$124.20	\$124.20	\$124.20	105.15%	\$117.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75625	Contrast exam abdominl aorta	26	\$54.37	\$66.02	\$66.02	\$66.02	82.36%	\$54.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75625	Contrast exam abdominl aorta		\$133.20	\$129.03	\$129.03	\$129.03	103.23%	\$122.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75630	X-ray aorta leg arteries	26	\$76.25	\$92.17	\$92.17	\$92.17	82.73%	\$76.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75630	X-ray aorta leg arteries		\$165.27	\$160.02	\$160.02	\$160.02	103.28%	\$152.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75635	Ct angio abdominal arteries	26	\$92.86	\$111.80	\$111.80	\$111.80	83.06%	\$92.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75635	Ct angio abdominal arteries		\$395.08	\$438.10	\$438.10	\$438.10	90.18%	\$395.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75705	Artery x-rays spine	26	\$94.16	\$114.00	\$114.00	\$114.00	82.59%	\$94.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75710	Artery x-rays arm/leg	26	\$66.84	\$80.82	\$80.82	\$80.82	82.70%	\$66.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75710	Artery x-rays arm/leg		\$158.50	\$153.23	\$153.23	\$153.23	103.44%	\$145.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75716	Artery x-rays arms/legs	26	\$74.84	\$90.81	\$90.81	\$90.81	82.41%	\$74.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75716	Artery x-rays arms/legs		\$137.12	\$166.37	\$166.37	\$166.37	82.42%	\$137.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75726	Artery x-rays abdomen	26	\$77.56	\$92.54	\$92.54	\$92.54	83.81%	\$77.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75736	Artery x-rays pelvis	26	\$42.88	\$51.24	\$51.24	\$51.24	83.68%	\$42.88	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	75736	Artery x-rays pelvis		\$152.34	\$148.11	\$148.11	\$148.11	102.85%	\$140.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75741	Artery x-rays lung	26	\$49.64	\$59.40	\$59.40	\$59.40	83.57%	\$49.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75743	Artery x-rays lungs	26	\$63.01	\$75.83	\$75.83	\$75.83	83.10%	\$63.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75746	Artery x-rays lung	26	\$43.61	\$52.10	\$52.10	\$52.10	83.71%	\$43.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75756	Artery x-rays chest	26	\$53.39	\$53.90	\$53.90	\$53.90	99.06%	\$51.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75774	Artery x-ray each vessel	26	\$37.96	\$45.56	\$45.56	\$45.56	83.33%	\$37.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75774	Artery x-ray each vessel		\$103.25	\$99.11	\$99.11	\$99.11	104.18%	\$94.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75801	Lymph vessel x-ray arm/leg	26	\$41.79	\$41.97	\$41.97	\$41.97	99.56%	\$39.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75805	Lymph vessel x-ray trunk	26	\$43.36	\$38.44	\$38.44	\$38.44	112.79%	\$36.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75807	Lymph vessel x-ray trunk	26	\$43.28	\$51.98	\$51.98	\$51.98	83.27%	\$43.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75809	Nonvascular shunt x-ray	26	\$19.17	\$22.55	\$22.55	\$22.55	84.99%	\$19.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75809	Nonvascular shunt x-ray		\$70.78	\$84.87	\$84.87	\$84.87	83.40%	\$70.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75810	Vein x-ray spleen/liver	26	\$39.40	\$47.31	\$47.31	\$47.31	83.27%	\$39.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75820	Vein x-ray arm/leg	26	\$40.52	\$48.65	\$48.65	\$48.65	83.29%	\$40.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75820	Vein x-ray arm/leg		\$93.00	\$110.97	\$110.97	\$110.97	83.81%	\$93.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75822	Vein x-ray arms/legs	26	\$55.97	\$67.96	\$67.96	\$67.96	82.36%	\$55.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75822	Vein x-ray arms/legs		\$112.80	\$136.94	\$136.94	\$136.94	82.37%	\$112.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75825	Vein x-ray trunk	26	\$43.19	\$52.27	\$52.27	\$52.27	82.63%	\$43.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75825	Vein x-ray trunk		\$121.03	\$117.04	\$117.04	\$117.04	103.41%	\$111.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75827	Vein x-ray chest	26	\$43.77	\$52.70	\$52.70	\$52.70	83.06%	\$43.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75827	Vein x-ray chest		\$130.60	\$122.02	\$122.02	\$122.02	107.03%	\$115.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75831	Vein x-ray kidney	26	\$42.60	\$50.89	\$50.89	\$50.89	83.70%	\$42.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75831	Vein x-ray kidney		\$130.60	\$122.95	\$122.95	\$122.95	106.22%	\$116.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75833	Vein x-ray kidneys	26	\$56.70	\$68.55	\$68.55	\$68.55	82.72%	\$56.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75860	Vein x-ray neck	26	\$44.04	\$52.65	\$52.65	\$52.65	83.65%	\$44.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75870	Vein x-ray skull	26	\$48.13	\$57.30	\$57.30	\$57.30	83.99%	\$48.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75885	Vein x-ray liver w/hemodynam	26	\$53.25	\$64.39	\$64.39	\$64.39	82.70%	\$53.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75887	Vein x-ray liver w/o hemodyn	26	\$54.12	\$64.74	\$64.74	\$64.74	83.60%	\$54.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75889	Vein x-ray liver w/hemodynam	26	\$42.44	\$51.32	\$51.32	\$51.32	82.70%	\$42.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75891	Vein x-ray liver	26	\$42.81	\$51.39	\$51.39	\$51.39	83.30%	\$42.81	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	75893	Venous sampling by catheter	26	\$28.31	\$25.10	\$25.10	\$25.10	112.77%	\$23.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75894	X-rays transcath therapy	26	\$57.53	\$69.97	\$69.97	\$69.97	82.23%	\$57.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75898	Follow-up angiography	26	\$73.02	\$89.11	\$89.11	\$89.11	81.94%	\$73.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75901	Remove cva device obstruct	26	\$22.45	\$22.17	\$22.17	\$22.17	101.24%	\$21.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75901	Remove cva device obstruct		\$200.47	\$237.94	\$237.94	\$237.94	84.25%	\$200.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75902	Remove cva lumen obstruct	26	\$17.85	\$17.77	\$17.77	\$17.77	100.46%	\$16.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75970	Vascular biopsy	26	\$43.52	\$37.21	\$37.21	\$37.21	116.95%	\$35.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75984	Xray control catheter change	26	\$30.92	\$37.56	\$37.56	\$37.56	82.31%	\$30.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	75989	Abscess drainage under x-ray	26	\$62.84	\$54.75	\$54.75	\$54.75	114.78%	\$52.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76000	Fluoroscopy <1 hr phys/qhp	26	\$12.70	\$14.75	\$14.75	\$14.75	86.12%	\$12.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76000	Fluoroscopy <1 hr phys/qhp		\$43.52	\$44.12	\$44.12	\$44.12	98.65%	\$41.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76010	X-ray nose to rectum	26	\$8.71	\$8.42	\$8.42	\$8.42	103.47%	\$8.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76010	X-ray nose to rectum	TC	\$18.51	\$22.01	\$22.01	\$22.01	84.11%	\$18.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76010	X-ray nose to rectum		\$28.47	\$30.43	\$30.43	\$30.43	93.57%	\$28.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76080	X-ray exam of fistula	26	\$20.53	\$24.48	\$24.48	\$24.48	83.87%	\$20.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76080	X-ray exam of fistula		\$51.24	\$61.56	\$61.56	\$61.56	83.24%	\$51.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76098	X-ray exam surgical specimen	26	\$12.54	\$15.16	\$15.16	\$15.16	82.73%	\$12.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76098	X-ray exam surgical specimen		\$35.99	\$44.18	\$44.18	\$44.18	81.47%	\$35.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76376	3d render w/intrp postproces	26	\$9.24	\$9.44	\$9.44	\$9.44	97.88%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76376	3d render w/intrp postproces		\$25.64	\$25.84	\$25.84	\$25.84	99.23%	\$24.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76377	3d render w/intrp postproces	26	\$37.08	\$37.70	\$37.70	\$37.70	98.36%	\$35.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76380	Cat scan follow-up study	26	\$51.38	\$45.05	\$45.05	\$45.05	114.05%	\$42.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76391	Mr elastography	26	\$88.66	\$52.23	\$52.23	\$52.23	169.75%	\$49.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76391	Mr elastography		\$181.86	\$215.07	\$215.07	\$215.07	84.56%	\$181.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76506	Echo exam of head	26	\$33.77	\$30.85	\$30.85	\$30.85	109.46%	\$29.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76506	Echo exam of head	TC	\$72.81	\$86.50	\$86.50	\$86.50	84.17%	\$72.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76506	Echo exam of head		\$97.87	\$117.36	\$117.36	\$117.36	83.40%	\$97.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76510	Oph us dx b-scan&quan a-scan	26	\$40.57	\$39.19	\$39.19	\$39.19	103.53%	\$37.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76510	Oph us dx b-scan&quan a-scan		\$73.50	\$71.01	\$71.01	\$71.01	103.51%	\$67.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76511	Oph us dx quan a-scan only	26	\$37.03	\$35.77	\$35.77	\$35.77	103.52%	\$33.98	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	76511	Oph us dx quan a-scan only		\$60.53	\$58.83	\$58.83	\$58.83	102.89%	\$55.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76512	Oph us dx b-scan	26	\$31.70	\$30.63	\$30.63	\$30.63	103.48%	\$29.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76512	Oph us dx b-scan	TC	\$19.15	\$18.85	\$18.85	\$18.85	101.58%	\$17.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76512	Oph us dx b-scan		\$50.86	\$49.49	\$49.49	\$49.49	102.78%	\$47.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76513	Oph us dx ant sgm us uni/bi	26	\$31.32	\$32.33	\$32.33	\$32.33	96.89%	\$30.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76513	Oph us dx ant sgm us uni/bi		\$78.09	\$77.82	\$77.82	\$77.82	100.35%	\$73.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76514	Echo exam of eye thickness	26	\$8.26	\$7.78	\$7.78	\$7.78	106.21%	\$7.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76514	Echo exam of eye thickness	TC	\$3.12	\$3.78	\$3.78	\$3.78	82.53%	\$3.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76514	Echo exam of eye thickness		\$10.46	\$11.56	\$11.56	\$11.56	90.50%	\$10.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76519	Echo exam of eye	26	\$25.10	\$30.31	\$30.31	\$30.31	82.81%	\$25.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76519	Echo exam of eye	TC	\$32.45	\$40.23	\$40.23	\$40.23	80.65%	\$32.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76519	Echo exam of eye		\$57.55	\$70.55	\$70.55	\$70.55	81.58%	\$57.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76529	Echo exam of eye	26	\$30.21	\$32.37	\$32.37	\$32.37	93.33%	\$30.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76536	Us exam of head and neck	26	\$28.73	\$26.63	\$26.63	\$26.63	107.90%	\$25.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76536	Us exam of head and neck	TC	\$73.67	\$88.26	\$88.26	\$88.26	83.47%	\$73.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76536	Us exam of head and neck		\$96.22	\$114.88	\$114.88	\$114.88	83.76%	\$96.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76604	Us exam chest	26	\$28.64	\$26.93	\$26.93	\$26.93	106.34%	\$25.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76604	Us exam chest	TC	\$31.85	\$31.82	\$31.82	\$31.82	100.09%	\$30.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76604	Us exam chest		\$60.34	\$58.75	\$58.75	\$58.75	102.70%	\$55.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76641	Ultrasound breast complete	26	\$31.44	\$34.71	\$34.71	\$34.71	90.58%	\$31.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76641	Ultrasound breast complete	TC	\$60.03	\$71.78	\$71.78	\$71.78	83.63%	\$60.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76641	Ultrasound breast complete		\$89.04	\$106.49	\$106.49	\$106.49	83.61%	\$89.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76642	Ultrasound breast limited	26	\$29.61	\$32.33	\$32.33	\$32.33	91.59%	\$29.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76642	Ultrasound breast limited	TC	\$46.09	\$55.66	\$55.66	\$55.66	82.81%	\$46.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76642	Ultrasound breast limited		\$73.13	\$87.99	\$87.99	\$87.99	83.11%	\$73.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76700	Us exam abdom complete	26	\$42.32	\$38.09	\$38.09	\$38.09	111.09%	\$36.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76700	Us exam abdom complete	TC	\$68.74	\$82.57	\$82.57	\$82.57	83.25%	\$68.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76700	Us exam abdom complete		\$100.55	\$120.67	\$120.67	\$120.67	83.33%	\$100.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76705	Echo exam of abdomen	26	\$27.08	\$27.63	\$27.63	\$27.63	98.00%	\$26.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76705	Echo exam of abdomen	TC	\$52.48	\$62.67	\$62.67	\$62.67	83.74%	\$52.48	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	76705	Echo exam of abdomen		\$75.86	\$90.30	\$90.30	\$90.30	84.01%	\$75.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76706	Us abdl aorta screen aaa	26	\$40.19	\$25.94	\$25.94	\$25.94	154.93%	\$24.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76706	Us abdl aorta screen aaa	TC	\$70.48	\$85.10	\$85.10	\$85.10	82.82%	\$70.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76706	Us abdl aorta screen aaa		\$100.48	\$111.04	\$111.04	\$111.04	90.49%	\$100.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76770	Us exam abdo back wall comp	26	\$38.65	\$35.04	\$35.04	\$35.04	110.29%	\$33.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76770	Us exam abdo back wall comp	TC	\$64.68	\$77.39	\$77.39	\$77.39	83.58%	\$64.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76770	Us exam abdo back wall comp		\$93.68	\$112.43	\$112.43	\$112.43	83.32%	\$93.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76775	Us exam abdo back wall lim	26	\$28.51	\$27.30	\$27.30	\$27.30	104.44%	\$25.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76775	Us exam abdo back wall lim	TC	\$34.39	\$34.28	\$34.28	\$34.28	100.33%	\$32.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76775	Us exam abdo back wall lim		\$62.90	\$61.57	\$61.57	\$61.57	102.16%	\$58.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76776	Us exam k transpl w/doppler	26	\$32.57	\$35.72	\$35.72	\$35.72	91.19%	\$32.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76776	Us exam k transpl w/doppler	TC	\$98.29	\$117.62	\$117.62	\$117.62	83.56%	\$98.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76776	Us exam k transpl w/doppler		\$128.13	\$153.34	\$153.34	\$153.34	83.56%	\$128.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76800	Us exam spinal canal	26	\$49.59	\$61.37	\$61.37	\$61.37	80.80%	\$49.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76800	Us exam spinal canal	TC	\$84.13	\$117.35	\$117.35	\$117.35	71.69%	\$84.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76800	Us exam spinal canal		\$133.72	\$178.72	\$178.72	\$178.72	74.82%	\$133.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76801	Ob us < 14 wks single fetus	26	\$45.88	\$46.94	\$46.94	\$46.94	97.75%	\$44.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76801	Ob us < 14 wks single fetus	TC	\$62.07	\$74.58	\$74.58	\$74.58	83.22%	\$62.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76801	Ob us < 14 wks single fetus		\$101.20	\$121.52	\$121.52	\$121.52	83.28%	\$101.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76802	Ob us < 14 wks addl fetus	26	\$38.65	\$39.54	\$39.54	\$39.54	97.75%	\$37.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76802	Ob us < 14 wks addl fetus	TC	\$26.47	\$22.08	\$22.08	\$22.08	119.87%	\$20.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76802	Ob us < 14 wks addl fetus		\$65.13	\$61.62	\$61.62	\$61.62	105.69%	\$58.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76805	Ob us >= 14 wks snl fetus	26	\$50.06	\$47.29	\$47.29	\$47.29	105.86%	\$44.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76805	Ob us >= 14 wks snl fetus	TC	\$77.39	\$93.44	\$93.44	\$93.44	82.83%	\$77.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76805	Ob us >= 14 wks snl fetus		\$116.81	\$140.73	\$140.73	\$140.73	83.01%	\$116.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76810	Ob us >= 14 wks addl fetus	26	\$50.24	\$46.75	\$46.75	\$46.75	107.46%	\$44.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76810	Ob us >= 14 wks addl fetus	TC	\$45.28	\$43.39	\$43.39	\$43.39	104.36%	\$41.22	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76810	Ob us >= 14 wks addl fetus		\$94.22	\$90.14	\$90.14	\$90.14	104.52%	\$85.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76811	Ob us detailed snl fetus	26	\$89.86	\$90.44	\$90.44	\$90.44	99.36%	\$85.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76811	Ob us detailed snl fetus	TC	\$93.65	\$92.66	\$92.66	\$92.66	101.07%	\$88.03	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	76811	Ob us detailed snl fetus		\$187.61	\$183.10	\$183.10	\$183.10	102.46%	\$173.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76812	Ob us detailed addl fetus	26	\$84.03	\$85.01	\$85.01	\$85.01	98.84%	\$80.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76812	Ob us detailed addl fetus	TC	\$93.93	\$113.42	\$113.42	\$113.42	82.82%	\$93.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76812	Ob us detailed addl fetus		\$164.31	\$198.43	\$198.43	\$198.43	82.81%	\$164.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76813	Ob us nuchal meas 1 gest	26	\$47.03	\$56.19	\$56.19	\$56.19	83.69%	\$47.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76813	Ob us nuchal meas 1 gest	TC	\$65.29	\$63.37	\$63.37	\$63.37	103.03%	\$60.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76813	Ob us nuchal meas 1 gest		\$114.93	\$119.56	\$119.56	\$119.56	96.13%	\$113.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76814	Ob us nuchal meas add-on	26	\$38.98	\$47.09	\$47.09	\$47.09	82.78%	\$38.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76814	Ob us nuchal meas add-on	TC	\$33.69	\$29.37	\$29.37	\$29.37	114.72%	\$27.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76814	Ob us nuchal meas add-on		\$75.32	\$76.46	\$76.46	\$76.46	98.51%	\$72.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76815	Ob us limited fetus(s)	26	\$30.02	\$30.70	\$30.70	\$30.70	97.79%	\$29.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76815	Ob us limited fetus(s)	TC	\$49.03	\$53.20	\$53.20	\$53.20	92.16%	\$49.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76815	Ob us limited fetus(s)		\$79.06	\$83.90	\$83.90	\$83.90	94.23%	\$79.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76816	Ob us follow-up per fetus	26	\$33.64	\$40.64	\$40.64	\$40.64	82.78%	\$33.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76816	Ob us follow-up per fetus	TC	\$60.61	\$73.53	\$73.53	\$73.53	82.43%	\$60.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76816	Ob us follow-up per fetus		\$94.26	\$114.17	\$114.17	\$114.17	82.56%	\$94.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76817	Transvaginal us obstetric	26	\$34.73	\$35.81	\$35.81	\$35.81	97.00%	\$34.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76817	Transvaginal us obstetric	TC	\$49.87	\$60.21	\$60.21	\$60.21	82.82%	\$49.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76817	Transvaginal us obstetric		\$86.55	\$96.02	\$96.02	\$96.02	90.14%	\$86.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76818	Fetal biophys profile w/nst	26	\$41.96	\$50.15	\$50.15	\$50.15	83.66%	\$41.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76818	Fetal biophys profile w/nst	TC	\$57.93	\$72.68	\$72.68	\$72.68	79.70%	\$57.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76818	Fetal biophys profile w/nst		\$99.90	\$122.84	\$122.84	\$122.84	81.33%	\$99.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76819	Fetal biophys profil w/o nst	26	\$30.26	\$36.55	\$36.55	\$36.55	82.79%	\$30.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76819	Fetal biophys profil w/o nst	TC	\$57.73	\$52.08	\$52.08	\$52.08	110.86%	\$49.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76819	Fetal biophys profil w/o nst		\$88.89	\$88.63	\$88.63	\$88.63	100.29%	\$84.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76820	Umbilical artery echo	26	\$24.90	\$23.71	\$23.71	\$23.71	105.01%	\$22.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76820	Umbilical artery echo	TC	\$23.14	\$22.36	\$22.36	\$22.36	103.50%	\$21.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76820	Umbilical artery echo		\$47.69	\$46.07	\$46.07	\$46.07	103.52%	\$43.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76821	Middle cerebral artery echo	26	\$34.66	\$33.50	\$33.50	\$33.50	103.46%	\$31.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76821	Middle cerebral artery echo	TC	\$59.63	\$58.81	\$58.81	\$58.81	101.39%	\$55.87	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	76821	Middle cerebral artery echo		\$94.29	\$92.31	\$92.31	\$92.31	102.14%	\$87.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76825	Echo exam of fetal heart	26	\$65.59	\$79.22	\$79.22	\$79.22	82.80%	\$65.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76825	Echo exam of fetal heart	TC	\$160.28	\$192.91	\$192.91	\$192.91	83.09%	\$160.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76825	Echo exam of fetal heart		\$225.87	\$272.13	\$272.13	\$272.13	83.00%	\$225.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76826	Echo exam of fetal heart	26	\$32.51	\$39.27	\$39.27	\$39.27	82.79%	\$32.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76826	Echo exam of fetal heart	TC	\$102.93	\$123.93	\$123.93	\$123.93	83.05%	\$102.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76826	Echo exam of fetal heart		\$135.44	\$163.20	\$163.20	\$163.20	82.99%	\$135.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76827	Echo exam of fetal heart	26	\$29.44	\$27.72	\$27.72	\$27.72	106.19%	\$26.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76827	Echo exam of fetal heart	TC	\$43.62	\$44.79	\$44.79	\$44.79	97.39%	\$42.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76827	Echo exam of fetal heart		\$73.05	\$72.51	\$72.51	\$72.51	100.74%	\$68.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76828	Echo exam of fetal heart	26	\$28.57	\$26.43	\$26.43	\$26.43	108.11%	\$25.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76828	Echo exam of fetal heart	TC	\$25.52	\$23.76	\$23.76	\$23.76	107.41%	\$22.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76828	Echo exam of fetal heart		\$54.06	\$50.19	\$50.19	\$50.19	107.72%	\$47.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76830	Transvaginal us non-ob	26	\$35.68	\$32.74	\$32.74	\$32.74	108.98%	\$31.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76830	Transvaginal us non-ob	TC	\$76.00	\$91.33	\$91.33	\$91.33	83.21%	\$76.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76830	Transvaginal us non-ob		\$103.60	\$124.08	\$124.08	\$124.08	83.50%	\$103.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76831	Echo exam uterus	26	\$33.87	\$34.52	\$34.52	\$34.52	98.11%	\$32.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76831	Echo exam uterus		\$100.51	\$121.03	\$121.03	\$121.03	83.05%	\$100.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76856	Us exam pelvic complete	26	\$36.04	\$32.39	\$32.39	\$32.39	111.27%	\$30.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76856	Us exam pelvic complete	TC	\$63.80	\$77.04	\$77.04	\$77.04	82.82%	\$63.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76856	Us exam pelvic complete		\$91.12	\$109.43	\$109.43	\$109.43	83.27%	\$91.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76857	Us exam pelvic limited	26	\$19.56	\$23.29	\$23.29	\$23.29	84.00%	\$19.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76857	Us exam pelvic limited	TC	\$27.50	\$27.62	\$27.62	\$27.62	99.58%	\$26.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76857	Us exam pelvic limited		\$51.95	\$50.90	\$50.90	\$50.90	102.06%	\$48.36	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76870	Us exam scrotum	26	\$33.77	\$30.01	\$30.01	\$30.01	112.52%	\$28.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76870	Us exam scrotum	TC	\$61.77	\$73.88	\$73.88	\$73.88	83.60%	\$61.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76870	Us exam scrotum		\$87.12	\$103.90	\$103.90	\$103.90	83.85%	\$87.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76872	Us transrectal	26	\$37.44	\$32.47	\$32.47	\$32.47	115.32%	\$30.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76872	Us transrectal		\$173.94	\$210.38	\$210.38	\$210.38	82.68%	\$173.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76881	Us compl joint r-t w/img	26	\$35.76	\$43.22	\$43.22	\$43.22	82.74%	\$35.76	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	76881	Us compl joint r-t w/img	TC	\$11.89	\$11.49	\$11.49	\$11.49	103.46%	\$10.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76881	Us compl joint r-t w/img		\$56.60	\$54.71	\$54.71	\$54.71	103.46%	\$51.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76882	Us lmtd jt/fcl evl nvasc xtr	26	\$27.32	\$32.67	\$32.67	\$32.67	83.64%	\$27.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76882	Us lmtd jt/fcl evl nvasc xtr	TC	\$8.06	\$32.52	\$32.52	\$32.52	24.78%	\$8.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76882	Us lmtd jt/fcl evl nvasc xtr		\$35.37	\$65.19	\$65.19	\$65.19	54.26%	\$35.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76885	Us exam infant hips dynamic	26	\$34.46	\$35.04	\$35.04	\$35.04	98.33%	\$33.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76885	Us exam infant hips dynamic	TC	\$89.00	\$106.06	\$106.06	\$106.06	83.92%	\$89.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76885	Us exam infant hips dynamic		\$118.28	\$141.10	\$141.10	\$141.10	83.83%	\$118.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76886	Us exam infant hips static	26	\$29.06	\$29.34	\$29.34	\$29.34	99.04%	\$27.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76886	Us exam infant hips static	TC	\$62.35	\$74.23	\$74.23	\$74.23	83.99%	\$62.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76932	Echo guide for heart biopsy	26	\$34.81	\$35.47	\$35.47	\$35.47	98.13%	\$33.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76936	Echo guide for artery repair	26	\$103.34	\$92.18	\$92.18	\$92.18	112.10%	\$87.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76937	Us guide vascular access	26	\$14.11	\$13.70	\$13.70	\$13.70	103.02%	\$13.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76937	Us guide vascular access		\$33.61	\$39.56	\$39.56	\$39.56	84.96%	\$33.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76940	Us guide tissue ablation	26	\$87.67	\$98.73	\$98.73	\$98.73	88.80%	\$87.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76941	Echo guide for transfusion	26	\$53.21	\$64.01	\$64.01	\$64.01	83.12%	\$53.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76942	Echo guide for biopsy	26	\$31.27	\$29.97	\$29.97	\$29.97	104.35%	\$28.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76942	Echo guide for biopsy	TC	\$30.40	\$29.72	\$29.72	\$29.72	102.29%	\$28.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76942	Echo guide for biopsy		\$61.67	\$59.69	\$59.69	\$59.69	103.32%	\$56.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76945	Echo guide villus sampling	26	\$34.23	\$31.87	\$31.87	\$31.87	107.41%	\$30.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76946	Echo guide for amniocentesis	26	\$19.32	\$18.28	\$18.28	\$18.28	105.67%	\$17.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76946	Echo guide for amniocentesis	TC	\$15.88	\$16.05	\$16.05	\$16.05	98.95%	\$15.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76946	Echo guide for amniocentesis		\$34.80	\$34.33	\$34.33	\$34.33	101.36%	\$32.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76965	Echo guidance radiotherapy	26	\$71.47	\$67.72	\$67.72	\$67.72	105.54%	\$64.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76978	Us trgt dyn mbubb 1st les	26	\$103.33	\$76.89	\$76.89	\$76.89	134.39%	\$73.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	76998	Us guide intraop	26	\$49.66	\$45.80	\$45.80	\$45.80	108.42%	\$43.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77001	Fluoroguide for vein device	26	\$16.72	\$17.71	\$17.71	\$17.71	94.42%	\$16.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77001	Fluoroguide for vein device		\$86.86	\$102.81	\$102.81	\$102.81	84.49%	\$86.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77002	Needle localization by xray	26	\$22.28	\$26.66	\$26.66	\$26.66	83.58%	\$22.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77002	Needle localization by xray	TC	\$78.33	\$94.21	\$94.21	\$94.21	83.14%	\$78.33	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	77002	Needle localization by xray		\$100.60	\$120.87	\$120.87	\$120.87	83.23%	\$100.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77003	Fluoroguide for spine inject	26	\$23.65	\$28.59	\$28.59	\$28.59	82.71%	\$23.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77003	Fluoroguide for spine inject		\$91.23	\$109.49	\$109.49	\$109.49	83.32%	\$91.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77011	Ct scan for localization	26	\$51.07	\$61.38	\$61.38	\$61.38	83.20%	\$51.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77012	Ct scan for needle biopsy	26	\$57.82	\$68.93	\$68.93	\$68.93	83.88%	\$57.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77012	Ct scan for needle biopsy	TC	\$78.31	\$74.23	\$74.23	\$74.23	105.49%	\$70.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77012	Ct scan for needle biopsy		\$150.59	\$143.17	\$143.17	\$143.17	105.19%	\$136.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77013	Ct guide for tissue ablation	26	\$150.07	\$180.37	\$180.37	\$180.37	83.20%	\$150.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77014	Ct scan for therapy guide	26	\$37.28	\$45.04	\$45.04	\$45.04	82.76%	\$37.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77014	Ct scan for therapy guide		\$129.25	\$124.19	\$124.19	\$124.19	104.08%	\$117.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77022	Mri gdn parnchyma tiss abltj	26	\$166.89	\$197.40	\$197.40	\$197.40	84.55%	\$166.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77046	Mri breast c- unilateral	26	\$89.23	\$68.46	\$68.46	\$68.46	130.35%	\$65.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77047	Mri breast c- bilateral	26	\$95.15	\$75.52	\$75.52	\$75.52	126.00%	\$71.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77047	Mri breast c- bilateral		\$255.91	\$233.45	\$233.45	\$233.45	109.62%	\$221.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77048	Mri breast c-+ w/cad uni	26	\$99.81	\$99.43	\$99.43	\$99.43	100.38%	\$94.46	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77049	Mri breast c-+ w/cad bi	26	\$105.71	\$108.87	\$108.87	\$108.87	97.10%	\$103.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77049	Mri breast c-+ w/cad bi		\$385.54	\$365.92	\$365.92	\$365.92	105.36%	\$347.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77053	X-ray of mammary duct	26	\$15.92	\$17.19	\$17.19	\$17.19	92.63%	\$15.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77053	X-ray of mammary duct		\$26.64	\$56.02	\$56.02	\$56.02	47.56%	\$26.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77065	Dx mammo incl cad uni	26	\$31.81	\$38.44	\$38.44	\$38.44	82.74%	\$31.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77065	Dx mammo incl cad uni	TC	\$84.11	\$91.76	\$91.76	\$91.76	91.66%	\$84.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77065	Dx mammo incl cad uni		\$117.28	\$130.21	\$130.21	\$130.21	90.07%	\$117.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77066	Dx mammo incl cad bi	26	\$50.34	\$47.20	\$47.20	\$47.20	106.66%	\$44.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77066	Dx mammo incl cad bi	TC	\$96.91	\$117.62	\$117.62	\$117.62	82.39%	\$96.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77066	Dx mammo incl cad bi		\$149.05	\$164.82	\$164.82	\$164.82	90.43%	\$149.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77071	X-ray stress view		\$46.61	\$56.69	\$56.69	\$56.69	82.21%	\$46.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77072	X-rays for bone age	26	\$7.54	\$9.10	\$9.10	\$9.10	82.82%	\$7.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77072	X-rays for bone age	TC	\$14.74	\$17.80	\$17.80	\$17.80	82.80%	\$14.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77072	X-rays for bone age		\$22.27	\$26.91	\$26.91	\$26.91	82.77%	\$22.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77073	X-rays bone length studies	26	\$11.85	\$13.13	\$13.13	\$13.13	90.25%	\$11.85	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	77073	X-rays bone length studies	TC	\$27.81	\$33.92	\$33.92	\$33.92	81.98%	\$27.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77073	X-rays bone length studies		\$38.67	\$47.06	\$47.06	\$47.06	82.18%	\$38.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77074	X-rays bone survey limited	26	\$19.86	\$20.92	\$20.92	\$20.92	94.92%	\$19.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77074	X-rays bone survey limited	TC	\$38.55	\$46.89	\$46.89	\$46.89	82.21%	\$38.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77074	X-rays bone survey limited		\$55.86	\$67.82	\$67.82	\$67.82	82.37%	\$55.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77075	X-rays bone survey complete	26	\$23.68	\$26.29	\$26.29	\$26.29	90.07%	\$23.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77075	X-rays bone survey complete	TC	\$64.03	\$77.31	\$77.31	\$77.31	82.82%	\$64.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77075	X-rays bone survey complete		\$86.00	\$103.60	\$103.60	\$103.60	83.01%	\$86.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77076	X-rays bone survey infant	26	\$30.39	\$33.35	\$33.35	\$33.35	91.12%	\$30.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77077	Joint survey single view	26	\$13.68	\$16.53	\$16.53	\$16.53	82.76%	\$13.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77077	Joint survey single view		\$49.79	\$48.70	\$48.70	\$48.70	102.23%	\$46.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77085	Dxa bone density study	26	\$13.50	\$14.20	\$14.20	\$14.20	95.09%	\$13.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77085	Dxa bone density study	TC	\$34.81	\$41.21	\$41.21	\$41.21	84.47%	\$34.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77085	Dxa bone density study		\$48.39	\$55.41	\$55.41	\$55.41	87.33%	\$48.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77261	Radiation therapy planning		\$65.29	\$71.41	\$71.41	\$71.41	91.43%	\$65.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77263	Radiation therapy planning		\$147.39	\$169.10	\$169.10	\$169.10	87.16%	\$147.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77280	Set radiation therapy field	26	\$31.66	\$37.98	\$37.98	\$37.98	83.35%	\$31.66	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77280	Set radiation therapy field		\$233.09	\$281.87	\$281.87	\$281.87	82.69%	\$233.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77285	Set radiation therapy field		\$381.82	\$461.71	\$461.71	\$461.71	82.70%	\$381.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77290	Set radiation therapy field	26	\$68.71	\$83.01	\$83.01	\$83.01	82.77%	\$68.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77290	Set radiation therapy field	TC	\$321.85	\$384.64	\$384.64	\$384.64	83.68%	\$321.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77290	Set radiation therapy field		\$390.56	\$467.66	\$467.66	\$467.66	83.51%	\$390.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77293	Respirator motion mgmt simul	26	\$87.54	\$106.11	\$106.11	\$106.11	82.50%	\$87.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77293	Respirator motion mgmt simul		\$355.54	\$425.56	\$425.56	\$425.56	83.55%	\$355.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77295	3-d radiotherapy plan	26	\$187.94	\$227.07	\$227.07	\$227.07	82.77%	\$187.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77295	3-d radiotherapy plan	TC	\$410.14	\$270.07	\$270.07	\$270.07	151.86%	\$256.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77295	3-d radiotherapy plan		\$527.78	\$497.14	\$497.14	\$497.14	106.16%	\$472.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77300	Radiation therapy dose plan	26	\$31.97	\$32.85	\$32.85	\$32.85	97.33%	\$31.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77300	Radiation therapy dose plan	TC	\$28.67	\$35.33	\$35.33	\$35.33	81.16%	\$28.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77300	Radiation therapy dose plan		\$60.09	\$68.17	\$68.17	\$68.17	88.14%	\$60.09	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	77301	Radiotherapy dose plan imrt	26	\$374.29	\$423.27	\$423.27	\$423.27	88.43%	\$374.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77301	Radiotherapy dose plan imrt		\$1,580.67	\$1,923.30	\$1,923.30	\$1,923.30	82.19%	\$1,580.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77306	Telethx isodose plan simple	26	\$61.42	\$74.21	\$74.21	\$74.21	82.76%	\$61.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77306	Telethx isodose plan simple		\$125.75	\$153.28	\$153.28	\$153.28	82.04%	\$125.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77307	Telethx isodose plan cplx	26	\$127.08	\$153.54	\$153.54	\$153.54	82.77%	\$127.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77307	Telethx isodose plan cplx		\$243.23	\$296.60	\$296.60	\$296.60	82.01%	\$243.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77316	Brachytx isodose plan simple	26	\$61.42	\$74.21	\$74.21	\$74.21	82.76%	\$61.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77316	Brachytx isodose plan simple		\$209.51	\$256.11	\$256.11	\$256.11	81.81%	\$209.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77317	Brachytx isodose intermed	26	\$80.20	\$97.26	\$97.26	\$97.26	82.46%	\$80.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77318	Brachytx isodose complex	26	\$126.79	\$153.19	\$153.19	\$153.19	82.77%	\$126.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77321	Special teletx port plan	26	\$41.80	\$50.50	\$50.50	\$50.50	82.77%	\$41.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77321	Special teletx port plan		\$79.76	\$97.40	\$97.40	\$97.40	81.89%	\$79.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77331	Special radiation dosimetry	26	\$38.13	\$46.42	\$46.42	\$46.42	82.15%	\$38.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77331	Special radiation dosimetry		\$64.16	\$66.67	\$66.67	\$66.67	96.23%	\$63.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77332	Radiation treatment aid(s)	26	\$26.13	\$24.06	\$24.06	\$24.06	108.59%	\$22.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77332	Radiation treatment aid(s)		\$40.41	\$40.46	\$40.46	\$40.46	99.87%	\$38.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77333	Radiation treatment aid(s)	26	\$34.81	\$39.66	\$39.66	\$39.66	87.77%	\$34.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77333	Radiation treatment aid(s)		\$118.34	\$142.64	\$142.64	\$142.64	82.97%	\$118.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77334	Radiation treatment aid(s)	26	\$50.27	\$60.99	\$60.99	\$60.99	82.42%	\$50.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77334	Radiation treatment aid(s)	TC	\$65.29	\$68.98	\$68.98	\$68.98	94.66%	\$65.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77334	Radiation treatment aid(s)		\$106.52	\$129.97	\$129.97	\$129.97	81.96%	\$106.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77336	Radiation physics consult		\$74.35	\$92.99	\$92.99	\$92.99	79.96%	\$74.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77338	Design mlc device for imrt	26	\$187.94	\$227.42	\$227.42	\$227.42	82.64%	\$187.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77338	Design mlc device for imrt		\$395.26	\$484.37	\$484.37	\$484.37	81.60%	\$395.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77370	Radiation physics consult		\$119.51	\$151.00	\$151.00	\$151.00	79.15%	\$119.51	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77372	Srs linear based		\$838.93	\$1,000.62	\$1,000.62	\$1,000.62	83.84%	\$838.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77373	Sbrt delivery		\$1,089.33	\$1,044.41	\$1,044.41	\$1,044.41	104.30%	\$992.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77401	Radiation treatment delivery		\$35.64	\$43.74	\$43.74	\$43.74	81.48%	\$35.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77417	Radiology port images(s)		\$14.79	\$15.70	\$15.70	\$15.70	94.22%	\$14.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77427	Radiation tx management x5		\$159.19	\$192.79	\$192.79	\$192.79	82.57%	\$159.19	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	77431	Radiation therapy management		\$89.39	\$109.03	\$109.03	\$109.03	81.99%	\$89.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77432	Stereotactic radiation trmt		\$415.20	\$427.50	\$427.50	\$427.50	97.12%	\$406.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77435	Sbrt management		\$585.92	\$646.66	\$646.66	\$646.66	90.61%	\$585.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77470	Special radiation treatment	26	\$89.11	\$107.75	\$107.75	\$107.75	82.70%	\$89.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77470	Special radiation treatment		\$117.13	\$145.45	\$145.45	\$145.45	80.53%	\$117.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77770	Hdr rdncI ntrstl/icav brchtx	26	\$85.28	\$103.38	\$103.38	\$103.38	82.49%	\$85.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77770	Hdr rdncI ntrstl/icav brchtx		\$296.95	\$362.32	\$362.32	\$362.32	81.96%	\$296.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77771	Hdr rdncI ntrstl/icav brchtx	26	\$166.84	\$201.31	\$201.31	\$201.31	82.88%	\$166.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77771	Hdr rdncI ntrstl/icav brchtx		\$515.13	\$629.17	\$629.17	\$629.17	81.87%	\$515.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77772	Hdr rdncI ntrstl/icav brchtx	26	\$234.76	\$284.26	\$284.26	\$284.26	82.58%	\$234.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77778	Apply interstit radiat compl	26	\$528.02	\$464.27	\$464.27	\$464.27	113.73%	\$441.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	77790	Radiation handling		\$67.48	\$18.78	\$18.78	\$18.78	359.37%	\$17.84	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78012	Thyroid uptake measurement	26	\$8.01	\$8.75	\$8.75	\$8.75	91.51%	\$8.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78012	Thyroid uptake measurement		\$69.68	\$84.59	\$84.59	\$84.59	82.37%	\$69.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78013	Thyroid imaging w/blood flow		\$154.16	\$179.16	\$179.16	\$179.16	86.05%	\$154.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78014	Thyroid imaging w/blood flow	26	\$20.91	\$22.94	\$22.94	\$22.94	91.17%	\$20.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78014	Thyroid imaging w/blood flow		\$216.61	\$227.69	\$227.69	\$227.69	95.13%	\$216.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78015	Thyroid met imaging	26	\$34.81	\$31.72	\$31.72	\$31.72	109.74%	\$30.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78018	Thyroid met imaging body	26	\$45.37	\$38.45	\$38.45	\$38.45	118.01%	\$36.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78020	Thyroid met uptake	26	\$21.76	\$25.94	\$25.94	\$25.94	83.88%	\$21.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78070	Parathyroid planar imaging	26	\$43.44	\$37.41	\$37.41	\$37.41	116.12%	\$35.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78070	Parathyroid planar imaging		\$236.24	\$281.34	\$281.34	\$281.34	83.97%	\$236.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78071	Parathyrd planar w/wo subtrj	26	\$46.29	\$55.59	\$55.59	\$55.59	83.28%	\$46.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78072	Parathyrd planar w/spect&ct	26	\$68.79	\$72.79	\$72.79	\$72.79	94.51%	\$68.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78072	Parathyrd planar w/spect&ct		\$351.24	\$414.44	\$414.44	\$414.44	84.75%	\$351.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78195	Lymph system imaging	26	\$45.99	\$55.24	\$55.24	\$55.24	83.26%	\$45.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78201	Liver imaging	26	\$22.63	\$19.87	\$19.87	\$19.87	113.88%	\$18.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78215	Liver and spleen imaging	26	\$25.66	\$22.60	\$22.60	\$22.60	113.54%	\$21.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78226	Hepatobiliary system imaging	26	\$28.70	\$34.69	\$34.69	\$34.69	82.72%	\$28.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78226	Hepatobiliary system imaging	TC	\$259.43	\$275.48	\$275.48	\$275.48	94.17%	\$259.43	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	78226	Hepatobiliary system imaging		\$290.18	\$310.17	\$310.17	\$310.17	93.55%	\$290.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78227	Hepatobil syst image w/drug	26	\$34.89	\$41.82	\$41.82	\$41.82	83.44%	\$34.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78227	Hepatobil syst image w/drug	TC	\$317.15	\$374.53	\$374.53	\$374.53	84.68%	\$317.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78227	Hepatobil syst image w/drug		\$352.04	\$416.34	\$416.34	\$416.34	84.56%	\$352.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78230	Salivary gland imaging	26	\$23.41	\$21.26	\$21.26	\$21.26	110.12%	\$20.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78261	Gastric mucosa imaging	26	\$34.81	\$27.28	\$27.28	\$27.28	127.59%	\$25.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78262	Gastroesophageal reflux exam		\$198.93	\$236.38	\$236.38	\$236.38	84.16%	\$198.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78264	Gastric emptying imag study	26	\$30.67	\$36.72	\$36.72	\$36.72	83.52%	\$30.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78264	Gastric emptying imag study		\$266.16	\$315.63	\$315.63	\$315.63	84.33%	\$266.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78265	Gastric emptying imag study	26	\$37.70	\$45.20	\$45.20	\$45.20	83.41%	\$37.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78278	Acute gi blood loss imaging	26	\$46.84	\$46.16	\$46.16	\$46.16	101.47%	\$43.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78290	Meckels divert exam	26	\$34.81	\$31.35	\$31.35	\$31.35	111.02%	\$29.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78300	Bone imaging limited area	26	\$32.65	\$28.99	\$28.99	\$28.99	112.62%	\$27.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78306	Bone imaging whole body	26	\$45.37	\$39.77	\$39.77	\$39.77	114.08%	\$37.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78306	Bone imaging whole body		\$237.90	\$281.33	\$281.33	\$281.33	84.56%	\$237.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78315	Bone imaging 3 phase	26	\$39.39	\$47.52	\$47.52	\$47.52	82.89%	\$39.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78315	Bone imaging 3 phase		\$278.64	\$330.64	\$330.64	\$330.64	84.27%	\$278.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78430	Myocrd img pet rst/strs w/ct	26	\$88.74	\$74.59	\$74.59	\$74.59	118.98%	\$70.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78431	Myocrd img pet rst&strs ct	26	\$103.34	\$87.14	\$87.14	\$87.14	118.60%	\$82.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78433	Myocrd img pet 2rtracer ct	26	\$120.25	\$101.87	\$101.87	\$101.87	118.04%	\$96.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78434	Aqmbf pet rest & rx stress	26	\$34.75	\$28.70	\$28.70	\$28.70	121.08%	\$27.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78451	Ht muscle image spect sing	26	\$52.88	\$63.80	\$63.80	\$63.80	82.88%	\$52.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78451	Ht muscle image spect sing		\$272.10	\$326.32	\$326.32	\$326.32	83.39%	\$272.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78452	Ht muscle image spect mult	26	\$62.60	\$75.29	\$75.29	\$75.29	83.15%	\$62.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78452	Ht muscle image spect mult	TC	\$315.12	\$376.55	\$376.55	\$376.55	83.69%	\$315.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78452	Ht muscle image spect mult		\$377.72	\$451.84	\$451.84	\$451.84	83.60%	\$377.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78453	Ht muscle image planar sing	26	\$38.25	\$45.25	\$45.25	\$45.25	84.54%	\$38.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78454	Ht musc image planar mult	26	\$52.71	\$63.01	\$63.01	\$63.01	83.65%	\$52.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78459	Myocrd img pet single study	26	\$82.02	\$72.50	\$72.50	\$72.50	113.13%	\$68.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78469	Heart infarct image (3d)	26	\$50.34	\$42.56	\$42.56	\$42.56	118.28%	\$40.43	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	78472	Gated heart planar single	26	\$53.18	\$45.55	\$45.55	\$45.55	116.75%	\$43.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78472	Gated heart planar single		\$183.17	\$219.11	\$219.11	\$219.11	83.60%	\$183.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78481	Heart first pass single	26	\$55.20	\$45.55	\$45.55	\$45.55	121.18%	\$43.27	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78492	Myocrd img pet mlt rst&strs	26	\$104.63	\$83.78	\$83.78	\$83.78	124.89%	\$79.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78580	Lung perfusion imaging	26	\$39.10	\$34.34	\$34.34	\$34.34	113.85%	\$32.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78582	Lung ventilat&perfus imaging	26	\$43.98	\$49.55	\$49.55	\$49.55	88.76%	\$43.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78582	Lung ventilat&perfus imaging		\$266.96	\$316.62	\$316.62	\$316.62	84.32%	\$266.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78597	Lung perfusion differential	26	\$30.21	\$33.35	\$33.35	\$33.35	90.58%	\$30.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78598	Lung perf&ventilat diferentl	26	\$32.34	\$38.46	\$38.46	\$38.46	84.09%	\$32.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78601	Brain image w/flow < 4 views	26	\$26.81	\$23.62	\$23.62	\$23.62	113.50%	\$22.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78606	Brain image w/flow 4 + views	26	\$33.77	\$29.66	\$29.66	\$29.66	113.85%	\$28.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78608	Brain imaging (pet)	26	\$70.43	\$68.46	\$68.46	\$68.46	102.88%	\$65.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78610	Brain flow imaging only	26	\$16.37	\$13.85	\$13.85	\$13.85	118.22%	\$13.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78630	Cerebrospinal fluid scan	26	\$36.04	\$31.35	\$31.35	\$31.35	114.95%	\$29.79	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78630	Cerebrospinal fluid scan		\$271.52	\$321.83	\$321.83	\$321.83	84.37%	\$271.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78645	Csf shunt evaluation	26	\$26.13	\$26.26	\$26.26	\$26.26	99.50%	\$24.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78707	K flow/funct image w/o drug	26	\$39.18	\$43.83	\$43.83	\$43.83	89.39%	\$39.18	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78708	K flow/funct image w/drug	26	\$52.41	\$55.65	\$55.65	\$55.65	94.18%	\$52.41	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78708	K flow/funct image w/drug		\$198.59	\$181.46	\$181.46	\$181.46	109.44%	\$172.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78709	K flow/funct image multiple	26	\$58.58	\$64.74	\$64.74	\$64.74	90.49%	\$58.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78725	Kidney function study	26	\$19.69	\$16.88	\$16.88	\$16.88	116.64%	\$16.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78761	Testicular imaging w/flow	26	\$37.61	\$33.69	\$33.69	\$33.69	111.64%	\$32.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78800	Rp loclzj tum 1 area 1 d img	26	\$34.46	\$30.49	\$30.49	\$30.49	113.03%	\$28.96	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78801	Rp loclzj tum 2+area 1+d img	26	\$41.79	\$33.66	\$33.66	\$33.66	124.16%	\$31.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78802	Rp loclzj tum whbdy 1 d img	26	\$45.37	\$36.71	\$36.71	\$36.71	123.60%	\$34.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78803	Rp loclzj tum spect 1 area	26	\$57.64	\$49.87	\$49.87	\$49.87	115.59%	\$47.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78803	Rp loclzj tum spect 1 area		\$306.72	\$362.85	\$362.85	\$362.85	84.53%	\$306.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78804	Rp loclzj tum whbdy 2+d img	26	\$46.93	\$46.48	\$46.48	\$46.48	100.96%	\$44.16	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78812	Pet image skull-thigh	26	\$84.98	\$88.97	\$88.97	\$88.97	95.52%	\$84.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78814	Pet image w/ct lmt d	26	\$93.94	\$100.76	\$100.76	\$100.76	93.23%	\$93.94	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Radiology	78815	Pet image w/ct skull-thigh	26	\$106.73	\$112.24	\$112.24	\$112.24	95.09%	\$106.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78816	Pet image w/ct full body	26	\$102.31	\$113.28	\$113.28	\$113.28	90.32%	\$102.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78830	Rp loclczj tum spect w/ct 1	26	\$80.46	\$66.72	\$66.72	\$66.72	120.60%	\$63.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78831	Rp loclczj tum spect 2 areas	26	\$98.16	\$84.23	\$84.23	\$84.23	116.54%	\$80.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	78832	Rp loclczj tum spect w/ct 2	26	\$114.35	\$95.69	\$95.69	\$95.69	119.50%	\$90.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	79005	Nuclear rx oral admin	26	\$85.91	\$83.35	\$83.35	\$83.35	103.07%	\$79.19	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	79005	Nuclear rx oral admin		\$142.31	\$137.18	\$137.18	\$137.18	103.74%	\$130.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	79101	Nuclear rx iv admin	26	\$94.04	\$92.93	\$92.93	\$92.93	101.19%	\$88.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Radiology	79445	Nuclear rx intra-arterial	26	\$115.69	\$107.87	\$107.87	\$107.87	107.25%	\$102.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94010	Breathing capacity test	26	\$8.51	\$8.08	\$8.08	\$8.08	105.29%	\$7.68	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94010	Breathing capacity test		\$33.84	\$28.34	\$28.34	\$28.34	119.42%	\$26.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94011	Spirometry up to 2 yrs old		\$64.12	\$84.46	\$84.46	\$84.46	75.92%	\$64.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94013	Meas lung vol thru 2 yrs		\$20.78	\$18.44	\$18.44	\$18.44	112.70%	\$17.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94014	Patient recorded spirometry		\$33.08	\$57.88	\$57.88	\$57.88	57.15%	\$33.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94016	Review patient spirometry		\$21.13	\$24.31	\$24.31	\$24.31	86.93%	\$21.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94060	Evaluation of wheezing	26	\$12.30	\$10.11	\$10.11	\$10.11	121.65%	\$9.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94060	Evaluation of wheezing		\$43.05	\$40.53	\$40.53	\$40.53	106.22%	\$38.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94070	Evaluation of wheezing	26	\$15.38	\$27.34	\$27.34	\$27.34	56.25%	\$15.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94070	Evaluation of wheezing		\$43.05	\$65.05	\$65.05	\$65.05	66.18%	\$43.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94200	Lung function test (mbc/mvv)	26	\$4.62	\$2.65	\$2.65	\$2.65	174.08%	\$2.52	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94200	Lung function test (mbc/mvv)		\$15.38	\$15.55	\$15.55	\$15.55	98.92%	\$14.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94375	Respiratory flow volume loop	26	\$14.87	\$14.18	\$14.18	\$14.18	104.85%	\$13.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94375	Respiratory flow volume loop		\$37.72	\$40.40	\$40.40	\$40.40	93.38%	\$37.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94610	Surfactant admin thru tube		\$47.11	\$56.20	\$56.20	\$56.20	83.83%	\$47.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94617	Exercise tst brncpsm w/ecg	26	\$49.91	\$31.47	\$31.47	\$31.47	158.57%	\$29.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94617	Exercise tst brncpsm w/ecg		\$86.12	\$92.24	\$92.24	\$92.24	93.37%	\$86.12	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94618	Pulmonary stress testing	26	\$22.70	\$21.91	\$21.91	\$21.91	103.59%	\$20.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94618	Pulmonary stress testing		\$39.02	\$34.81	\$34.81	\$34.81	112.10%	\$33.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94621	Cardiopulm exercise testing	26	\$33.23	\$67.02	\$67.02	\$67.02	49.58%	\$33.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94621	Cardiopulm exercise testing	TC	\$42.63	\$92.66	\$92.66	\$92.66	46.01%	\$42.63	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Respiratory	94621	Cardiopulm exercise testing		\$75.89	\$159.69	\$159.69	\$159.69	47.52%	\$75.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94640	Airway inhalation treatment		\$13.93	\$8.34	\$8.34	\$8.34	167.08%	\$7.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94644	Cbt 1st hour		\$28.15	\$62.59	\$62.59	\$62.59	44.97%	\$28.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94660	Pos airway pressure cpap		\$57.49	\$66.41	\$36.97	\$66.41	86.57%	\$57.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94664	Evaluate pt use of inhaler		\$14.74	\$18.78	\$18.78	\$18.78	78.50%	\$14.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94680	Exhaled air analysis o2	26	\$12.62	\$12.43	\$12.43	\$12.43	101.53%	\$11.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94690	Exhaled air analysis	26	\$3.61	\$3.68	\$3.68	\$3.68	98.22%	\$3.49	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94690	Exhaled air analysis		\$51.19	\$50.92	\$50.92	\$50.92	100.53%	\$48.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94726	Pulm funct tst plethysmograp	26	\$10.73	\$11.80	\$11.80	\$11.80	90.91%	\$10.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94726	Pulm funct tst plethysmograp		\$47.28	\$58.27	\$58.27	\$58.27	81.14%	\$47.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94727	Pulm function test by gas	26	\$10.73	\$11.80	\$11.80	\$11.80	90.91%	\$10.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94727	Pulm function test by gas		\$37.09	\$46.43	\$46.43	\$46.43	79.88%	\$37.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94728	Airwy resist by oscillometry	26	\$10.73	\$12.15	\$12.15	\$12.15	88.28%	\$10.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94729	Co/membrane diffuse capacity	26	\$7.10	\$8.75	\$8.75	\$8.75	81.11%	\$7.10	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94729	Co/membrane diffuse capacity		\$47.01	\$59.15	\$59.15	\$59.15	79.47%	\$47.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94760	Measure blood oxygen level		\$2.72	\$2.73	\$2.73	\$2.73	99.67%	\$2.59	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94761	Measure blood oxygen level		\$5.18	\$4.13	\$4.13	\$4.13	125.39%	\$3.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94762	Measure blood oxygen level		\$29.25	\$26.56	\$26.56	\$26.56	110.11%	\$25.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94780	Cars/bd tst infnt-12mo 60 min		\$44.53	\$55.14	\$23.24	\$55.14	80.76%	\$44.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Respiratory	94781	Cars/bd tst infnt-12mo +30min		\$17.32	\$22.10	\$8.08	\$22.10	78.36%	\$17.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95782	Polysom <6 yrs 4/> paramtrs	26	\$111.78	\$122.74	\$122.74	\$122.74	91.07%	\$111.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95782	Polysom <6 yrs 4/> paramtrs	TC	\$808.37	\$900.63	\$900.63	\$900.63	89.76%	\$808.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95782	Polysom <6 yrs 4/> paramtrs		\$920.14	\$1,023.37	\$1,023.37	\$1,023.37	89.91%	\$920.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95783	Polysom <6 yrs cpap/bilvl	26	\$122.20	\$133.89	\$133.89	\$133.89	91.27%	\$122.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95783	Polysom <6 yrs cpap/bilvl		\$982.08	\$1,084.76	\$1,084.76	\$1,084.76	90.53%	\$982.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95800	Slp stdy unattended	26	\$50.32	\$39.16	\$39.16	\$39.16	128.49%	\$37.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95800	Slp stdy unattended	TC	\$128.08	\$102.20	\$102.20	\$102.20	125.32%	\$97.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95800	Slp stdy unattended		\$178.37	\$141.36	\$141.36	\$141.36	126.18%	\$134.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95801	Slp stdy unatnd w/anal	26	\$44.37	\$40.56	\$40.56	\$40.56	109.38%	\$38.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95801	Slp stdy unatnd w/anal		\$83.91	\$100.70	\$100.70	\$100.70	83.33%	\$83.91	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Sleep Studies	95803	Actigraphy testing	26	\$18.00	\$41.62	\$41.62	\$41.62	43.25%	\$18.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95803	Actigraphy testing		\$58.50	\$140.74	\$140.74	\$140.74	41.57%	\$58.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95805	Multiple sleep latency test	26	\$68.00	\$56.79	\$56.79	\$56.79	119.74%	\$53.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95805	Multiple sleep latency test	TC	\$140.93	\$394.48	\$394.48	\$394.48	35.73%	\$140.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95805	Multiple sleep latency test		\$208.95	\$451.27	\$451.27	\$451.27	46.30%	\$208.95	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95806	Sleep study unatt&resp efft	26	\$82.99	\$43.60	\$43.60	\$43.60	190.35%	\$41.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95806	Sleep study unatt&resp efft	TC	\$128.66	\$53.83	\$53.83	\$53.83	239.02%	\$51.14	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95806	Sleep study unatt&resp efft		\$211.65	\$97.43	\$97.43	\$97.43	217.24%	\$92.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95807	Sleep study attended	26	\$82.21	\$58.70	\$58.70	\$58.70	140.06%	\$55.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95808	Polysom any age 1-3> param	26	\$93.42	\$82.47	\$82.47	\$82.47	113.28%	\$78.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95808	Polysom any age 1-3> param	TC	\$127.67	\$452.24	\$452.24	\$452.24	28.23%	\$127.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95810	Polysom 6/> yrs 4/> param	26	\$133.70	\$117.21	\$117.21	\$117.21	114.07%	\$111.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95810	Polysom 6/> yrs 4/> param	TC	\$560.79	\$533.41	\$533.41	\$533.41	105.13%	\$506.74	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95810	Polysom 6/> yrs 4/> param		\$694.48	\$650.62	\$650.62	\$650.62	106.74%	\$618.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95811	Polysom 6/>yrs cpap 4/> parm	26	\$138.84	\$121.89	\$121.89	\$121.89	113.91%	\$115.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95811	Polysom 6/>yrs cpap 4/> parm	TC	\$579.04	\$558.22	\$558.22	\$558.22	103.73%	\$530.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Sleep Studies	95811	Polysom 6/>yrs cpap 4/> parm		\$717.90	\$680.11	\$680.11	\$680.11	105.56%	\$646.11	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vaccines and Immunizations	90460	Im admin 1st/only component		\$21.17	\$23.68	\$23.68	\$23.68	89.42%	\$21.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vaccines and Immunizations	90471	Immunization admin		\$21.17	\$21.40	\$21.40	\$21.40	98.92%	\$20.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vaccines and Immunizations	90472	Immunization admin each add		\$12.29	\$15.12	\$15.12	\$15.12	81.27%	\$12.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vaccines and Immunizations	90473	Immune admin oral/nasal		\$21.17	\$17.20	\$17.20	\$17.20	123.11%	\$16.34	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vaccines and Immunizations	90474	Immune admin oral/nasal addl		\$12.29	\$12.32	\$12.32	\$12.32	99.77%	\$11.70	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93880	Extracranial bilat study	26	\$31.32	\$37.53	\$37.53	\$37.53	83.45%	\$31.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93880	Extracranial bilat study	TC	\$133.28	\$160.31	\$160.31	\$160.31	83.14%	\$133.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93880	Extracranial bilat study		\$164.61	\$197.84	\$197.84	\$197.84	83.20%	\$164.61	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93882	Extracranial uni/ltd study	26	\$19.50	\$23.34	\$23.34	\$23.34	83.56%	\$19.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93882	Extracranial uni/ltd study	TC	\$87.25	\$106.41	\$106.41	\$106.41	82.00%	\$87.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93882	Extracranial uni/ltd study		\$106.75	\$129.74	\$129.74	\$129.74	82.28%	\$106.75	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93886	Intracranial complete study	26	\$40.72	\$45.93	\$45.93	\$45.93	88.65%	\$40.72	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93886	Intracranial complete study	TC	\$195.71	\$240.58	\$240.58	\$240.58	81.35%	\$195.71	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Vascular	93886	Intracranial complete study		\$233.20	\$286.51	\$286.51	\$286.51	81.39%	\$233.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93888	Intracranial limited study	26	\$26.34	\$24.61	\$24.61	\$24.61	107.02%	\$23.38	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93888	Intracranial limited study	TC	\$146.08	\$142.16	\$142.16	\$142.16	102.76%	\$135.05	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93888	Intracranial limited study		\$171.82	\$166.77	\$166.77	\$166.77	103.03%	\$158.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93893	Tcd emboli detect w/inj		\$341.21	\$421.15	\$421.15	\$421.15	81.02%	\$341.21	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93922	Upr/l xtremity art 2 levels	26	\$12.33	\$11.67	\$11.67	\$11.67	105.67%	\$11.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93922	Upr/l xtremity art 2 levels	TC	\$60.83	\$74.16	\$74.16	\$74.16	82.03%	\$60.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93922	Upr/l xtremity art 2 levels		\$85.21	\$85.83	\$85.83	\$85.83	99.28%	\$81.54	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93923	Upr/lxtr art stdy 3+ lvls	26	\$22.00	\$21.31	\$21.31	\$21.31	103.25%	\$20.24	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93923	Upr/lxtr art stdy 3+ lvls	TC	\$92.77	\$114.39	\$114.39	\$114.39	81.10%	\$92.77	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93923	Upr/lxtr art stdy 3+ lvls		\$132.15	\$135.70	\$135.70	\$135.70	97.38%	\$128.92	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93924	Lwr xtr vasc stdy bilat	26	\$24.47	\$23.34	\$23.34	\$23.34	104.86%	\$22.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93924	Lwr xtr vasc stdy bilat		\$165.70	\$166.82	\$166.82	\$166.82	99.33%	\$158.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93925	Lower extremity study	26	\$38.16	\$37.18	\$37.18	\$37.18	102.63%	\$35.32	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93925	Lower extremity study	TC	\$176.83	\$213.51	\$213.51	\$213.51	82.82%	\$176.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93925	Lower extremity study		\$232.04	\$250.70	\$250.70	\$250.70	92.56%	\$232.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93926	Lower extremity study	26	\$18.55	\$22.71	\$22.71	\$22.71	81.68%	\$18.55	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93926	Lower extremity study	TC	\$114.64	\$127.36	\$127.36	\$127.36	90.01%	\$114.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93926	Lower extremity study		\$133.30	\$150.07	\$150.07	\$150.07	88.82%	\$133.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93930	Upper extremity study	26	\$38.71	\$37.46	\$37.46	\$37.46	103.34%	\$35.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93930	Upper extremity study		\$221.78	\$206.18	\$206.18	\$206.18	107.57%	\$195.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93931	Upper extremity study	26	\$23.55	\$23.06	\$23.06	\$23.06	102.12%	\$21.91	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93931	Upper extremity study	TC	\$109.43	\$105.71	\$105.71	\$105.71	103.52%	\$100.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93931	Upper extremity study		\$132.98	\$128.77	\$128.77	\$128.77	103.27%	\$122.33	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93970	Extremity study	26	\$33.96	\$32.50	\$32.50	\$32.50	104.49%	\$30.88	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93970	Extremity study	TC	\$135.31	\$162.41	\$162.41	\$162.41	83.31%	\$135.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93970	Extremity study		\$174.83	\$194.91	\$194.91	\$194.91	89.70%	\$174.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93971	Extremity study	26	\$17.45	\$20.83	\$20.83	\$20.83	83.76%	\$17.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93971	Extremity study	TC	\$95.37	\$103.25	\$103.25	\$103.25	92.37%	\$95.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93971	Extremity study		\$112.41	\$124.08	\$124.08	\$124.08	90.59%	\$112.41	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Vascular	93975	Vascular study	26	\$56.84	\$54.37	\$54.37	\$54.37	104.54%	\$51.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93975	Vascular study	TC	\$183.80	\$220.88	\$220.88	\$220.88	83.21%	\$183.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93975	Vascular study		\$286.59	\$275.24	\$275.24	\$275.24	104.12%	\$261.48	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93976	Vascular study	26	\$39.06	\$37.68	\$37.68	\$37.68	103.65%	\$35.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93976	Vascular study	TC	\$139.35	\$127.44	\$127.44	\$127.44	109.35%	\$121.07	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93976	Vascular study		\$170.63	\$165.12	\$165.12	\$165.12	103.34%	\$156.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93978	Vascular study	26	\$38.53	\$37.31	\$37.31	\$37.31	103.28%	\$35.44	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93978	Vascular study	TC	\$159.39	\$150.15	\$150.15	\$150.15	106.16%	\$142.64	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93978	Vascular study		\$193.88	\$187.45	\$187.45	\$187.45	103.43%	\$178.08	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93979	Vascular study	26	\$23.55	\$23.34	\$23.34	\$23.34	100.92%	\$22.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93979	Vascular study	TC	\$102.53	\$99.40	\$99.40	\$99.40	103.15%	\$94.43	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93979	Vascular study		\$126.08	\$122.73	\$122.73	\$122.73	102.73%	\$116.60	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93980	Penile vascular study	26	\$60.85	\$59.44	\$59.44	\$59.44	102.37%	\$56.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93980	Penile vascular study	TC	\$62.33	\$61.27	\$61.27	\$61.27	101.74%	\$58.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93980	Penile vascular study		\$123.20	\$120.71	\$120.71	\$120.71	102.06%	\$114.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93981	Penile vascular study	26	\$19.06	\$20.85	\$20.85	\$20.85	91.43%	\$19.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93985	Dup-scan hemo compl bi std	26	\$38.35	\$36.81	\$36.81	\$36.81	104.19%	\$34.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93985	Dup-scan hemo compl bi std		\$267.38	\$258.03	\$258.03	\$258.03	103.62%	\$245.13	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93986	Dup-scan hemo compl uni std	26	\$24.01	\$22.91	\$22.91	\$22.91	104.80%	\$21.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93986	Dup-scan hemo compl uni std		\$159.21	\$151.67	\$151.67	\$151.67	104.97%	\$144.09	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93990	Doppler flow testing	26	\$23.56	\$22.83	\$22.83	\$22.83	103.18%	\$21.69	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	93990	Doppler flow testing		\$157.67	\$153.00	\$153.00	\$153.00	103.05%	\$145.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58150	Total hysterectomy		\$839.94	\$1,025.46	\$1,025.46	\$1,025.46	81.91%	\$839.94	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58152	Total hysterectomy		\$1,004.80	\$1,244.75	\$1,244.75	\$1,244.75	80.72%	\$1,004.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58180	Partial hysterectomy		\$778.67	\$969.02	\$969.02	\$969.02	80.36%	\$778.67	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58200	Extensive hysterectomy		\$1,090.40	\$1,359.23	\$1,359.23	\$1,359.23	80.22%	\$1,090.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58210	Extensive hysterectomy		\$1,476.00	\$1,836.09	\$1,836.09	\$1,836.09	80.39%	\$1,476.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58240	Removal of pelvis contents		\$2,424.03	\$2,942.13	\$2,942.13	\$2,942.13	82.39%	\$2,424.03	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58260	Vaginal hysterectomy		\$697.83	\$848.13	\$848.13	\$848.13	82.28%	\$697.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Vascular	58262	Vag hyst including t/o		\$754.54	\$936.23	\$936.23	\$936.23	80.59%	\$754.54	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Women's Health and Family	58290	Vag hyst complex		\$953.90	\$1,157.95	\$1,157.95	\$1,157.95	82.38%	\$953.90	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58291	Vag hyst incl t/o complex		\$1,010.00	\$1,250.18	\$1,250.18	\$1,250.18	80.79%	\$1,010.00	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58292	Vag hyst t/o & repair compl		\$1,085.50	\$1,317.05	\$1,317.05	\$1,317.05	82.42%	\$1,085.50	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58541	Lsh uterus 250 g or less		\$595.80	\$739.39	\$739.39	\$739.39	80.58%	\$595.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58542	Lsh w/t/o ut 250 g or less		\$676.71	\$838.41	\$838.41	\$838.41	80.71%	\$676.71	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58544	Lsh w/t/o uterus above 250 g		\$753.65	\$913.68	\$913.68	\$913.68	82.48%	\$753.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58545	Laparoscopic myomectomy		\$746.76	\$909.45	\$909.45	\$909.45	82.11%	\$746.76	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58546	Laparo-myomectomy complex		\$903.20	\$1,118.94	\$1,118.94	\$1,118.94	80.72%	\$903.20	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58548	Lap radical hyst		\$1,556.58	\$1,900.43	\$1,900.43	\$1,900.43	81.91%	\$1,556.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58550	Laparo-asst vag hysterectomy		\$731.82	\$890.65	\$890.65	\$890.65	82.17%	\$731.82	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58552	Laparo-vag hyst incl t/o		\$813.63	\$988.81	\$988.81	\$988.81	82.28%	\$813.63	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58554	Laparo-vag hyst w/t/o compl		\$1,056.57	\$1,312.25	\$1,312.25	\$1,312.25	80.52%	\$1,056.57	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58570	Tlh uterus 250 g or less		\$671.28	\$817.00	\$817.00	\$817.00	82.16%	\$671.28	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58571	Tlh w/t/o 250 g or less		\$739.02	\$919.89	\$919.89	\$919.89	80.34%	\$739.02	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58572	Tlh uterus over 250 g		\$843.47	\$1,022.23	\$1,022.23	\$1,022.23	82.51%	\$843.47	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	58573	Tlh w/t/o uterus over 250 g		\$1,007.42	\$1,229.40	\$1,229.40	\$1,229.40	81.94%	\$1,007.42	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77067	Scr mammo bi incl cad	26	\$35.10	\$36.07	\$36.07	\$36.07	97.32%	\$34.26	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77067	Scr mammo bi incl cad	TC	\$87.06	\$97.02	\$97.02	\$97.02	89.74%	\$87.06	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77067	Scr mammo bi incl cad		\$122.15	\$133.08	\$133.08	\$133.08	91.78%	\$122.15	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77078	Ct bone density axial	26	\$10.89	\$11.82	\$11.82	\$11.82	92.14%	\$10.89	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77080	Dxa bone density axial	26	\$9.67	\$9.44	\$9.44	\$9.44	102.44%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77080	Dxa bone density axial	TC	\$31.12	\$31.12	\$31.12	\$31.12	100.00%	\$29.56	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77080	Dxa bone density axial		\$40.89	\$40.56	\$40.56	\$40.56	100.81%	\$38.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77081	Dxa bone density/peripheral	26	\$9.92	\$9.44	\$9.44	\$9.44	105.09%	\$8.97	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	77081	Dxa bone density/peripheral		\$30.65	\$32.85	\$32.85	\$32.85	93.31%	\$30.65	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	88141	Cytopath c/v interpret		\$18.80	\$24.77	\$24.77	\$24.77	75.89%	\$18.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	99406	Behav chng smoking 3-10 min		\$12.83	\$14.91	\$11.76	\$14.91	86.03%	\$12.83	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	99407	Behav chng smoking > 10 min		\$26.97	\$27.69	\$24.89	\$27.69	97.39%	\$26.31	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	G0101	Ca screen;pelvic/breast exam		\$32.93	\$40.16	\$27.54	\$40.16	82.00%	\$32.93	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Women's Health and Family	G0124	Screen c/v thin layer by md		\$24.18	\$24.77	\$24.77	\$24.77	97.61%	\$23.53	The Medicare benchmark rate is the Medicare non-facility rate

Physician Services - Women's Health and Family Planning Services	Q0091	Obtaining screen pap smear		\$42.73	\$45.91	\$18.22	\$45.91	93.07%	\$42.73	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91010	Esophagus motility study	26	\$52.86	\$64.23	\$64.23	\$64.23	82.30%	\$52.86	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91010	Esophagus motility study		\$190.35	\$229.87	\$229.87	\$229.87	82.81%	\$190.35	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91034	Gastroesophageal reflux test	26	\$40.80	\$49.27	\$49.27	\$49.27	82.81%	\$40.80	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91034	Gastroesophageal reflux test		\$186.85	\$199.14	\$199.14	\$199.14	93.83%	\$186.85	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91035	G-esoph reflx tst w/electrod	26	\$66.58	\$80.49	\$80.49	\$80.49	82.72%	\$66.58	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91035	G-esoph reflx tst w/electrod		\$399.53	\$474.67	\$474.67	\$474.67	84.17%	\$399.53	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91037	Esoph impeded function test	26	\$40.04	\$48.37	\$48.37	\$48.37	82.78%	\$40.04	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91037	Esoph impeded function test		\$144.99	\$175.46	\$175.46	\$175.46	82.64%	\$144.99	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91038	Esoph impeded funct test > 1hr	26	\$45.39	\$55.11	\$55.11	\$55.11	82.36%	\$45.39	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91038	Esoph impeded funct test > 1hr		\$354.17	\$421.25	\$421.25	\$421.25	84.08%	\$354.17	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91040	Esoph balloon distension tst	26	\$40.40	\$48.85	\$48.85	\$48.85	82.71%	\$40.40	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91040	Esoph balloon distension tst		\$483.29	\$540.90	\$540.90	\$540.90	89.35%	\$483.29	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91065	Breath hydrogen/methane test	26	\$10.73	\$9.79	\$9.79	\$9.79	109.60%	\$9.30	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91065	Breath hydrogen/methane test		\$72.78	\$77.36	\$77.36	\$77.36	94.07%	\$72.78	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91110	Gi trc img intral esoph-ile	26	\$92.25	\$111.79	\$111.79	\$111.79	82.52%	\$92.25	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91110	Gi trc img intral esoph-ile		\$681.37	\$763.68	\$763.68	\$763.68	89.22%	\$681.37	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91112	Gi wireless capsule measure		\$1,431.87	\$1,688.12	\$1,688.12	\$1,688.12	84.82%	\$1,431.87	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91117	Colon motility 6 hr study		\$121.23	\$135.96	\$135.96	\$135.96	89.17%	\$121.23	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91120	Rectal sensation test	26	\$39.45	\$47.94	\$47.94	\$47.94	82.28%	\$39.45	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91120	Rectal sensation test		\$456.98	\$523.87	\$523.87	\$523.87	87.23%	\$456.98	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91122	Anal pressure record	26	\$72.01	\$87.11	\$87.11	\$87.11	82.67%	\$72.01	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91122	Anal pressure record		\$235.62	\$286.67	\$286.67	\$286.67	82.19%	\$235.62	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91200	Liver elastography	26	\$9.81	\$10.48	\$10.48	\$10.48	93.64%	\$9.81	The Medicare benchmark rate is the Medicare non-facility rate
Physician Services - Gastroenterology	91200	Liver elastography		\$27.96	\$31.78	\$31.78	\$31.78	87.97%	\$27.96	The Medicare benchmark rate is the Medicare non-facility rate
Surgery - Cardiovascular System	33016	PERICARDIOCENTESIS W/IMAGING		\$229.32	\$226.92	\$226.92	\$226.92	101.06%	\$215.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33017	PRCRD DRG 6YR+ W/O CGEN CAR		\$240.74	\$239.38	\$239.38	\$239.38	100.57%	\$227.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33018	PRCRD DRG 0-5YR OR W/ANOMLY		\$282.06	\$279.47	\$279.47	\$279.47	100.93%	\$265.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33020	INCISION OF HEART SAC		\$651.60	\$807.50	\$807.50	\$807.50	80.69%	\$651.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33025	INCISION OF HEART SAC		\$608.30	\$755.91	\$755.91	\$755.91	80.47%	\$608.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33030	PARTIAL REMOVAL OF HEART SAC		\$1,567.20	\$1,946.02	\$1,946.02	\$1,946.02	80.53%	\$1,567.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33120	REMOVAL OF HEART LESION		\$1,634.56	\$2,027.32	\$2,027.32	\$2,027.32	80.63%	\$1,634.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33202	INSERT EPICARD ELTRD OPEN		\$609.49	\$755.91	\$755.91	\$755.91	80.63%	\$609.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33206	INSERT HEART PM ATRIAL		\$458.12	\$447.24	\$447.24	\$447.24	102.43%	\$424.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33207	INSERT HEART PM VENTRICULAR		\$458.12	\$468.88	\$468.88	\$468.88	97.71%	\$445.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33208	INSRT HEART PM ATRIAL & VENT		\$515.83	\$507.26	\$507.26	\$507.26	101.69%	\$481.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33210	INSERT ELECTRD/PM CATH SNGL		\$158.56	\$156.14	\$156.14	\$156.14	101.55%	\$148.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33212	INSERT PULSE GEN SNGL LEAD		\$305.41	\$318.59	\$318.59	\$318.59	95.86%	\$302.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33213	INSERT PULSE GEN DUAL LEADS		\$336.00	\$333.51	\$333.51	\$333.51	100.75%	\$316.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33215	REPOSITION PACING-DEFIB LEAD		\$247.68	\$305.55	\$305.55	\$305.55	81.06%	\$247.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33216	INSERT 1 ELECTRODE PM-DEFIB		\$373.20	\$366.90	\$366.90	\$366.90	101.72%	\$348.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33222	RELOCATION POCKET PACEMAKER		\$305.41	\$341.14	\$341.14	\$341.14	89.53%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33225	L VENTRIC PACING LEAD ADD-ON		\$365.92	\$446.85	\$446.85	\$446.85	81.89%	\$365.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33227	REMOVE&REPLACE PM GEN SINGL		\$297.00	\$334.60	\$334.60	\$334.60	88.76%	\$297.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33228	REMOV&REPLC PM GEN DUAL LEAD		\$309.61	\$349.24	\$349.24	\$349.24	88.65%	\$309.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33229	REMOV&REPLC PM GEN MULT LEADS		\$322.20	\$367.32	\$367.32	\$367.32	87.72%	\$322.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33233	REMOVAL OF PM GENERATOR		\$188.88	\$232.44	\$232.44	\$232.44	81.26%	\$188.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33234	REMOVAL OF PACEMAKER SYSTEM		\$386.80	\$476.05	\$476.05	\$476.05	81.25%	\$386.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33235	REMOVAL PACEMAKER ELECTRODE		\$509.44	\$626.09	\$626.09	\$626.09	81.37%	\$509.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33236	REMOVE ELECTRODE/THORACOTOMY		\$623.20	\$772.16	\$772.16	\$772.16	80.71%	\$623.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33241	REMOVE PULSE GENERATOR		\$173.04	\$213.46	\$213.46	\$213.46	81.06%	\$173.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33243	REMOVE ELTRD/THORACOTOMY		\$1,136.12	\$1,346.89	\$1,346.89	\$1,346.89	84.35%	\$1,136.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33244	REMOVE ELCTRD TRANSVENOUSLY		\$760.86	\$847.36	\$847.36	\$847.36	89.79%	\$760.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33249	INSJ/RPLCMT DEFIB W/LEAD(S)		\$876.54	\$893.21	\$893.21	\$893.21	98.13%	\$848.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33256	ABLATE ATRIA W/BYPASS EXTEN		\$1,509.60	\$1,867.79	\$1,867.79	\$1,867.79	80.82%	\$1,509.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33257	ABLATE ATRIA LMTD ADD-ON		\$461.20	\$572.91	\$572.91	\$572.91	80.50%	\$461.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33259	ABLATE ATRIA W/BYPASS ADD-ON		\$668.93	\$831.94	\$831.94	\$831.94	80.41%	\$668.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33261	ABLATE HEART DYSRHYTHM FOCUS		\$1,603.42	\$1,564.02	\$1,564.02	\$1,564.02	102.52%	\$1,485.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33262	RMVL& REPLC PULSE GEN 1 LEAD		\$322.59	\$366.59	\$366.59	\$366.59	88.00%	\$322.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33263	RMVL & RPLCMT DFB GEN 2 LEAD		\$335.19	\$380.73	\$380.73	\$380.73	88.04%	\$335.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33264	RMVL & RPLCMT DFB GEN MLT LD		\$347.79	\$396.97	\$396.97	\$396.97	87.61%	\$347.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33268	EXCL LAA OPN OTH PX ANY METH		\$111.12	\$124.66	\$124.66	\$124.66	89.14%	\$111.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33269	EXCL LAA THRSCP ANY METHOD		\$709.02	\$811.38	\$811.38	\$811.38	87.38%	\$709.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33270	INS/REP SUBQ DEFIBRILLATOR		\$568.07	\$549.23	\$549.23	\$549.23	103.43%	\$521.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33272	RMVL OF SUBQ DEFIBRILLATOR		\$346.50	\$342.18	\$342.18	\$342.18	101.26%	\$325.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33285	INSJ SUBQ CAR RHYTHM MNTR		\$112.53	\$4,353.41	\$85.16	\$132.08	85.20%	\$112.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33286	RMVL SUBQ CAR RHYTHM MNTR		\$86.30	\$130.85	\$83.53	\$83.65	103.16%	\$79.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33289	TCAT IMPL WRLS P-ART PRS SNR		\$261.60	\$324.01	\$324.01	\$324.01	80.74%	\$261.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33300	REPAIR OF HEART WOUND		\$1,903.73	\$2,367.58	\$2,367.58	\$2,367.58	80.41%	\$1,903.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33315	EXPLORATORY HEART SURGERY		\$1,500.00	\$1,861.22	\$1,861.22	\$1,861.22	80.59%	\$1,500.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33361	REPLACE AORTIC VALVE PERQ		\$1,172.03	\$1,168.45	\$1,168.45	\$1,168.45	100.31%	\$1,110.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33370	TCAT PLMT&RMVL CEPD PERQ		\$113.58	\$128.67	\$128.67	\$128.67	88.27%	\$113.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33390	VALVULOPLASTY AORTIC VALVE		\$1,508.80	\$1,865.31	\$1,865.31	\$1,865.31	80.89%	\$1,508.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33405	REPLACEMENT AORTIC VALVE OPN		\$1,892.04	\$2,203.53	\$2,203.53	\$2,203.53	85.86%	\$1,892.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33411	REPLACEMENT OF AORTIC VALVE		\$2,618.76	\$3,244.55	\$3,244.55	\$3,244.55	80.71%	\$2,618.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33412	REPLACEMENT OF AORTIC VALVE		\$2,452.80	\$3,031.44	\$3,031.44	\$3,031.44	80.91%	\$2,452.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33413	REPLACEMENT OF AORTIC VALVE		\$2,514.40	\$3,109.18	\$3,109.18	\$3,109.18	80.87%	\$2,514.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33414	REPAIR OF AORTIC VALVE		\$1,679.20	\$2,083.22	\$2,083.22	\$2,083.22	80.61%	\$1,679.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33415	REVISION SUBVALVULAR TISSUE		\$1,586.00	\$1,967.53	\$1,967.53	\$1,967.53	80.61%	\$1,586.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33416	REVISE VENTRICLE MUSCLE		\$1,586.08	\$1,966.74	\$1,966.74	\$1,966.74	80.65%	\$1,586.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33418	REPAIR TCAT MITRAL VALVE		\$1,524.77	\$1,748.00	\$1,748.00	\$1,748.00	87.23%	\$1,524.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33419	REPAIR TCAT MITRAL VALVE		\$412.25	\$408.45	\$408.45	\$408.45	100.93%	\$388.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33425	REPAIR OF MITRAL VALVE		\$2,134.80	\$2,647.16	\$2,647.16	\$2,647.16	80.64%	\$2,134.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33426	REPAIR OF MITRAL VALVE		\$1,864.69	\$2,313.28	\$2,313.28	\$2,313.28	80.61%	\$1,864.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33427	REPAIR OF MITRAL VALVE		\$1,907.60	\$2,365.96	\$2,365.96	\$2,365.96	80.63%	\$1,907.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33430	REPLACEMENT OF MITRAL VALVE		\$2,193.15	\$2,719.14	\$2,719.14	\$2,719.14	80.66%	\$2,193.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33440	RPLCMT A-VALVE TLCJ AUTOL PV		\$3,072.32	\$3,277.21	\$3,277.21	\$3,277.21	93.75%	\$3,072.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33460	REVISION OF TRICUSPID VALVE		\$1,872.00	\$2,314.61	\$2,314.61	\$2,314.61	80.88%	\$1,872.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33463	VALVULOPLASTY TRICUSPID		\$2,404.80	\$2,980.39	\$2,980.39	\$2,980.39	80.69%	\$2,404.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33464	VALVULOPLASTY TRICUSPID		\$1,907.20	\$2,365.53	\$2,365.53	\$2,365.53	80.62%	\$1,907.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33465	REPLACE TRICUSPID VALVE		\$2,152.59	\$2,668.48	\$2,668.48	\$2,668.48	80.67%	\$2,152.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33468	REVISION OF TRICUSPID VALVE		\$1,915.20	\$2,374.39	\$2,374.39	\$2,374.39	80.66%	\$1,915.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33475	REPLACEMENT PULMONARY VALVE		\$1,818.72	\$2,253.27	\$2,253.27	\$2,253.27	80.71%	\$1,818.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33477	IMPLANT TCAT PULM VLV PERQ		\$1,230.82	\$1,274.91	\$1,274.91	\$1,274.91	96.54%	\$1,211.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33478	REVISION OF HEART CHAMBER		\$1,450.73	\$1,539.32	\$1,539.32	\$1,539.32	94.24%	\$1,450.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33500	REPAIR HEART VESSEL FISTULA		\$1,224.80	\$1,515.90	\$1,515.90	\$1,515.90	80.80%	\$1,224.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33506	REPAIR ARTERY TRANSLOCATION		\$1,603.20	\$1,988.11	\$1,988.11	\$1,988.11	80.64%	\$1,603.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33507	REPAIR ART INTRAMURAL		\$1,382.38	\$1,670.31	\$1,670.31	\$1,670.31	82.76%	\$1,382.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33508	ENDOSCOPIC VEIN HARVEST		\$12.98	\$15.48	\$15.48	\$15.48	83.83%	\$12.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33510	CABG VEIN SINGLE		\$1,515.50	\$1,878.60	\$1,878.60	\$1,878.60	80.67%	\$1,515.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33512	CABG VEIN THREE		\$1,896.00	\$2,348.53	\$2,348.53	\$2,348.53	80.73%	\$1,896.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33513	CABG VEIN FOUR		\$2,137.90	\$2,396.85	\$2,396.85	\$2,396.85	89.20%	\$2,137.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33517	CABG ARTERY-VEIN SINGLE		\$181.31	\$180.13	\$180.13	\$180.13	100.65%	\$171.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33518	CABG ARTERY-VEIN TWO		\$405.06	\$394.52	\$394.52	\$394.52	102.67%	\$374.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33519	CABG ARTERY-VEIN THREE		\$527.68	\$522.03	\$522.03	\$522.03	101.08%	\$495.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33521	CABG ARTERY-VEIN FOUR		\$633.00	\$625.61	\$625.61	\$625.61	101.18%	\$594.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33530	CORONARY ARTERY BYPASS/REOP		\$407.54	\$503.69	\$503.69	\$503.69	80.91%	\$407.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33533	CABG ARTERIAL SINGLE		\$1,546.91	\$1,819.51	\$1,819.51	\$1,819.51	85.02%	\$1,546.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33534	CABG ARTERIAL TWO		\$1,951.58	\$2,135.76	\$2,135.76	\$2,135.76	91.38%	\$1,951.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33535	CABG ARTERIAL THREE		\$2,183.31	\$2,372.09	\$2,372.09	\$2,372.09	92.04%	\$2,183.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33536	CABG ARTERIAL FOUR OR MORE		\$2,333.75	\$2,555.42	\$2,555.42	\$2,555.42	91.33%	\$2,333.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33545	REPAIR OF HEART DAMAGE		\$2,392.80	\$2,958.51	\$2,958.51	\$2,958.51	80.88%	\$2,392.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33600	CLOSURE OF VALVE		\$1,564.10	\$1,679.43	\$1,679.43	\$1,679.43	93.13%	\$1,564.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33606	ANASTOMOSIS/ARTERY-AORTA		\$1,617.55	\$1,735.08	\$1,735.08	\$1,735.08	93.23%	\$1,617.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33608	REPAIR ANOMALY W/CONDUIT		\$1,658.40	\$1,757.37	\$1,757.37	\$1,757.37	94.37%	\$1,658.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33610	REPAIR BY ENLARGEMENT		\$1,617.55	\$1,733.40	\$1,733.40	\$1,733.40	93.32%	\$1,617.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33611	REPAIR DOUBLE VENTRICLE		\$1,725.60	\$1,892.49	\$1,892.49	\$1,892.49	91.18%	\$1,725.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33612	REPAIR DOUBLE VENTRICLE		\$1,771.78	\$1,943.01	\$1,943.01	\$1,943.01	91.19%	\$1,771.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33617	REPAIR SINGLE VENTRICLE		\$1,779.41	\$2,104.57	\$2,104.57	\$2,104.57	84.55%	\$1,779.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33619	REPAIR SINGLE VENTRICLE		\$2,156.00	\$2,675.97	\$2,675.97	\$2,675.97	80.57%	\$2,156.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33620	APPLY R&L PULM ART BANDS		\$1,457.21	\$1,600.58	\$1,600.58	\$1,600.58	91.04%	\$1,457.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33641	REPAIR HEART SEPTUM DEFECT		\$1,374.35	\$1,593.55	\$1,593.55	\$1,593.55	86.24%	\$1,374.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33645	REVISION OF HEART VEINS		\$1,356.00	\$1,682.53	\$1,682.53	\$1,682.53	80.59%	\$1,356.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33647	REPAIR HEART SEPTUM DEFECTS		\$1,688.95	\$1,763.75	\$1,763.75	\$1,763.75	95.76%	\$1,675.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33660	REPAIR OF HEART DEFECTS		\$1,450.73	\$1,705.64	\$1,705.64	\$1,705.64	85.05%	\$1,450.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33665	REPAIR OF HEART DEFECTS		\$1,679.77	\$1,856.64	\$1,856.64	\$1,856.64	90.47%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33670	REPAIR OF HEART CHAMBERS		\$1,679.77	\$1,907.02	\$1,907.02	\$1,907.02	88.08%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33675	CLOSE MULT VSD		\$1,658.40	\$1,912.20	\$1,912.20	\$1,912.20	86.73%	\$1,658.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33681	REPAIR HEART SEPTUM DEFECT		\$1,450.87	\$1,801.77	\$1,801.77	\$1,801.77	80.52%	\$1,450.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33690	REINFORCE PULMONARY ARTERY		\$950.40	\$1,181.61	\$1,181.61	\$1,181.61	80.43%	\$950.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33692	REPAIR OF HEART DEFECTS		\$1,679.77	\$1,892.59	\$1,892.59	\$1,892.59	88.76%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33694	REPAIR OF HEART DEFECTS		\$1,679.77	\$1,892.49	\$1,892.49	\$1,892.49	88.76%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33697	REPAIR OF HEART DEFECTS		\$1,779.41	\$1,992.91	\$1,992.91	\$1,992.91	89.29%	\$1,779.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33724	REPAIR VENOUS ANOMALY		\$1,205.20	\$1,495.57	\$1,495.57	\$1,495.57	80.58%	\$1,205.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33730	REPAIR HEART-VEIN DEFECT(S)		\$1,572.80	\$1,951.84	\$1,951.84	\$1,951.84	80.58%	\$1,572.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33732	REPAIR HEART-VEIN DEFECT		\$1,496.52	\$1,611.80	\$1,611.80	\$1,611.80	92.85%	\$1,496.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33736	REVISION OF HEART CHAMBER		\$1,110.06	\$1,379.66	\$1,379.66	\$1,379.66	80.46%	\$1,110.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33741	TAS CONGENITAL CAR ANOMAL		\$732.13	\$725.52	\$725.52	\$725.52	100.91%	\$689.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33745	TIS CGEN CAR ANOMAL 1ST SHNT		\$1,045.63	\$1,036.69	\$1,036.69	\$1,036.69	100.86%	\$984.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33750	MAJOR VESSEL SHUNT		\$1,068.94	\$1,232.84	\$1,232.84	\$1,232.84	86.71%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33764	MAJOR VESSEL SHUNT & GRAFT		\$1,145.31	\$1,293.56	\$1,293.56	\$1,293.56	88.54%	\$1,145.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33767	MAJOR VESSEL SHUNT		\$1,294.20	\$1,386.91	\$1,386.91	\$1,386.91	93.32%	\$1,294.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33768	CAVOPULMONARY SHUNTING		\$342.05	\$400.05	\$400.05	\$400.05	85.50%	\$342.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33771	REPAIR GREAT VESSELS DEFECT		\$1,833.62	\$2,103.46	\$2,103.46	\$2,103.46	87.17%	\$1,833.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33774	REPAIR GREAT VESSELS DEFECT		\$1,450.73	\$1,758.24	\$1,758.24	\$1,758.24	82.51%	\$1,450.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33780	REPAIR GREAT VESSELS DEFECT		\$1,847.60	\$2,290.39	\$2,290.39	\$2,290.39	80.67%	\$1,847.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33800	AORTIC SUSPENSION		\$838.74	\$964.10	\$964.10	\$964.10	87.00%	\$838.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33802	REPAIR VESSEL DEFECT		\$916.23	\$1,068.40	\$1,068.40	\$1,068.40	85.76%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33803	REPAIR VESSEL DEFECT		\$1,068.94	\$1,124.00	\$1,124.00	\$1,124.00	95.10%	\$1,067.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33820	REVISE MAJOR VESSEL		\$763.33	\$948.59	\$948.59	\$948.59	80.47%	\$763.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33822	REVISE MAJOR VESSEL		\$804.27	\$999.51	\$999.51	\$999.51	80.47%	\$804.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33840	REMOVE AORTA CONSTRICTION		\$1,068.94	\$1,215.91	\$1,215.91	\$1,215.91	87.91%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33851	REMOVE AORTA CONSTRICTION		\$1,221.65	\$1,248.38	\$1,248.38	\$1,248.38	97.86%	\$1,185.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33853	REPAIR SEPTAL DEFECT		\$1,671.76	\$1,789.22	\$1,789.22	\$1,789.22	93.44%	\$1,671.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33858	AS-AORT GRF F/AORTIC DSJ		\$3,309.23	\$3,276.50	\$3,276.50	\$3,276.50	101.00%	\$3,112.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33859	AS-AORT GRF F/DS OTH/THN DSJ		\$2,378.74	\$2,357.00	\$2,357.00	\$2,357.00	100.92%	\$2,239.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33863	ASCENDING AORTIC GRAFT		\$2,452.42	\$3,037.16	\$3,037.16	\$3,037.16	80.75%	\$2,452.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33864	ASCENDING AORTIC GRAFT		\$2,506.40	\$3,100.84	\$3,100.84	\$3,100.84	80.83%	\$2,506.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33866	AORTIC HEMIARCH GRAFT		\$715.60	\$883.63	\$883.63	\$883.63	80.98%	\$715.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33871	TRANSVRS A-ARCH GRF HYPHTRM		\$3,173.40	\$3,143.46	\$3,143.46	\$3,143.46	100.95%	\$2,986.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33875	THORACIC AORTIC GRAFT		\$2,140.00	\$2,654.94	\$2,654.94	\$2,654.94	80.60%	\$2,140.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33877	THORACOABDOMINAL GRAFT		\$2,801.00	\$3,472.65	\$3,472.65	\$3,472.65	80.66%	\$2,801.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33880	ENDOVASC TAA REPR INCL SUBCL		\$1,434.31	\$1,717.26	\$1,717.26	\$1,717.26	83.52%	\$1,434.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33881	ENDOVASC TAA REPR W/O SUBCL		\$1,232.71	\$1,475.37	\$1,475.37	\$1,475.37	83.55%	\$1,232.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33883	INSERT ENDOVASC PROSTH TAA		\$910.13	\$1,072.40	\$1,072.40	\$1,072.40	84.87%	\$910.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33884	ENDOVASC PROSTH TAA ADD-ON		\$337.49	\$376.17	\$376.17	\$376.17	89.72%	\$337.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33886	ENDOVASC PROSTH DELAYED		\$786.06	\$925.88	\$925.88	\$925.88	84.90%	\$786.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33889	ARTERY TRANSPOSE/ENDOVAS TAA		\$672.29	\$760.49	\$760.49	\$760.49	88.40%	\$672.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33916	SURGERY OF GREAT VESSEL		\$3,254.40	\$4,025.58	\$4,025.58	\$4,025.58	80.84%	\$3,254.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33917	REPAIR PULMONARY ARTERY		\$1,294.20	\$1,428.62	\$1,428.62	\$1,428.62	90.59%	\$1,294.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33920	REPAIR PULMONARY ATRESIA		\$1,698.47	\$1,758.70	\$1,758.70	\$1,758.70	96.58%	\$1,670.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33922	TRANSECT PULMONARY ARTERY		\$1,240.35	\$1,360.96	\$1,360.96	\$1,360.96	91.14%	\$1,240.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33924	REMOVE PULMONARY SHUNT		\$277.06	\$273.95	\$273.95	\$273.95	101.13%	\$260.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33945	TRANSPLANTATION OF HEART		\$3,802.24	\$4,706.97	\$4,706.97	\$4,706.97	80.78%	\$3,802.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33946	ECMO/ECLS INITIATION VENOUS		\$281.75	\$299.23	\$299.23	\$299.23	94.16%	\$281.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33947	ECMO/ECLS INITIATION ARTERY		\$312.29	\$331.16	\$331.16	\$331.16	94.30%	\$312.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33948	ECMO/ECLS DAILY MGMT-VENOUS		\$214.54	\$231.21	\$231.21	\$231.21	92.79%	\$214.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33949	ECMO/ECLS DAILY MGMT ARTERY		\$209.20	\$225.72	\$225.72	\$225.72	92.68%	\$209.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33951	ECMO/ECLS INSJ PRPH CANNULA		\$344.35	\$405.21	\$405.21	\$405.21	84.98%	\$344.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33952	ECMO/ECLS INSJ PRPH CANNULA		\$333.03	\$412.10	\$412.10	\$412.10	80.81%	\$333.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	33953	ECMO/ECLS INSJ PRPH CANNULA		\$383.31	\$452.52	\$452.52	\$452.52	84.71%	\$383.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33954	ECMO/ECLS INSJ PRPH CANNULA		\$369.80	\$457.95	\$457.95	\$457.95	80.75%	\$369.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33955	ECMO/ECLS INSJ CTR CANNULA		\$797.88	\$792.24	\$792.24	\$792.24	100.71%	\$752.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33956	ECMO/ECLS INSJ CTR CANNULA		\$754.75	\$804.28	\$804.28	\$804.28	93.84%	\$754.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33958	ECMO/ECLS REPOS PERPH CNULA		\$179.00	\$176.60	\$176.60	\$176.60	101.36%	\$167.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33959	ECMO/ECLS REPOS PERPH CNULA		\$227.00	\$224.81	\$224.81	\$224.81	100.97%	\$213.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33963	ECMO/ECLS REPOS PERPH CNULA		\$453.00	\$447.22	\$447.22	\$447.22	101.29%	\$424.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33965	ECMO/ECLS RMVL PERPH CANNULA		\$179.00	\$176.60	\$176.60	\$176.60	101.36%	\$167.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33966	ECMO/ECLS RMVL PRPH CANNULA		\$230.00	\$228.69	\$228.69	\$228.69	100.57%	\$217.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33967	INSERT I-AORT PERCUT DEVICE		\$216.84	\$249.74	\$249.74	\$249.74	86.83%	\$216.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33968	REMOVE AORTIC ASSIST DEVICE		\$33.05	\$32.69	\$32.69	\$32.69	101.10%	\$31.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33969	ECMO/ECLS RMVL PERPH CANNULA		\$264.44	\$261.04	\$261.04	\$261.04	101.30%	\$247.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33975	IMPLANT VENTRICULAR DEVICE		\$1,078.50	\$1,254.84	\$1,254.84	\$1,254.84	85.95%	\$1,078.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33977	REMOVE VENTRICULAR DEVICE		\$943.35	\$1,085.94	\$1,085.94	\$1,085.94	86.87%	\$943.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33979	INSERT INTRACORPOREAL DEVICE		\$1,509.60	\$1,869.16	\$1,869.16	\$1,869.16	80.76%	\$1,509.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33981	REPLACE VAD PUMP EXT		\$723.87	\$793.33	\$793.33	\$793.33	91.24%	\$723.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33984	ECMO/ECLS RMVL PRPH CANNULA		\$275.67	\$272.90	\$272.90	\$272.90	101.02%	\$259.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33985	ECMO/ECLS RMVL CTR CANNULA		\$498.01	\$491.00	\$491.00	\$491.00	101.43%	\$466.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33986	ECMO/ECLS RMVL CTR CANNULA		\$509.00	\$503.96	\$503.96	\$503.96	101.00%	\$478.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33988	INSERTION OF LEFT HEART VENT		\$659.69	\$742.89	\$742.89	\$742.89	88.80%	\$659.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33990	INSJ PERQ VAD L HRT ARTERIAL		\$351.79	\$348.10	\$348.10	\$348.10	101.06%	\$330.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33991	INSJ PERQ VAD L HRT ARTL&VEN		\$442.00	\$435.50	\$435.50	\$435.50	101.49%	\$413.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33992	RMVL PERQ LEFT HEART VAD		\$181.34	\$181.37	\$181.37	\$181.37	99.98%	\$172.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33993	REPOSG PERQ R/L HRT VAD		\$159.20	\$160.74	\$160.74	\$160.74	99.04%	\$152.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33995	INSJ PERQ VAD R HRT VENOUS		\$348.44	\$342.67	\$342.67	\$342.67	101.68%	\$325.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	33997	RMVL PERQ RIGHT HEART VAD		\$154.15	\$155.68	\$155.68	\$155.68	99.01%	\$147.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34001	REMOVAL OF ARTERY CLOT		\$708.80	\$880.25	\$880.25	\$880.25	80.52%	\$708.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34101	REMOVAL OF ARTERY CLOT		\$534.47	\$576.65	\$576.65	\$576.65	92.69%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34111	REMOVAL OF ARM ARTERY CLOT		\$468.16	\$575.94	\$575.94	\$575.94	81.29%	\$468.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34151	REMOVAL OF ARTERY CLOT		\$1,082.40	\$1,340.13	\$1,340.13	\$1,340.13	80.77%	\$1,082.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	34201	REMOVAL OF ARTERY CLOT		\$793.05	\$983.58	\$983.58	\$983.58	80.63%	\$793.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34203	REMOVAL OF LEG ARTERY CLOT		\$736.80	\$914.78	\$914.78	\$914.78	80.54%	\$736.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34421	REMOVAL OF VEIN CLOT		\$539.20	\$670.68	\$670.68	\$670.68	80.40%	\$539.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34490	REMOVAL OF VEIN CLOT		\$534.47	\$556.35	\$556.35	\$556.35	96.07%	\$528.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34502	RECONSTRUCT VENA CAVA		\$1,417.12	\$1,506.64	\$1,506.64	\$1,506.64	94.06%	\$1,417.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34703	EVASC RPR A-UNILAC NDGFT		\$1,066.49	\$1,317.83	\$1,317.83	\$1,317.83	80.93%	\$1,066.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34704	EVASC RPR A-UNILAC NDGFT RPT		\$1,772.40	\$2,194.23	\$2,194.23	\$2,194.23	80.78%	\$1,772.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34705	EVAC RPR A-BILIAC NDGFT		\$1,182.93	\$1,465.06	\$1,465.06	\$1,465.06	80.74%	\$1,182.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34706	EVASC RPR A-BILIAC RPT		\$1,759.20	\$2,180.03	\$2,180.03	\$2,180.03	80.70%	\$1,759.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34707	EVASC RPR ILIO-ILIAC NDGFT		\$905.60	\$1,114.88	\$1,114.88	\$1,114.88	81.23%	\$905.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34709	PLMT XTN PROSTH EVASC RPR		\$248.80	\$307.59	\$307.59	\$307.59	80.89%	\$248.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34710	DLYD PLMT XTN PROSTH 1ST VSL		\$617.60	\$766.93	\$766.93	\$766.93	80.53%	\$617.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34713	PERQ ACCESS & CLSR FEM ART		\$95.09	\$117.58	\$117.58	\$117.58	80.87%	\$95.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34714	OPN FEM ART EXPOS CNDT CRTJ		\$208.80	\$258.44	\$258.44	\$258.44	80.79%	\$208.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34715	OPN AX/SUBCLA ART EXPOS		\$230.80	\$285.10	\$285.10	\$285.10	80.95%	\$230.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34716	OPN AX/SUBCLA ART EXPOS CNDT		\$288.64	\$357.30	\$357.30	\$357.30	80.78%	\$288.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34717	EVASC RPR A-ILIAC NDGFT		\$426.56	\$422.49	\$422.49	\$422.49	100.96%	\$401.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34808	ENDOVAS ILIAC A DEVICE ADDON		\$194.31	\$193.24	\$193.24	\$193.24	100.56%	\$183.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34812	OPN FEM ART EXPOS		\$198.45	\$196.73	\$196.73	\$196.73	100.88%	\$186.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	34831	OPEN AORTOILIAC PROSTH REPR		\$1,720.63	\$1,849.76	\$1,849.76	\$1,849.76	93.02%	\$1,720.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35045	REPAIR DEFECT OF ARM ARTERY		\$947.51	\$938.77	\$938.77	\$938.77	100.93%	\$891.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35102	REPAIR DEFECT OF ARTERY		\$1,452.40	\$1,807.97	\$1,807.97	\$1,807.97	80.33%	\$1,452.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35103	REPAIR ARTERY RUPTURE AORTA		\$1,718.67	\$2,125.76	\$2,125.76	\$2,125.76	80.85%	\$1,718.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35141	REPAIR DEFECT OF ARTERY		\$848.80	\$1,051.29	\$1,051.29	\$1,051.29	80.74%	\$848.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35184	REPAIR BLOOD VESSEL LESION		\$748.00	\$928.64	\$928.64	\$928.64	80.55%	\$748.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35201	REPAIR BLOOD VESSEL LESION		\$733.14	\$909.17	\$909.17	\$909.17	80.64%	\$733.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35206	REPAIR BLOOD VESSEL LESION		\$687.18	\$774.55	\$774.55	\$774.55	88.72%	\$687.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35207	REPAIR BLOOD VESSEL LESION		\$687.18	\$765.39	\$765.39	\$765.39	89.78%	\$687.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35211	REPAIR BLOOD VESSEL LESION		\$1,221.65	\$1,358.92	\$1,358.92	\$1,358.92	89.90%	\$1,221.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35216	REPAIR BLOOD VESSEL LESION		\$1,658.40	\$2,058.55	\$2,058.55	\$2,058.55	80.56%	\$1,658.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	35221	REPAIR BLOOD VESSEL LESION		\$1,158.46	\$1,436.18	\$1,436.18	\$1,436.18	80.66%	\$1,158.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35226	REPAIR BLOOD VESSEL LESION		\$687.18	\$802.61	\$802.61	\$802.61	85.62%	\$687.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35236	REPAIR BLOOD VESSEL LESION		\$878.07	\$972.96	\$972.96	\$972.96	90.25%	\$878.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35256	REPAIR BLOOD VESSEL LESION		\$878.07	\$977.45	\$977.45	\$977.45	89.83%	\$878.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35261	REPAIR BLOOD VESSEL LESION		\$760.00	\$945.38	\$945.38	\$945.38	80.39%	\$760.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35281	REPAIR BLOOD VESSEL LESION		\$1,265.60	\$1,567.06	\$1,567.06	\$1,567.06	80.76%	\$1,265.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35286	REPAIR BLOOD VESSEL LESION		\$724.80	\$895.69	\$895.69	\$895.69	80.92%	\$724.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35301	RECHANNELING OF ARTERY		\$916.23	\$1,088.27	\$1,088.27	\$1,088.27	84.19%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35302	RECHANNELING OF ARTERY		\$868.80	\$1,075.54	\$1,075.54	\$1,075.54	80.78%	\$868.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35303	RECHANNELING OF ARTERY		\$960.00	\$1,178.22	\$1,178.22	\$1,178.22	81.48%	\$960.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35304	RECHANNELING OF ARTERY		\$985.20	\$1,226.22	\$1,226.22	\$1,226.22	80.34%	\$985.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35305	RECHANNELING OF ARTERY		\$948.27	\$1,179.82	\$1,179.82	\$1,179.82	80.37%	\$948.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35331	RECHANNELING OF ARTERY		\$1,221.65	\$1,399.70	\$1,399.70	\$1,399.70	87.28%	\$1,221.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35351	RECHANNELING OF ARTERY		\$996.00	\$1,236.44	\$1,236.44	\$1,236.44	80.55%	\$996.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35355	RECHANNELING OF ARTERY		\$916.23	\$988.72	\$988.72	\$988.72	92.67%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35361	RECHANNELING OF ARTERY		\$1,221.65	\$1,461.21	\$1,461.21	\$1,461.21	83.61%	\$1,221.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35371	RECHANNELING OF ARTERY		\$763.53	\$785.24	\$785.24	\$785.24	97.24%	\$745.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35372	RECHANNELING OF ARTERY		\$916.23	\$940.04	\$940.04	\$940.04	97.47%	\$893.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35501	ART BYP GRFT IPSILAT CAROTID		\$1,183.49	\$1,399.22	\$1,399.22	\$1,399.22	84.58%	\$1,183.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35506	ART BYP GRFT SUBCLAV-CAROTID		\$1,183.49	\$1,222.09	\$1,222.09	\$1,222.09	96.84%	\$1,160.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35516	ART BYP GRFT SUBCLAV-AXILARY		\$1,183.49	\$1,171.12	\$1,171.12	\$1,171.12	101.06%	\$1,112.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35522	ART BYP GRFT AXILL-BRACHIAL		\$932.65	\$1,122.86	\$1,122.86	\$1,122.86	83.06%	\$932.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35523	ART BYP GRFT BRCHL-ULNR-RDL		\$983.60	\$1,182.26	\$1,182.26	\$1,182.26	83.20%	\$983.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35525	ART BYP GRFT BRACHIAL-BRCHL		\$878.67	\$1,090.13	\$1,090.13	\$1,090.13	80.60%	\$878.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35556	ART BYP GRFT FEM-POPLITEAL		\$1,221.65	\$1,338.76	\$1,338.76	\$1,338.76	91.25%	\$1,221.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35558	ART BYP GRFT FEM-FEMORAL		\$1,030.77	\$1,194.62	\$1,194.62	\$1,194.62	86.28%	\$1,030.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35566	ART BYP FEM-ANT-POST TIB/PRL		\$1,336.18	\$1,594.57	\$1,594.57	\$1,594.57	83.80%	\$1,336.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35571	ART BYP POP-TIBL-PRL-OTHER		\$1,025.33	\$1,271.63	\$1,271.63	\$1,271.63	80.63%	\$1,025.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35572	HARVEST FEMOROPOPLITEAL VEIN		\$290.15	\$328.10	\$328.10	\$328.10	88.43%	\$290.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35583	VEIN BYP GRFT FEM-POPLITEAL		\$1,118.00	\$1,384.93	\$1,384.93	\$1,384.93	80.73%	\$1,118.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	35585	VEIN BYP FEM-TIBIAL PERONEAL		\$1,292.16	\$1,602.83	\$1,602.83	\$1,602.83	80.62%	\$1,292.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35587	VEIN BYP POP-TIBL PERONEAL		\$1,058.40	\$1,280.38	\$1,280.38	\$1,280.38	82.66%	\$1,058.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35600	HARVEST ART FOR CABG ADD-ON		\$180.26	\$178.83	\$178.83	\$178.83	100.80%	\$169.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35606	ART BYP CAROTID-SUBCLAVIAN		\$910.40	\$1,131.99	\$1,131.99	\$1,131.99	80.43%	\$910.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35621	ART BYP AXILLARY-FEMORAL		\$916.23	\$1,054.54	\$1,054.54	\$1,054.54	86.88%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35626	ART BYP AORSUBCL/CAROT/INNOM		\$1,242.40	\$1,533.97	\$1,533.97	\$1,533.97	80.99%	\$1,242.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35637	ART BYP AORTOILIAC		\$1,349.56	\$1,590.34	\$1,590.34	\$1,590.34	84.86%	\$1,349.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35638	ART BYP AORTOBI-ILIAC		\$1,343.80	\$1,665.88	\$1,665.88	\$1,665.88	80.67%	\$1,343.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35646	ART BYP AORTOBIFEMORAL		\$1,321.00	\$1,637.52	\$1,637.52	\$1,637.52	80.67%	\$1,321.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35647	ART BYP AORTOFEMORAL		\$1,324.73	\$1,490.17	\$1,490.17	\$1,490.17	88.90%	\$1,324.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35654	ART BYP AXILL-FEM-FEMORAL		\$1,143.39	\$1,310.50	\$1,310.50	\$1,310.50	87.25%	\$1,143.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35656	ART BYP FEMORAL-POPLITEAL		\$954.40	\$1,031.75	\$1,031.75	\$1,031.75	92.50%	\$954.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35661	ART BYP FEMORAL-FEMORAL		\$842.13	\$1,043.09	\$1,043.09	\$1,043.09	80.73%	\$842.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35665	ART BYP ILIOFEMORAL		\$910.80	\$1,130.37	\$1,130.37	\$1,130.37	80.58%	\$910.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35666	ART BYP FEM-ANT-POST TIB/PRL		\$1,068.94	\$1,242.12	\$1,242.12	\$1,242.12	86.06%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35691	ART TRNSPOSJ VERTBRL CAROTID		\$917.08	\$911.08	\$911.08	\$911.08	100.66%	\$865.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35694	ART TRNSPOSJ SUBCLAV CAROTID		\$867.38	\$951.23	\$951.23	\$951.23	91.18%	\$867.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35700	REOPERATION BYPASS GRAFT		\$145.87	\$144.60	\$144.60	\$144.60	100.88%	\$137.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35701	EXPL N/FLWD SURGERY NECK ART		\$381.78	\$435.08	\$435.08	\$435.08	87.75%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35702	EXPL N/FLWD SURGERY UXTR ART		\$406.69	\$400.90	\$400.90	\$400.90	101.44%	\$380.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35703	EXPL N/FLWD SURGERY LXTR ART		\$409.18	\$404.33	\$404.33	\$404.33	101.20%	\$384.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35800	EXPLORE NECK VESSELS		\$588.27	\$730.65	\$730.65	\$730.65	80.51%	\$588.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35820	EXPLORE CHEST VESSELS		\$1,576.03	\$1,953.88	\$1,953.88	\$1,953.88	80.66%	\$1,576.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35840	EXPLORE ABDOMINAL VESSELS		\$965.03	\$1,199.87	\$1,199.87	\$1,199.87	80.43%	\$965.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35860	EXPLORE LIMB VESSELS		\$657.70	\$818.45	\$818.45	\$818.45	80.36%	\$657.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35875	REMOVAL OF CLOT IN GRAFT		\$497.07	\$572.85	\$572.85	\$572.85	86.77%	\$497.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35876	REMOVAL OF CLOT IN GRAFT		\$732.44	\$908.13	\$908.13	\$908.13	80.65%	\$732.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35883	REVISE GRAFT W/NONAUTO GRAFT		\$988.40	\$1,148.95	\$1,148.95	\$1,148.95	86.03%	\$988.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35884	REVISE GRAFT W/VEIN		\$1,049.49	\$1,188.91	\$1,188.91	\$1,188.91	88.27%	\$1,049.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35901	EXCISION GRAFT NECK		\$467.00	\$464.98	\$464.98	\$464.98	100.43%	\$441.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	35903	EXCISION GRAFT EXTREMITY		\$556.08	\$551.23	\$551.23	\$551.23	100.88%	\$523.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	35907	EXCISION GRAFT ABDOMEN		\$1,470.88	\$1,832.97	\$1,832.97	\$1,832.97	80.25%	\$1,470.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36002	PSEUDOANEURYSM INJECTION TRT		\$103.32	\$155.62	\$101.99	\$103.32	100.00%	\$98.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36005	INJECTION EXT VENOGRAPHY		\$43.33	\$259.56	\$46.10	\$51.80	83.65%	\$43.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36010	PLACE CATHETER IN VEIN		\$141.99	\$551.05	\$104.84	\$170.68	83.19%	\$141.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36011	PLACE CATHETER IN VEIN		\$187.91	\$815.80	\$150.87	\$224.46	83.72%	\$187.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36012	PLACE CATHETER IN VEIN		\$196.65	\$851.32	\$168.17	\$236.80	83.05%	\$196.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36013	PLACE CATHETER IN ARTERY		\$123.14	\$799.43	\$122.23	\$117.70	104.62%	\$111.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36014	PLACE CATHETER IN ARTERY		\$148.64	\$801.56	\$146.44	\$142.93	103.99%	\$135.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36015	PLACE CATHETER IN ARTERY		\$168.16	\$861.07	\$166.34	\$160.37	104.86%	\$152.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36140	INTRO NDL ICATH UPR/LXTR ART		\$106.54	\$523.59	\$85.79	\$103.27	103.16%	\$98.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36200	PLACE CATHETER IN AORTA		\$152.71	\$603.62	\$133.92	\$153.92	99.21%	\$146.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36215	PLACE CATHETER IN ARTERY		\$297.68	\$1,059.02	\$206.91	\$359.79	82.74%	\$297.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36216	PLACE CATHETER IN ARTERY		\$223.73	\$1,086.63	\$263.27	\$256.33	87.28%	\$223.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36217	PLACE CATHETER IN ARTERY		\$303.12	\$1,853.81	\$322.40	\$317.15	95.58%	\$301.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36218	PLACE CATHETER IN ARTERY		\$46.21	\$214.93	\$50.89	\$50.00	92.43%	\$46.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36221	PLACE CATH THORACIC AORTA		\$619.25	\$1,008.21	\$192.56	\$597.68	103.61%	\$567.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36222	PLACE CATH CAROTID/INOM ART		\$278.25	\$1,262.05	\$277.45	\$273.77	101.64%	\$260.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36223	PLACE CATH CAROTID/INOM ART		\$334.57	\$1,718.67	\$320.10	\$331.72	100.86%	\$315.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36224	PLACE CATH CAROTD ART		\$360.04	\$2,124.24	\$359.38	\$354.76	101.49%	\$337.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36225	PLACE CATH SUBCLAVIAN ART		\$362.53	\$1,631.46	\$317.37	\$361.57	100.26%	\$343.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36226	PLACE CATH VERTEBRAL ART		\$357.89	\$2,069.43	\$357.16	\$353.47	101.25%	\$335.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36227	PLACE CATH XTRNL CAROTID		\$117.71	\$247.31	\$117.62	\$117.41	100.26%	\$111.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36228	PLACE CATH INTRACRANIAL ART		\$240.92	\$1,333.24	\$242.08	\$241.71	99.67%	\$229.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36245	INS CATH ABD/L-EXT ART 1ST		\$189.58	\$1,266.18	\$227.95	\$227.80	83.22%	\$189.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36246	INS CATH ABD/L-EXT ART 2ND		\$243.95	\$846.23	\$243.34	\$246.47	98.98%	\$234.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36247	INS CATH ABD/L-EXT ART 3RD		\$295.35	\$1,446.96	\$287.80	\$355.22	83.15%	\$295.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36248	INS CATH ABD/L-EXT ART ADDL		\$54.77	\$117.81	\$46.66	\$52.75	103.84%	\$50.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36251	INS CATH REN ART 1ST UNILAT		\$250.71	\$1,311.45	\$246.93	\$241.00	104.03%	\$228.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36252	INS CATH REN ART 1ST BILAT		\$458.80	\$1,417.22	\$344.28	\$444.73	103.16%	\$422.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	36253	INS CATH REN ART 2ND+ UNILAT		\$347.63	\$2,051.20	\$343.13	\$333.45	104.25%	\$316.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36254	INS CATH REN ART 2ND+ BILAT		\$404.34	\$2,014.19	\$401.46	\$388.97	103.95%	\$369.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36400	BL DRAW < 3 YRS FEM/JUGULAR		\$17.67	\$27.95	\$18.48	\$21.85	80.88%	\$17.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36406	BL DRAW <3 YRS OTHER VEIN		\$14.47	\$18.23	\$8.77	\$18.18	79.58%	\$14.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36410	NON-ROUTINE BL DRAW 3/> YRS		\$13.58	\$18.16	\$9.04	\$17.06	79.60%	\$13.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36425	VEIN ACCESS CUTDOWN > 1 YR		\$38.94	\$39.04	\$39.04	\$39.04	99.73%	\$37.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36430	BLOOD TRANSFUSION SERVICE		\$33.17	\$44.29	\$44.29	\$44.29	74.89%	\$33.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36450	BL EXCHANGE/TRANSFUSE NB		\$136.80	\$169.26	\$169.26	\$169.26	80.82%	\$136.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36455	BL EXCHANGE/TRANSFUSE NON-NB		\$123.00	\$121.26	\$121.26	\$121.26	101.43%	\$115.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36460	TRANSFUSION SERVICE FETAL		\$339.77	\$340.57	\$340.57	\$340.57	99.76%	\$323.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36466	NJX NONCMPND SCLRSNT MLT VN		\$1,205.60	\$1,405.41	\$147.05	\$1,405.41	85.78%	\$1,205.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36470	NJX SCLRSNT 1 INCMPTNT VEIN		\$95.48	\$119.03	\$37.01	\$117.88	80.99%	\$95.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36471	NJX SCLRSNT MLT INCMPTNT VN		\$165.50	\$205.46	\$73.66	\$204.35	80.99%	\$165.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36475	ENDOVENOUS RF 1ST VEIN		\$1,120.78	\$1,094.90	\$269.08	\$1,078.59	103.91%	\$1,024.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36476	ENDOVENOUS RF VEIN ADD-ON		\$232.09	\$284.50	\$128.52	\$224.63	103.32%	\$213.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36478	ENDOVENOUS LASER 1ST VEIN		\$946.14	\$998.96	\$269.53	\$916.36	103.25%	\$870.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36479	ENDOVENOUS LASER VEIN ADDON		\$288.87	\$306.66	\$131.40	\$284.97	101.37%	\$270.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36481	INSERTION OF CATHETER VEIN		\$360.07	\$1,763.58	\$316.29	\$428.73	83.99%	\$360.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36482	ENDOVEN THER CHEM ADHES 1ST		\$1,288.32	\$1,716.34	\$173.71	\$1,551.63	83.03%	\$1,288.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36483	ENDOVEN THER CHEM ADHES SBSQ		\$105.90	\$137.81	\$85.23	\$131.28	80.67%	\$105.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36500	INSERTION OF CATHETER VEIN		\$142.40	\$176.53	\$176.53	\$176.53	80.67%	\$142.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36510	INSERTION OF CATHETER VEIN		\$43.31	\$88.20	\$52.80	\$54.03	80.16%	\$43.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36511	APHERESIS WBC		\$88.00	\$111.00	\$111.00	\$111.00	79.28%	\$88.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36512	APHERESIS RBC		\$85.83	\$105.46	\$105.46	\$105.46	81.38%	\$85.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36514	APHERESIS PLASMA		\$74.82	\$695.09	\$92.55	\$109.09	68.58%	\$74.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36522	PHOTOPHERESIS		\$97.00	\$1,395.39	\$95.32	\$93.75	103.47%	\$89.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36555	INSERT NON-TUNNEL CV CATH		\$84.20	\$192.20	\$82.83	\$81.86	102.86%	\$77.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36556	INSERT NON-TUNNEL CV CATH		\$83.92	\$218.23	\$82.93	\$81.93	102.43%	\$77.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36557	INSERT TUNNELED CV CATH		\$256.73	\$1,179.94	\$319.77	\$308.29	83.28%	\$256.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36558	INSERT TUNNELED CV CATH		\$220.05	\$840.07	\$255.75	\$262.84	83.72%	\$220.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	36560	INSERT TUNNELED CV CATH		\$307.20	\$1,256.23	\$381.34	\$369.09	83.23%	\$307.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36561	INSERT TUNNELED CV CATH		\$292.12	\$991.49	\$327.96	\$348.63	83.79%	\$292.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36563	INSERT TUNNELED CV CATH		\$291.20	\$1,114.30	\$357.53	\$340.76	85.46%	\$291.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36568	INSJ PICC <5 YR W/O IMAGING		\$75.20	\$89.60	\$89.60	\$89.60	83.93%	\$75.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36569	INSJ PICC 5 YR+ W/O IMAGING		\$74.18	\$92.77	\$92.77	\$92.77	79.96%	\$74.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36570	INSERT PICVAD CATH		\$266.40	\$1,484.11	\$331.61	\$319.27	83.44%	\$266.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36571	INSERT PICVAD CATH		\$249.80	\$1,278.51	\$310.03	\$298.29	83.74%	\$249.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36572	INSJ PICC RS&I <5 YR		\$80.02	\$381.81	\$78.97	\$76.88	104.08%	\$73.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36573	INSJ PICC RS&I 5 YR+		\$87.15	\$390.86	\$81.70	\$84.51	103.13%	\$80.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36575	REPAIR TUNNELED CV CATH		\$37.85	\$148.49	\$32.82	\$36.71	103.11%	\$34.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36576	REPAIR TUNNELED CV CATH		\$152.71	\$349.46	\$181.56	\$178.18	85.71%	\$152.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36578	REPLACE TUNNELED CV CATH		\$174.09	\$436.67	\$201.82	\$196.25	88.71%	\$174.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36580	REPLACE CVAD CATH		\$52.11	\$192.35	\$63.71	\$62.64	83.19%	\$52.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36581	REPLACE TUNNELED CV CATH		\$252.21	\$790.83	\$180.58	\$301.73	83.59%	\$252.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36582	REPLACE TUNNELED CV CATH		\$322.69	\$887.59	\$283.29	\$385.34	83.74%	\$322.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36584	COMPL RPLCMT PICC RS&I		\$55.23	\$332.74	\$57.24	\$66.15	83.49%	\$55.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36589	REMOVAL TUNNELED CV CATH		\$113.42	\$166.13	\$135.29	\$139.34	81.40%	\$113.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36590	REMOVAL TUNNELED CV CATH		\$157.45	\$224.04	\$188.28	\$193.41	81.41%	\$157.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36591	DRAW BLOOD OFF VENOUS DEVICE		\$22.70	\$29.02	\$29.02	\$29.02	78.23%	\$22.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36592	COLLECT BLOOD FROM PICC		\$24.69	\$31.47	\$31.47	\$31.47	78.45%	\$24.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36593	DECLOT VASCULAR DEVICE		\$28.04	\$36.30	\$36.30	\$36.30	77.24%	\$28.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36595	MECH REMOV TUNNELED CV CATH		\$148.50	\$604.17	\$176.89	\$173.08	85.80%	\$148.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36596	MECH REMOV TUNNELED CV CATH		\$36.28	\$118.63	\$44.67	\$43.86	82.72%	\$36.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36597	REPOSITION VENOUS CATHETER		\$48.32	\$112.38	\$58.75	\$58.56	82.52%	\$48.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36598	INJ W/FLUOR EVAL CV DEVICE		\$35.64	\$122.80	\$34.82	\$34.34	103.80%	\$32.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36600	WITHDRAWAL OF ARTERIAL BLOOD		\$12.00	\$28.11	\$14.79	\$14.79	81.16%	\$12.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36620	INSERTION CATHETER ARTERY		\$44.23	\$43.39	\$43.39	\$43.39	101.93%	\$41.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36625	INSERTION CATHETER ARTERY		\$83.60	\$103.02	\$103.02	\$103.02	81.15%	\$83.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36660	INSERTION CATHETER ARTERY		\$67.96	\$67.60	\$67.60	\$67.60	100.53%	\$64.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36680	INSERT NEEDLE BONE CAVITY		\$59.95	\$58.59	\$58.59	\$58.59	102.32%	\$55.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	36800	INSERTION OF CANNULA		\$114.54	\$118.96	\$118.96	\$118.96	96.28%	\$113.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36818	AV FUSE UPPR ARM CEPHALIC		\$586.40	\$668.64	\$668.64	\$668.64	87.70%	\$586.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36819	AV FUSE UPPR ARM BASILIC		\$630.68	\$707.05	\$707.05	\$707.05	89.20%	\$630.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36820	AV FUSION/FOREARM VEIN		\$669.23	\$704.13	\$704.13	\$704.13	95.04%	\$668.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36821	AV FUSION DIRECT ANY SITE		\$516.89	\$639.79	\$639.79	\$639.79	80.79%	\$516.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36825	ARTERY-VEIN AUTOGRAFT		\$620.67	\$769.62	\$769.62	\$769.62	80.65%	\$620.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36830	ARTERY-VEIN NONAUTOGRAFT		\$520.84	\$645.95	\$645.95	\$645.95	80.63%	\$520.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36832	AV FISTULA REVISION OPEN		\$591.25	\$733.85	\$733.85	\$733.85	80.57%	\$591.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36833	AV FISTULA REVISION		\$631.20	\$782.27	\$782.27	\$782.27	80.69%	\$631.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36901	INTRO CATH DIALYSIS CIRCUIT		\$212.90	\$719.86	\$162.88	\$256.97	82.85%	\$212.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36902	INTRO CATH DIALYSIS CIRCUIT		\$523.23	\$1,232.74	\$232.36	\$630.36	83.00%	\$523.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36903	INTRO CATH DIALYSIS CIRCUIT		\$625.51	\$4,346.97	\$304.80	\$743.43	84.14%	\$625.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36904	THRMBC/NFS DIALYSIS CIRCUIT		\$361.09	\$1,843.69	\$356.09	\$347.01	104.06%	\$329.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36905	THRMBC/NFS DIALYSIS CIRCUIT		\$1,097.04	\$2,320.40	\$428.31	\$1,316.02	83.36%	\$1,097.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36906	THRMBC/NFS DIALYSIS CIRCUIT		\$1,105.87	\$5,527.68	\$493.90	\$1,319.40	83.82%	\$1,105.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36907	BALO ANGIOP CTR DIALYSIS SEG		\$188.95	\$599.57	\$141.09	\$227.11	83.20%	\$188.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	36908	STENT PLMT CTR DIALYSIS SEG		\$161.60	\$1,443.99	\$199.65	\$193.31	83.59%	\$161.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37182	INSERT HEPATIC SHUNT (TIPS)		\$720.41	\$789.61	\$789.61	\$789.61	91.24%	\$720.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37183	REMOVE HEPATIC SHUNT (TIPS)		\$335.96	\$5,947.84	\$362.70	\$350.07	95.97%	\$332.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37184	PRIM ART M-THRMBC 1ST VSL		\$420.09	\$1,736.94	\$415.49	\$404.03	103.98%	\$383.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37185	PRIM ART M-THRMBC SBSQ VSL		\$158.44	\$479.32	\$156.49	\$153.63	103.13%	\$145.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37186	SEC ART THROMBECTOMY ADD-ON		\$405.67	\$1,205.88	\$233.90	\$389.83	104.06%	\$370.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37187	VENOUS MECH THROMBECTOMY		\$394.74	\$1,719.81	\$380.13	\$376.44	104.86%	\$357.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37188	VEN MECHNL THRMBC REPEAT TX		\$274.93	\$1,475.98	\$271.60	\$260.04	105.73%	\$247.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37191	INS ENDOVAS VENA CAVA FILTR		\$217.57	\$2,063.64	\$213.61	\$206.78	105.22%	\$196.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37193	REM ENDOVAS VENA CAVA FILTER		\$414.79	\$1,523.67	\$335.06	\$398.12	104.19%	\$378.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37197	REMOVE INTRVAS FOREIGN BODY		\$293.50	\$1,593.63	\$290.41	\$283.22	103.63%	\$269.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37200	TRANSCATHETER BIOPSY		\$177.14	\$208.02	\$208.02	\$208.02	85.15%	\$177.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37211	THROMBOLYTIC ART THERAPY		\$353.53	\$372.72	\$372.72	\$372.72	94.85%	\$353.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37212	THROMBOLYTIC VENOUS THERAPY		\$311.91	\$325.48	\$325.48	\$325.48	95.83%	\$309.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	37213	THROMBLYTIC ART/VEN THERAPY		\$218.00	\$222.34	\$222.34	\$222.34	98.05%	\$211.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37214	CESSJ THERAPY CATH REMOVAL		\$119.19	\$117.32	\$117.32	\$117.32	101.60%	\$111.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37215	TRANSCATH STENT CCA W/EPS		\$881.87	\$956.86	\$956.86	\$956.86	92.16%	\$881.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37217	STENT PLACEMT RETRO CAROTID		\$1,006.33	\$1,038.94	\$1,038.94	\$1,038.94	96.86%	\$986.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37220	ILIAC REVASC		\$507.05	\$2,556.64	\$383.08	\$487.15	104.08%	\$462.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37221	ILIAC REVASC W/STENT		\$767.97	\$3,137.80	\$471.41	\$736.03	104.34%	\$699.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37222	ILIAC REVASC ADD-ON		\$312.29	\$625.56	\$176.90	\$302.90	103.10%	\$287.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37223	ILIAC REVASC W/STENT ADD-ON		\$275.94	\$1,293.34	\$202.18	\$264.00	104.52%	\$250.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37224	FEM/POPL REVAS W/TLA		\$578.51	\$2,973.05	\$425.49	\$553.70	104.48%	\$526.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37225	FEM/POPL REVAS W/ATHER		\$4,484.50	\$8,961.07	\$573.54	\$4,290.58	104.52%	\$4,076.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37226	FEM/POPL REVASC W/STENT		\$1,150.42	\$8,301.73	\$496.06	\$1,095.47	105.02%	\$1,040.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37227	FEM/POPL REVASC STNT & ATHER		\$6,346.57	\$11,445.52	\$685.69	\$6,053.88	104.83%	\$5,751.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37228	TIB/PER REVASC W/TLA		\$936.58	\$4,218.82	\$517.36	\$894.62	104.69%	\$849.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37229	TIB/PER REVASC W/ATHER		\$8,379.54	\$9,113.50	\$664.63	\$8,027.76	104.38%	\$7,626.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37230	TIB/PER REVASC W/STENT		\$671.00	\$9,127.32	\$664.08	\$642.93	104.37%	\$610.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37232	TIB/PER REVASC ADD-ON		\$273.48	\$833.99	\$190.79	\$263.60	103.75%	\$250.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37233	TIBPER REVASC W/ATHER ADD-ON		\$1,016.40	\$1,067.81	\$308.94	\$991.55	102.51%	\$941.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37234	REVSC OPN/PRQ TIB/PERO STENT		\$272.27	\$3,722.20	\$269.61	\$261.25	104.22%	\$248.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37236	OPEN/PERQ PLACE STENT 1ST		\$473.40	\$2,800.85	\$422.59	\$454.37	104.19%	\$431.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37237	OPEN/PERQ PLACE STENT EA ADD		\$203.20	\$1,316.27	\$201.98	\$195.02	104.19%	\$185.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37238	OPEN/PERQ PLACE STENT SAME		\$785.01	\$3,532.32	\$295.29	\$752.83	104.27%	\$715.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37239	OPEN/PERQ PLACE STENT EA ADD		\$206.11	\$1,765.08	\$144.64	\$198.89	103.63%	\$188.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37241	VASC EMBOLIZE/OCCLUDE VENOUS		\$794.36	\$4,732.31	\$412.88	\$753.89	105.37%	\$716.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37242	VASC EMBOLIZE/OCCLUDE ARTERY		\$534.44	\$7,241.71	\$458.85	\$507.75	105.26%	\$482.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37243	VASC EMBOLIZE/OCCLUDE ORGAN		\$1,594.53	\$8,780.61	\$543.10	\$1,511.40	105.50%	\$1,435.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37244	VASC EMBOLIZE/OCCLUDE BLEED		\$652.26	\$6,696.30	\$640.06	\$618.96	105.38%	\$588.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37246	TRLUML BALO ANGIOP 1ST ART		\$270.89	\$1,848.97	\$335.08	\$325.08	83.33%	\$270.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37247	TRLUML BALO ANGIOP ADDL ART		\$133.60	\$597.44	\$166.65	\$168.36	79.35%	\$133.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37248	TRLUML BALO ANGIOP 1ST VEIN		\$295.60	\$1,378.17	\$287.36	\$354.18	83.46%	\$295.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37249	TRLUML BALO ANGIOP ADDL VEIN		\$120.85	\$447.59	\$140.18	\$146.06	82.74%	\$120.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Cardiovascular System	37252	INTRVASC US NONCORONARY 1ST		\$298.65	\$970.86	\$85.45	\$356.55	83.76%	\$298.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37253	INTRVASC US NONCORONARY ADDL		\$97.55	\$175.28	\$68.02	\$120.25	81.13%	\$97.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37565	LIGATION OF NECK VEIN		\$584.00	\$725.27	\$725.27	\$725.27	80.52%	\$584.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37600	LIGATION OF NECK ARTERY		\$600.80	\$748.78	\$748.78	\$748.78	80.24%	\$600.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37607	LIGATION OF A-V FISTULA		\$295.82	\$367.38	\$367.38	\$367.38	80.52%	\$295.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37609	TEMPORAL ARTERY PROCEDURE		\$182.47	\$317.65	\$204.78	\$223.71	81.57%	\$182.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37615	LIGATION OF NECK ARTERY		\$416.80	\$518.28	\$518.28	\$518.28	80.42%	\$416.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37616	LIGATION OF CHEST ARTERY		\$877.44	\$1,110.99	\$1,110.99	\$1,110.99	78.98%	\$877.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37617	LIGATION OF ABDOMEN ARTERY		\$1,042.50	\$1,301.10	\$1,301.10	\$1,301.10	80.12%	\$1,042.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37618	LIGATION OF EXTREMITY ARTERY		\$381.78	\$391.29	\$391.29	\$391.29	97.57%	\$371.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37619	LIGATION OF INF VENA CAVA		\$1,439.25	\$1,702.42	\$1,702.42	\$1,702.42	84.54%	\$1,439.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37650	REVISION OF MAJOR VEIN		\$359.20	\$446.71	\$446.71	\$446.71	80.41%	\$359.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37660	REVISION OF MAJOR VEIN		\$1,048.80	\$1,301.75	\$1,301.75	\$1,301.75	80.57%	\$1,048.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37700	REVISE LEG VEIN		\$195.20	\$241.61	\$241.61	\$241.61	80.79%	\$195.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37722	LIGATE/STRIP LONG LEG VEIN		\$380.24	\$450.26	\$450.26	\$450.26	84.45%	\$380.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37761	LIGATE LEG VEINS OPEN		\$427.60	\$526.95	\$526.95	\$526.95	81.15%	\$427.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37765	STAB PHLEB VEINS XTR 10-20		\$345.13	\$424.51	\$264.32	\$401.63	85.93%	\$345.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37766	PHLEB VEINS - EXTREM 20+		\$419.94	\$498.22	\$323.66	\$465.64	90.19%	\$419.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37780	REVISION OF LEG VEIN		\$186.40	\$232.45	\$232.45	\$232.45	80.19%	\$186.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Cardiovascular System	37785	LIGATE/DIVIDE/EXCISE VEIN		\$244.80	\$353.11	\$252.51	\$301.68	81.15%	\$244.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40490	BIOPSY OF LIP		\$93.42	\$126.18	\$69.40	\$115.07	81.18%	\$93.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40510	PARTIAL EXCISION OF LIP		\$328.00	\$506.08	\$358.16	\$405.81	80.83%	\$328.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40520	PARTIAL EXCISION OF LIP		\$295.20	\$519.84	\$365.97	\$362.78	81.37%	\$295.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40525	RECONSTRUCT LIP WITH FLAP		\$453.40	\$563.85	\$563.85	\$563.85	80.41%	\$453.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40650	REPAIR LIP		\$259.39	\$499.83	\$325.97	\$321.36	80.72%	\$259.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40652	REPAIR LIP		\$298.24	\$536.48	\$371.74	\$367.70	81.11%	\$298.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40654	REPAIR LIP		\$351.51	\$607.14	\$438.19	\$435.92	80.64%	\$351.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40700	REPAIR CLEFT LIP/NASAL		\$823.17	\$1,020.78	\$1,020.78	\$1,020.78	80.64%	\$823.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40701	REPAIR CLEFT LIP/NASAL		\$970.40	\$1,201.89	\$1,201.89	\$1,201.89	80.74%	\$970.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40702	REPAIR CLEFT LIP/NASAL		\$815.20	\$1,011.02	\$1,011.02	\$1,011.02	80.63%	\$815.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	40720	REPAIR CLEFT LIP/NASAL		\$837.60	\$1,037.16	\$1,037.16	\$1,037.16	80.76%	\$837.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40800	DRAINAGE OF MOUTH LESION		\$98.46	\$210.29	\$122.66	\$121.24	81.21%	\$98.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40801	DRAINAGE OF MOUTH LESION		\$182.60	\$301.43	\$203.64	\$226.91	80.47%	\$182.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40804	REMOVAL FOREIGN BODY MOUTH		\$99.03	\$196.72	\$117.50	\$123.69	80.06%	\$99.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40805	REMOVAL FOREIGN BODY MOUTH		\$162.40	\$293.56	\$202.07	\$200.61	80.95%	\$162.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40806	INCISION OF LIP FOLD		\$44.90	\$104.31	\$30.36	\$55.47	80.94%	\$44.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40808	BIOPSY OF MOUTH LESION		\$131.44	\$176.21	\$91.74	\$161.90	81.19%	\$131.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40810	EXCISION OF MOUTH LESION		\$116.95	\$225.57	\$126.38	\$143.72	81.38%	\$116.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40812	EXCISE/REPAIR MOUTH LESION		\$182.88	\$286.47	\$186.58	\$221.60	82.53%	\$182.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40814	EXCISE/REPAIR MOUTH LESION		\$234.93	\$383.25	\$290.36	\$288.02	81.57%	\$234.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40816	EXCISION OF MOUTH LESION		\$250.40	\$417.05	\$312.24	\$310.51	80.64%	\$250.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40818	EXCISE ORAL MUCOSA FOR GRAFT		\$221.60	\$376.59	\$273.19	\$270.35	81.97%	\$221.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40819	EXCISE LIP OR CHEEK FOLD		\$172.86	\$279.05	\$205.10	\$214.32	80.65%	\$172.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40820	TREATMENT OF MOUTH LESION		\$199.20	\$269.99	\$172.55	\$245.36	81.19%	\$199.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40830	REPAIR MOUTH LACERATION		\$120.40	\$231.59	\$148.87	\$146.63	82.11%	\$120.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40831	REPAIR MOUTH LACERATION		\$166.13	\$304.18	\$205.33	\$203.02	81.83%	\$166.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40842	RECONSTRUCTION OF MOUTH		\$555.92	\$957.13	\$689.34	\$686.23	81.01%	\$555.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	40845	RECONSTRUCTION OF MOUTH		\$986.29	\$1,510.89	\$1,220.31	\$1,217.76	80.99%	\$986.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41000	DRAINAGE OF MOUTH LESION		\$105.20	\$150.03	\$106.91	\$127.90	82.25%	\$105.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41005	DRAINAGE OF MOUTH LESION		\$99.20	\$237.09	\$119.67	\$116.10	85.45%	\$99.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41006	DRAINAGE OF MOUTH LESION		\$189.60	\$349.27	\$236.05	\$232.90	81.41%	\$189.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41007	DRAINAGE OF MOUTH LESION		\$181.07	\$338.84	\$226.32	\$223.79	80.91%	\$181.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41008	DRAINAGE OF MOUTH LESION		\$211.36	\$405.97	\$264.01	\$261.55	80.81%	\$211.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41009	DRAINAGE OF MOUTH LESION		\$274.67	\$438.04	\$292.58	\$339.16	80.99%	\$274.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41010	INCISION OF TONGUE FOLD		\$121.86	\$225.67	\$113.86	\$148.60	82.01%	\$121.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41015	DRAINAGE OF MOUTH LESION		\$245.87	\$411.15	\$305.64	\$304.10	80.85%	\$245.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41016	DRAINAGE OF MOUTH LESION		\$285.60	\$480.21	\$353.32	\$350.34	81.52%	\$285.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41017	DRAINAGE OF MOUTH LESION		\$292.74	\$480.01	\$351.37	\$358.89	81.57%	\$292.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41018	DRAINAGE OF MOUTH LESION		\$330.13	\$539.81	\$408.71	\$405.83	81.35%	\$330.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41100	BIOPSY OF TONGUE		\$145.81	\$194.49	\$110.01	\$179.41	81.27%	\$145.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	41105	BIOPSY OF TONGUE		\$141.20	\$195.11	\$113.09	\$174.38	80.97%	\$141.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41108	BIOPSY OF FLOOR OF MOUTH		\$104.46	\$174.94	\$93.97	\$128.06	81.57%	\$104.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41110	EXCISION OF TONGUE LESION		\$180.27	\$238.92	\$133.76	\$221.16	81.51%	\$180.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41112	EXCISION OF TONGUE LESION		\$229.73	\$350.93	\$249.98	\$282.55	81.31%	\$229.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41113	EXCISION OF TONGUE LESION		\$262.40	\$373.85	\$270.80	\$321.40	81.64%	\$262.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41114	EXCISION OF TONGUE LESION		\$512.00	\$633.68	\$633.68	\$633.68	80.80%	\$512.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41115	EXCISION OF TONGUE FOLD		\$175.50	\$271.30	\$150.37	\$214.92	81.66%	\$175.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41116	EXCISION OF MOUTH LESION		\$282.40	\$346.29	\$222.91	\$346.29	81.55%	\$282.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41120	PARTIAL REMOVAL OF TONGUE		\$882.72	\$1,082.19	\$1,082.19	\$1,082.19	81.57%	\$882.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41130	PARTIAL REMOVAL OF TONGUE		\$1,085.44	\$1,333.20	\$1,333.20	\$1,333.20	81.42%	\$1,085.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41140	REMOVAL OF TONGUE		\$1,794.00	\$2,205.53	\$2,205.53	\$2,205.53	81.34%	\$1,794.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41150	TONGUE MOUTH JAW SURGERY		\$1,804.27	\$2,220.44	\$2,220.44	\$2,220.44	81.26%	\$1,804.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41153	TONGUE MOUTH NECK SURGERY		\$1,954.40	\$2,412.69	\$2,412.69	\$2,412.69	81.01%	\$1,954.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41155	TONGUE JAW & NECK SURGERY		\$2,444.80	\$3,000.97	\$3,000.97	\$3,000.97	81.47%	\$2,444.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41250	REPAIR TONGUE LACERATION		\$126.30	\$293.20	\$156.85	\$154.37	81.82%	\$126.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41251	REPAIR TONGUE LACERATION		\$150.40	\$323.38	\$187.03	\$183.39	82.01%	\$150.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41252	REPAIR TONGUE LACERATION		\$180.33	\$335.92	\$212.19	\$220.05	81.95%	\$180.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41512	TONGUE SUSPENSION		\$556.80	\$683.79	\$683.79	\$683.79	81.43%	\$556.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41520	RECONSTRUCTION TONGUE FOLD		\$209.27	\$380.42	\$259.50	\$257.50	81.27%	\$209.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41530	TONGUE BASE VOL REDUCTION		\$315.88	\$948.76	\$388.63	\$382.47	82.59%	\$315.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41800	DRAINAGE OF GUM LESION		\$133.17	\$303.50	\$159.78	\$163.53	81.44%	\$133.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41805	REMOVAL FOREIGN BODY GUM		\$215.20	\$320.12	\$202.34	\$260.50	82.61%	\$215.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41825	EXCISION OF GUM LESION		\$100.80	\$229.43	\$125.32	\$123.62	81.54%	\$100.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41826	EXCISION OF GUM LESION		\$163.20	\$308.65	\$199.99	\$197.90	82.47%	\$163.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41872	REPAIR GUM		\$252.00	\$489.44	\$314.53	\$310.93	81.05%	\$252.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	41874	REPAIR TOOTH SOCKET		\$199.20	\$396.74	\$249.87	\$247.54	80.47%	\$199.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42000	DRAINAGE MOUTH ROOF LESION		\$95.90	\$167.00	\$112.67	\$117.98	81.28%	\$95.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42100	BIOPSY ROOF OF MOUTH		\$114.04	\$151.19	\$113.33	\$140.29	81.29%	\$114.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42104	EXCISION LESION MOUTH ROOF		\$129.37	\$225.68	\$138.75	\$159.39	81.16%	\$129.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42106	EXCISION LESION MOUTH ROOF		\$134.13	\$259.26	\$164.27	\$162.57	82.51%	\$134.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	42107	EXCISION LESION MOUTH ROOF		\$270.80	\$457.62	\$330.74	\$326.99	82.82%	\$270.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42120	REMOVE PALATE/LESION		\$832.90	\$1,023.30	\$1,023.30	\$1,023.30	81.39%	\$832.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42140	EXCISION OF UVULA		\$142.78	\$324.43	\$169.15	\$174.82	81.67%	\$142.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42145	REPAIR PALATE PHARYNX/UVULA		\$567.55	\$703.24	\$703.24	\$703.24	80.70%	\$567.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42182	REPAIR PALATE		\$212.00	\$339.11	\$263.39	\$261.00	81.23%	\$212.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42200	RECONSTRUCT CLEFT PALATE		\$760.19	\$939.69	\$939.69	\$939.69	80.90%	\$760.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42205	RECONSTRUCT CLEFT PALATE		\$788.80	\$975.25	\$975.25	\$975.25	80.88%	\$788.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42210	RECONSTRUCT CLEFT PALATE		\$881.09	\$1,089.17	\$1,089.17	\$1,089.17	80.90%	\$881.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42215	RECONSTRUCT CLEFT PALATE		\$578.04	\$715.39	\$715.39	\$715.39	80.80%	\$578.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42220	RECONSTRUCT CLEFT PALATE		\$476.80	\$590.65	\$590.65	\$590.65	80.73%	\$476.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42225	RECONSTRUCT CLEFT PALATE		\$817.49	\$1,005.22	\$1,005.22	\$1,005.22	81.32%	\$817.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42226	LENGTHENING OF PALATE		\$754.00	\$928.92	\$928.92	\$928.92	81.17%	\$754.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42235	REPAIR PALATE		\$618.93	\$763.23	\$763.23	\$763.23	81.09%	\$618.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42260	REPAIR NOSE TO LIP FISTULA		\$550.88	\$885.80	\$683.55	\$681.01	80.89%	\$550.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42300	DRAINAGE OF SALIVARY GLAND		\$181.60	\$223.04	\$161.00	\$223.04	81.42%	\$181.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42305	DRAINAGE OF SALIVARY GLAND		\$348.60	\$443.86	\$443.86	\$443.86	78.54%	\$348.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42310	DRAINAGE OF SALIVARY GLAND		\$112.27	\$176.83	\$138.97	\$138.01	81.35%	\$112.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42330	REMOVAL OF SALIVARY STONE		\$163.11	\$242.37	\$169.82	\$201.53	80.94%	\$163.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42335	REMOVAL OF SALIVARY STONE		\$254.20	\$450.11	\$271.34	\$313.30	81.14%	\$254.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42400	BIOPSY OF SALIVARY GLAND		\$59.20	\$98.83	\$53.61	\$71.69	82.58%	\$59.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42405	BIOPSY OF SALIVARY GLAND		\$222.61	\$314.29	\$231.92	\$275.34	80.85%	\$222.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42408	EXCISION OF SALIVARY CYST		\$288.36	\$560.13	\$357.18	\$352.64	81.77%	\$288.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42409	DRAINAGE OF SALIVARY CYST		\$263.60	\$411.35	\$239.95	\$323.66	81.44%	\$263.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42410	EXCISE PAROTID GLAND/LESION		\$517.47	\$641.97	\$641.97	\$641.97	80.61%	\$517.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42415	EXCISE PAROTID GLAND/LESION		\$865.42	\$1,073.11	\$1,073.11	\$1,073.11	80.65%	\$865.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42420	EXCISE PAROTID GLAND/LESION		\$968.69	\$1,199.30	\$1,199.30	\$1,199.30	80.77%	\$968.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42425	EXCISE PAROTID GLAND/LESION		\$688.00	\$851.79	\$851.79	\$851.79	80.77%	\$688.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42426	EXCISE PAROTID GLAND/LESION		\$1,099.20	\$1,361.02	\$1,361.02	\$1,361.02	80.76%	\$1,099.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42440	EXCISE SUBMAXILLARY GLAND		\$342.71	\$425.88	\$425.88	\$425.88	80.47%	\$342.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42450	EXCISE SUBLINGUAL GLAND		\$302.40	\$489.50	\$374.88	\$374.27	80.80%	\$302.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	42500	REPAIR SALIVARY DUCT		\$287.20	\$465.49	\$355.78	\$353.93	81.15%	\$287.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42505	REPAIR SALIVARY DUCT		\$404.80	\$594.64	\$470.91	\$500.87	80.82%	\$404.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42509	PAROTID DUCT DIVERSION		\$675.20	\$833.90	\$833.90	\$833.90	80.97%	\$675.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42600	CLOSURE OF SALIVARY FISTULA		\$294.40	\$565.89	\$366.44	\$362.40	81.24%	\$294.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42650	DILATION OF SALIVARY DUCT		\$53.92	\$76.89	\$60.41	\$66.57	81.00%	\$53.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42660	DILATION OF SALIVARY DUCT		\$71.89	\$114.40	\$87.41	\$85.10	84.48%	\$71.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42665	LIGATION OF SALIVARY DUCT		\$179.80	\$392.02	\$225.17	\$220.99	81.36%	\$179.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42700	DRAINAGE OF TONSIL ABSCESS		\$119.75	\$199.62	\$140.03	\$147.37	81.26%	\$119.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42720	DRAINAGE OF THROAT ABSCESS		\$314.89	\$456.55	\$390.30	\$389.33	80.88%	\$314.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42725	DRAINAGE OF THROAT ABSCESS		\$651.84	\$811.24	\$811.24	\$811.24	80.35%	\$651.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42800	BIOPSY OF THROAT		\$117.93	\$164.51	\$120.70	\$145.94	80.81%	\$117.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42804	BIOPSY OF UPPER NOSE/THROAT		\$102.40	\$225.53	\$127.73	\$126.26	81.11%	\$102.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42806	BIOPSY OF UPPER NOSE/THROAT		\$117.60	\$251.28	\$146.48	\$144.86	81.18%	\$117.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42808	EXCISE PHARYNX LESION		\$149.22	\$240.69	\$170.23	\$184.55	80.86%	\$149.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42809	REMOVE PHARYNX FOREIGN BODY		\$103.64	\$214.38	\$129.56	\$130.06	79.68%	\$103.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42810	EXCISION OF NECK CYST		\$234.91	\$405.56	\$292.70	\$290.46	80.87%	\$234.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42815	EXCISION OF NECK CYST		\$447.31	\$551.69	\$551.69	\$551.69	81.08%	\$447.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42820	REMOVE TONSILS AND ADENOIDS		\$240.16	\$299.30	\$299.30	\$299.30	80.24%	\$240.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42821	REMOVE TONSILS AND ADENOIDS		\$251.60	\$312.61	\$312.61	\$312.61	80.48%	\$251.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42825	REMOVAL OF TONSILS		\$222.85	\$277.35	\$277.35	\$277.35	80.35%	\$222.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42826	REMOVAL OF TONSILS		\$211.83	\$263.77	\$263.77	\$263.77	80.31%	\$211.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42830	REMOVAL OF ADENOIDS		\$176.41	\$220.58	\$220.58	\$220.58	79.97%	\$176.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42831	REMOVAL OF ADENOIDS		\$192.23	\$239.90	\$239.90	\$239.90	80.13%	\$192.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42835	REMOVAL OF ADENOIDS		\$164.91	\$206.22	\$206.22	\$206.22	79.97%	\$164.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42836	REMOVAL OF ADENOIDS		\$203.20	\$253.42	\$253.42	\$253.42	80.18%	\$203.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42842	EXTENSIVE SURGERY OF THROAT		\$837.76	\$1,031.81	\$1,031.81	\$1,031.81	81.19%	\$837.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42844	EXTENSIVE SURGERY OF THROAT		\$1,136.80	\$1,400.69	\$1,400.69	\$1,400.69	81.16%	\$1,136.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42860	EXCISION OF TONSIL TAGS		\$161.60	\$201.85	\$201.85	\$201.85	80.06%	\$161.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42870	EXCISION OF LINGUAL TONSIL		\$494.26	\$607.18	\$607.18	\$607.18	81.40%	\$494.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42890	PARTIAL REMOVAL OF PHARYNX		\$1,168.80	\$1,437.65	\$1,437.65	\$1,437.65	81.30%	\$1,168.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	42892	REVISION OF PHARYNGEAL WALLS		\$1,532.00	\$1,886.21	\$1,886.21	\$1,886.21	81.22%	\$1,532.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42894	REVISION OF PHARYNGEAL WALLS		\$1,942.80	\$2,389.06	\$2,389.06	\$2,389.06	81.32%	\$1,942.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42900	REPAIR THROAT WOUND		\$271.20	\$336.80	\$336.80	\$336.80	80.52%	\$271.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42950	RECONSTRUCTION OF THROAT		\$666.58	\$818.27	\$818.27	\$818.27	81.46%	\$666.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42953	REPAIR THROAT ESOPHAGUS		\$798.13	\$981.62	\$981.62	\$981.62	81.31%	\$798.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42960	CONTROL THROAT BLEEDING		\$132.23	\$164.43	\$164.43	\$164.43	80.42%	\$132.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42961	CONTROL THROAT BLEEDING		\$346.80	\$430.82	\$430.82	\$430.82	80.50%	\$346.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42962	CONTROL THROAT BLEEDING		\$428.34	\$529.63	\$529.63	\$529.63	80.88%	\$428.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	42975	DISE EVAL SLP DO BRTH FLX DX		\$77.99	\$97.90	\$97.90	\$97.90	79.66%	\$77.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43030	THROAT MUSCLE SURGERY		\$429.60	\$534.27	\$534.27	\$534.27	80.41%	\$429.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43045	INCISION OF ESOPHAGUS		\$1,034.40	\$1,286.53	\$1,286.53	\$1,286.53	80.40%	\$1,034.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43113	REMOVAL OF ESOPHAGUS		\$3,400.80	\$4,216.34	\$4,216.34	\$4,216.34	80.66%	\$3,400.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43117	PARTIAL REMOVAL OF ESOPHAGUS		\$2,564.00	\$3,183.35	\$3,183.35	\$3,183.35	80.54%	\$2,564.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43118	PARTIAL REMOVAL OF ESOPHAGUS		\$2,836.40	\$3,515.37	\$3,515.37	\$3,515.37	80.69%	\$2,836.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43122	PARTIAL REMOVAL OF ESOPHAGUS		\$2,023.20	\$2,530.82	\$2,530.82	\$2,530.82	79.94%	\$2,023.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43124	REMOVAL OF ESOPHAGUS		\$2,985.60	\$3,703.82	\$3,703.82	\$3,703.82	80.61%	\$2,985.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43130	REMOVAL OF ESOPHAGUS POUCH		\$646.00	\$802.24	\$802.24	\$802.24	80.52%	\$646.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43180	ESOPHAGOSCOPY RIGID TRNSO		\$446.00	\$553.07	\$553.07	\$553.07	80.64%	\$446.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43191	ESOPHAGOSCOPY RIGID TRNSO DX		\$126.22	\$156.75	\$156.75	\$156.75	80.52%	\$126.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43192	ESOPHAGOSCP RIG TRNSO INJECT		\$137.87	\$171.15	\$171.15	\$171.15	80.56%	\$137.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43193	ESOPHAGOSCP RIG TRNSO BIOPSY		\$137.37	\$170.45	\$170.45	\$170.45	80.59%	\$137.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43194	ESOPHAGOSCP RIG TRNSO REM FB		\$154.55	\$189.62	\$189.62	\$189.62	81.50%	\$154.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43195	ESOPHAGOSCOPY RIGID BALLOON		\$150.06	\$186.20	\$186.20	\$186.20	80.59%	\$150.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43196	ESOPHAGOSCP GUIDE WIRE DILAT		\$158.29	\$197.06	\$197.06	\$197.06	80.33%	\$158.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43197	ESOPHAGOSCOPY FLEX DX BRUSH		\$65.60	\$196.41	\$81.44	\$80.29	81.71%	\$65.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43198	ESOPHAGOSC FLEX TRNSN BIOPSY		\$79.18	\$217.62	\$97.39	\$96.68	81.90%	\$79.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43200	ESOPHAGOSCOPY FLEXIBLE BRUSH		\$73.88	\$273.13	\$88.05	\$90.34	81.78%	\$73.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43201	ESOPH SCOPE W/SUBMUCOUS INJ		\$83.20	\$268.67	\$103.58	\$101.67	81.83%	\$83.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43202	ESOPHAGOSCOPY FLEX BIOPSY		\$82.56	\$369.34	\$102.95	\$100.60	82.07%	\$82.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43205	ESOPHAGUS ENDOSCOPY/LIGATION		\$112.80	\$140.33	\$140.33	\$140.33	80.38%	\$112.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	43210	EGD ESOPHAGOGASTRSC FNDOPPLSTY		\$341.87	\$424.39	\$424.39	\$424.39	80.55%	\$341.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43212	ESOPHAGOSCOPE STENT PLACEMENT		\$150.80	\$186.36	\$186.36	\$186.36	80.92%	\$150.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43213	ESOPHAGOSCOPY RETRO BALLOON		\$207.41	\$1,262.33	\$256.69	\$247.99	83.63%	\$207.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43214	ESOPHAGOSC DILATE BALLOON 30		\$155.60	\$192.54	\$192.54	\$192.54	80.81%	\$155.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43215	ESOPHAGOSCOPY FLEX REMOVE FB		\$112.60	\$405.34	\$140.35	\$137.58	81.84%	\$112.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43216	ESOPHAGOSCOPY LESION REMOVAL		\$106.80	\$422.86	\$132.98	\$129.99	82.16%	\$106.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43220	ESOPHAGOSCOPY BALLOON <30MM		\$94.49	\$930.50	\$117.65	\$113.84	83.00%	\$94.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43226	ESOPH ENDOSCOPY DILATION		\$104.17	\$398.78	\$129.59	\$127.24	81.87%	\$104.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43227	ESOPHAGOSCOPY CONTROL BLEED		\$131.60	\$614.71	\$163.94	\$160.60	81.94%	\$131.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43229	ESOPHAGOSCOPY LESION ABLATE		\$157.07	\$733.16	\$195.11	\$190.82	82.31%	\$157.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43231	ESOPHAGOSCOPE ULTRASOUND EXAM		\$126.40	\$156.11	\$156.11	\$156.11	80.97%	\$126.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43233	EGD BALLOON DIL ESOPH30 MM/>		\$181.96	\$226.46	\$226.46	\$226.46	80.35%	\$181.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43235	EGD DIAGNOSTIC BRUSH WASH		\$102.81	\$297.41	\$122.15	\$126.26	81.43%	\$102.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43236	UPPER GI SCOPE W/SUBMUC INJ		\$110.23	\$415.48	\$137.88	\$135.06	81.61%	\$110.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43237	ENDOSCOPIC US EXAM ESOPH		\$156.42	\$194.04	\$194.04	\$194.04	80.61%	\$156.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43238	EGD US FINE NEEDLE BX/ASPIR		\$185.27	\$229.91	\$229.91	\$229.91	80.58%	\$185.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43239	EGD BIOPSY SINGLE/MULTIPLE		\$115.05	\$389.55	\$137.88	\$140.98	81.61%	\$115.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43240	EGD W/TRANSMURAL DRAIN CYST		\$311.87	\$387.39	\$387.39	\$387.39	80.50%	\$311.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43241	EGD TUBE/CATH INSERTION		\$113.32	\$141.36	\$141.36	\$141.36	80.17%	\$113.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43242	EGD US FINE NEEDLE BX/ASPIR		\$209.93	\$260.08	\$260.08	\$260.08	80.72%	\$209.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43243	EGD INJECTION VARICES		\$189.20	\$235.03	\$235.03	\$235.03	80.50%	\$189.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43244	EGD VARICES LIGATION		\$195.58	\$242.65	\$242.65	\$242.65	80.60%	\$195.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43245	EGD DILATE STRICTURE		\$150.14	\$613.19	\$173.99	\$182.69	82.18%	\$150.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43246	EGD PLACE GASTROSTOMY TUBE		\$159.62	\$198.04	\$198.04	\$198.04	80.60%	\$159.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43247	EGD REMOVE FOREIGN BODY		\$144.12	\$395.08	\$175.30	\$177.01	81.42%	\$144.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43248	EGD GUIDE WIRE INSERTION		\$141.44	\$426.87	\$165.04	\$173.56	81.50%	\$141.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43249	ESOPH EGD DILATION <30 MM		\$133.76	\$1,116.50	\$152.58	\$161.41	82.87%	\$133.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43250	EGD CAUTERY TUMOR POLYP		\$135.73	\$463.76	\$168.63	\$165.56	81.98%	\$135.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43251	EGD REMOVE LESION SNARE		\$163.39	\$510.06	\$194.24	\$199.58	81.87%	\$163.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43253	EGD US TRANSMURAL INJXN/MARK		\$209.64	\$259.73	\$259.73	\$259.73	80.72%	\$209.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	43254	EGD ENDO MUCOSAL RESECTION		\$215.39	\$267.08	\$267.08	\$267.08	80.65%	\$215.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43255	EGD CONTROL BLEEDING ANY		\$162.22	\$646.35	\$198.39	\$197.62	82.09%	\$162.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43257	EGD W/THRML TXMNT GERD		\$185.07	\$231.40	\$231.40	\$231.40	79.98%	\$185.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43259	EGD US EXAM DUODENUM/JEJUNUM		\$179.93	\$223.58	\$223.58	\$223.58	80.48%	\$179.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43260	ERCP W/SPECIMEN COLLECTION		\$256.69	\$318.96	\$318.96	\$318.96	80.48%	\$256.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43261	ENDO CHOLANGIOPANCREATOGRAPH		\$269.65	\$334.69	\$334.69	\$334.69	80.57%	\$269.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43262	ENDO CHOLANGIOPANCREATOGRAPH		\$284.39	\$352.59	\$352.59	\$352.59	80.66%	\$284.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43264	ERCP REMOVE DUCT CALCULI		\$289.78	\$359.60	\$359.60	\$359.60	80.58%	\$289.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43265	ERCP LITHOTRIpsy CALCULI		\$344.44	\$427.61	\$427.61	\$427.61	80.55%	\$344.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43266	EGD ENDOSCOPIC STENT PLACE		\$173.33	\$215.25	\$215.25	\$215.25	80.53%	\$173.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43270	EGD LESION ABLATION		\$178.97	\$753.53	\$222.15	\$217.95	82.12%	\$178.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43273	ENDOSCOPIC PANCREATOSCOPY		\$94.33	\$117.37	\$117.37	\$117.37	80.37%	\$94.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43274	ERCP DUCT STENT PLACEMENT		\$368.07	\$456.68	\$456.68	\$456.68	80.60%	\$368.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43275	ERCP REMOVE FORGN BODY DUCT		\$299.33	\$371.65	\$371.65	\$371.65	80.54%	\$299.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43276	ERCP STENT EXCHANGE W/DILATE		\$383.30	\$475.47	\$475.47	\$475.47	80.62%	\$383.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43277	ERCP EA DUCT/AMPULLA DILATE		\$301.28	\$373.70	\$373.70	\$373.70	80.62%	\$301.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43278	ERCP LESION ABLATE W/DILATE		\$344.16	\$427.55	\$427.55	\$427.55	80.50%	\$344.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43279	LAP MYOTOMY HELLER		\$1,023.20	\$1,270.73	\$1,270.73	\$1,270.73	80.52%	\$1,023.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43280	LAPAROSCOPY FUNDOPLASTY		\$862.97	\$1,071.53	\$1,071.53	\$1,071.53	80.54%	\$862.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43281	LAP PARAESOPHAG HERN REPAIR		\$1,226.27	\$1,519.88	\$1,519.88	\$1,519.88	80.68%	\$1,226.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43282	LAP PARAESOPH HER RPR W/MESH		\$1,378.71	\$1,711.16	\$1,711.16	\$1,711.16	80.57%	\$1,378.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43285	RMVL ESOPHGL SPHNCTR DEV		\$541.60	\$673.10	\$673.10	\$673.10	80.46%	\$541.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43287	ESPHG DSTL 2/3 W/LAPS MOBLJ		\$2,795.20	\$3,471.76	\$3,471.76	\$3,471.76	80.51%	\$2,795.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43300	REPAIR OF ESOPHAGUS		\$515.20	\$640.02	\$640.02	\$640.02	80.50%	\$515.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43313	ESOPHAGOPLASTY CONGENITAL		\$2,316.80	\$2,880.01	\$2,880.01	\$2,880.01	80.44%	\$2,316.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43314	TRACHEO-ESOPHAGOPLASTY CONG		\$2,478.80	\$3,075.76	\$3,075.76	\$3,075.76	80.59%	\$2,478.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43325	REVISE ESOPHAGUS & STOMACH		\$1,088.80	\$1,351.15	\$1,351.15	\$1,351.15	80.58%	\$1,088.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43327	ESOPH FUNDOPLASTY LAP		\$658.80	\$813.79	\$813.79	\$813.79	80.95%	\$658.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43332	TRANSAB ESOPH HIAT HERN RPR		\$915.09	\$1,138.78	\$1,138.78	\$1,138.78	80.36%	\$915.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43333	TRANSAB ESOPH HIAT HERN RPR		\$1,002.13	\$1,247.38	\$1,247.38	\$1,247.38	80.34%	\$1,002.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	43410	REPAIR ESOPHAGUS WOUND		\$845.60	\$1,049.30	\$1,049.30	\$1,049.30	80.59%	\$845.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43420	REPAIR ESOPHAGUS OPENING		\$831.20	\$1,029.79	\$1,029.79	\$1,029.79	80.72%	\$831.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43450	DILATE ESOPHAGUS 1/MULT PASS		\$67.79	\$193.87	\$79.95	\$83.27	81.41%	\$67.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43453	DILATE ESOPHAGUS		\$69.60	\$828.24	\$86.89	\$83.69	83.16%	\$69.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43460	PRESSURE TREATMENT ESOPHAGUS		\$169.60	\$210.44	\$210.44	\$210.44	80.59%	\$169.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43497	TRANSORL LWR ESOPHGL MYOTOMY		\$639.73	\$789.16	\$789.16	\$789.16	81.06%	\$639.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43500	SURGICAL OPENING OF STOMACH		\$630.80	\$786.87	\$786.87	\$786.87	80.17%	\$630.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43501	SURGICAL REPAIR OF STOMACH		\$1,078.67	\$1,345.82	\$1,345.82	\$1,345.82	80.15%	\$1,078.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43520	INCISION OF PYLORIC MUSCLE		\$556.00	\$692.53	\$692.53	\$692.53	80.29%	\$556.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43610	EXCISION OF STOMACH LESION		\$785.96	\$974.48	\$974.48	\$974.48	80.65%	\$785.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43621	REMOVAL OF STOMACH		\$1,809.80	\$2,248.98	\$2,248.98	\$2,248.98	80.47%	\$1,809.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43631	REMOVAL OF STOMACH PARTIAL		\$1,158.80	\$1,441.24	\$1,441.24	\$1,441.24	80.40%	\$1,158.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43632	REMOVAL OF STOMACH PARTIAL		\$1,624.30	\$2,015.59	\$2,015.59	\$2,015.59	80.59%	\$1,624.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43633	REMOVAL OF STOMACH PARTIAL		\$1,534.88	\$1,907.52	\$1,907.52	\$1,907.52	80.46%	\$1,534.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43640	VAGOTOMY & PYLORUS REPAIR		\$956.00	\$1,187.99	\$1,187.99	\$1,187.99	80.47%	\$956.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43644	LAP GASTRIC BYPASS/ROUX-EN-Y		\$1,389.22	\$1,725.01	\$1,725.01	\$1,725.01	80.53%	\$1,389.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43653	LAPAROSCOPY GASTROSTOMY		\$469.26	\$583.90	\$583.90	\$583.90	80.37%	\$469.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43752	NASAL/OROGASTRIC W/TUBE PLMT		\$32.20	\$39.40	\$39.40	\$39.40	81.74%	\$32.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43753	TX GASTRO INTUB W/ASP		\$17.13	\$21.16	\$21.16	\$21.16	80.97%	\$17.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43754	DX GASTR INTUB W/ASP SPEC		\$30.40	\$244.99	\$38.53	\$37.22	81.67%	\$30.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43761	REPOSITION GASTROSTOMY TUBE		\$84.09	\$123.97	\$102.59	\$103.46	81.28%	\$84.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43762	RPLC GTUBE NO REVJ TRC		\$74.93	\$234.77	\$36.73	\$91.04	82.31%	\$74.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43763	RPLC GTUBE REVJ GSTRST TRC		\$94.13	\$346.37	\$87.34	\$114.10	82.49%	\$94.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43774	LAP RMVL GASTR ADJ ALL PARTS		\$772.18	\$959.15	\$959.15	\$959.15	80.51%	\$772.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43775	LAP SLEEVE GASTRECTOMY		\$879.08	\$1,088.11	\$1,088.11	\$1,088.11	80.79%	\$879.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43800	RECONSTRUCTION OF PYLORUS		\$746.00	\$927.32	\$927.32	\$927.32	80.45%	\$746.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43820	FUSION OF STOMACH AND BOWEL		\$1,077.60	\$1,339.59	\$1,339.59	\$1,339.59	80.44%	\$1,077.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43825	FUSION OF STOMACH AND BOWEL		\$1,051.47	\$1,305.89	\$1,305.89	\$1,305.89	80.52%	\$1,051.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43830	PLACE GASTROSTOMY TUBE		\$568.85	\$706.41	\$706.41	\$706.41	80.53%	\$568.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43831	PLACE GASTROSTOMY TUBE		\$496.80	\$617.59	\$617.59	\$617.59	80.44%	\$496.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	43832	PLACE GASTROSTOMY TUBE		\$837.60	\$1,043.95	\$1,043.95	\$1,043.95	80.23%	\$837.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43840	REPAIR OF STOMACH LESION		\$1,089.98	\$1,353.26	\$1,353.26	\$1,353.26	80.54%	\$1,089.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43845	GASTROPLASTY DUODENAL SWITCH		\$1,566.70	\$1,945.34	\$1,945.34	\$1,945.34	80.54%	\$1,566.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43846	GASTRIC BYPASS FOR OBESITY		\$1,324.00	\$1,643.97	\$1,643.97	\$1,643.97	80.54%	\$1,324.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43848	REVISION GASTROPLASTY		\$1,546.40	\$1,923.58	\$1,923.58	\$1,923.58	80.39%	\$1,546.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43860	REVISE STOMACH-BOWEL FUSION		\$1,309.26	\$1,624.50	\$1,624.50	\$1,624.50	80.59%	\$1,309.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43870	REPAIR STOMACH OPENING		\$572.91	\$710.33	\$710.33	\$710.33	80.65%	\$572.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	43880	REPAIR STOMACH-BOWEL FISTULA		\$1,270.40	\$1,595.14	\$1,595.14	\$1,595.14	79.64%	\$1,270.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44005	FREEING OF BOWEL ADHESION		\$873.90	\$1,085.19	\$1,085.19	\$1,085.19	80.53%	\$873.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44015	INSERT NEEDLE CATH BOWEL		\$112.22	\$138.13	\$138.13	\$138.13	81.24%	\$112.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44020	EXPLORE SMALL INTESTINE		\$780.88	\$969.35	\$969.35	\$969.35	80.56%	\$780.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44021	DECOMPRESS SMALL BOWEL		\$779.84	\$966.48	\$966.48	\$966.48	80.69%	\$779.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44025	INCISION OF LARGE BOWEL		\$785.92	\$977.63	\$977.63	\$977.63	80.39%	\$785.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44050	REDUCE BOWEL OBSTRUCTION		\$751.37	\$933.67	\$933.67	\$933.67	80.47%	\$751.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44055	CORRECT MALROTATION OF BOWEL		\$1,187.08	\$1,476.52	\$1,476.52	\$1,476.52	80.40%	\$1,187.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44110	EXCISE INTESTINE LESION(S)		\$682.13	\$850.89	\$850.89	\$850.89	80.17%	\$682.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44120	REMOVAL OF SMALL INTESTINE		\$976.78	\$1,213.29	\$1,213.29	\$1,213.29	80.51%	\$976.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44121	REMOVAL OF SMALL INTESTINE		\$190.48	\$235.92	\$235.92	\$235.92	80.74%	\$190.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44125	REMOVAL OF SMALL INTESTINE		\$940.59	\$1,169.29	\$1,169.29	\$1,169.29	80.44%	\$940.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44126	ENTERECTOMY W/O TAPER CONG		\$1,969.44	\$2,443.74	\$2,443.74	\$2,443.74	80.59%	\$1,969.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44130	BOWEL TO BOWEL FUSION		\$1,053.82	\$1,308.97	\$1,308.97	\$1,308.97	80.51%	\$1,053.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44139	MOBILIZATION OF COLON		\$95.26	\$117.68	\$117.68	\$117.68	80.95%	\$95.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44140	PARTIAL REMOVAL OF COLON		\$1,074.11	\$1,334.29	\$1,334.29	\$1,334.29	80.50%	\$1,074.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44141	PARTIAL REMOVAL OF COLON		\$1,451.94	\$1,800.61	\$1,800.61	\$1,800.61	80.64%	\$1,451.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44143	PARTIAL REMOVAL OF COLON		\$1,322.98	\$1,638.55	\$1,638.55	\$1,638.55	80.74%	\$1,322.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44144	PARTIAL REMOVAL OF COLON		\$1,411.08	\$1,748.81	\$1,748.81	\$1,748.81	80.69%	\$1,411.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44145	PARTIAL REMOVAL OF COLON		\$1,318.78	\$1,636.32	\$1,636.32	\$1,636.32	80.59%	\$1,318.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44146	PARTIAL REMOVAL OF COLON		\$1,678.80	\$2,082.01	\$2,082.01	\$2,082.01	80.63%	\$1,678.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44147	PARTIAL REMOVAL OF COLON		\$1,539.20	\$1,911.46	\$1,911.46	\$1,911.46	80.52%	\$1,539.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44150	REMOVAL OF COLON		\$1,486.80	\$1,841.82	\$1,841.82	\$1,841.82	80.72%	\$1,486.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	44155	REMOVAL OF COLON/ILEOSTOMY		\$1,655.20	\$2,053.96	\$2,053.96	\$2,053.96	80.59%	\$1,655.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44160	REMOVAL OF COLON		\$994.72	\$1,235.09	\$1,235.09	\$1,235.09	80.54%	\$994.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44180	LAP ENTEROLYSIS		\$737.99	\$917.12	\$917.12	\$917.12	80.47%	\$737.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44186	LAP JEJUNOSTOMY		\$524.55	\$652.61	\$652.61	\$652.61	80.38%	\$524.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44187	LAP ILEO/JEJUNO-STOMY		\$880.89	\$1,090.57	\$1,090.57	\$1,090.57	80.77%	\$880.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44188	LAP COLOSTOMY		\$977.95	\$1,211.17	\$1,211.17	\$1,211.17	80.74%	\$977.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44202	LAP ENTERECTOMY		\$1,110.69	\$1,377.93	\$1,377.93	\$1,377.93	80.61%	\$1,110.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44203	LAP RESECT S/INTESTINE ADDL		\$191.20	\$235.02	\$235.02	\$235.02	81.36%	\$191.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44204	LAPARO PARTIAL COLECTOMY		\$1,227.88	\$1,522.69	\$1,522.69	\$1,522.69	80.64%	\$1,227.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44205	LAP COLECTOMY PART W/ILEUM		\$1,067.49	\$1,323.24	\$1,323.24	\$1,323.24	80.67%	\$1,067.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44206	LAP PART COLECTOMY W/STOMA		\$1,391.20	\$1,724.59	\$1,724.59	\$1,724.59	80.67%	\$1,391.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44207	L COLECTOMY/COLOPROCTOSTOMY		\$1,445.48	\$1,791.45	\$1,791.45	\$1,791.45	80.69%	\$1,445.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44208	L COLECTOMY/COLOPROCTOSTOMY		\$1,575.63	\$1,952.74	\$1,952.74	\$1,952.74	80.69%	\$1,575.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44210	LAPARO TOTAL PROCTOCOLECTOMY		\$1,419.60	\$1,759.30	\$1,759.30	\$1,759.30	80.69%	\$1,419.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44211	LAP COLECTOMY W/PROCTECTOMY		\$1,699.80	\$2,104.28	\$2,104.28	\$2,104.28	80.78%	\$1,699.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44212	LAPARO TOTAL PROCTOCOLECTOMY		\$1,623.20	\$2,011.85	\$2,011.85	\$2,011.85	80.68%	\$1,623.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44213	LAP MOBIL SPLENIC FL ADD-ON		\$147.27	\$182.55	\$182.55	\$182.55	80.67%	\$147.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44227	LAP CLOSE ENTEROSTOMY		\$1,324.02	\$1,640.61	\$1,640.61	\$1,640.61	80.70%	\$1,324.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44300	OPEN BOWEL TO SKIN		\$676.13	\$840.63	\$840.63	\$840.63	80.43%	\$676.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44310	ILEOSTOMY/JEJUNOSTOMY		\$834.02	\$1,035.10	\$1,035.10	\$1,035.10	80.57%	\$834.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44312	REVISION OF ILEOSTOMY		\$482.40	\$601.59	\$601.59	\$601.59	80.19%	\$482.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44314	REVISION OF ILEOSTOMY		\$808.80	\$1,004.45	\$1,004.45	\$1,004.45	80.52%	\$808.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44316	DEVISE BOWEL POUCH		\$1,133.60	\$1,407.22	\$1,407.22	\$1,407.22	80.56%	\$1,133.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44320	COLOSTOMY		\$962.52	\$1,196.58	\$1,196.58	\$1,196.58	80.44%	\$962.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44340	REVISION OF COLOSTOMY		\$509.71	\$636.36	\$636.36	\$636.36	80.10%	\$509.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44345	REVISION OF COLOSTOMY		\$845.44	\$1,049.80	\$1,049.80	\$1,049.80	80.53%	\$845.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44346	REVISION OF COLOSTOMY		\$949.49	\$1,179.15	\$1,179.15	\$1,179.15	80.52%	\$949.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44360	SMALL BOWEL ENDOSCOPY		\$114.80	\$142.98	\$142.98	\$142.98	80.29%	\$114.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44361	SMALL BOWEL ENDOSCOPY/BIOPSY		\$126.58	\$157.41	\$157.41	\$157.41	80.41%	\$126.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44363	SMALL BOWEL ENDOSCOPY		\$153.20	\$189.96	\$189.96	\$189.96	80.65%	\$153.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	44364	SMALL BOWEL ENDOSCOPY		\$163.20	\$202.41	\$202.41	\$202.41	80.63%	\$163.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44366	SMALL BOWEL ENDOSCOPY		\$191.54	\$237.34	\$237.34	\$237.34	80.70%	\$191.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44369	SMALL BOWEL ENDOSCOPY		\$195.73	\$242.98	\$242.98	\$242.98	80.55%	\$195.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44372	SMALL BOWEL ENDOSCOPY		\$190.70	\$236.81	\$236.81	\$236.81	80.53%	\$190.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44373	SMALL BOWEL ENDOSCOPY		\$152.80	\$189.38	\$189.38	\$189.38	80.68%	\$152.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44376	SMALL BOWEL ENDOSCOPY		\$226.40	\$280.60	\$280.60	\$280.60	80.68%	\$226.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44377	SMALL BOWEL ENDOSCOPY/BIOPSY		\$238.51	\$295.72	\$295.72	\$295.72	80.65%	\$238.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44378	SMALL BOWEL ENDOSCOPY		\$306.13	\$379.75	\$379.75	\$379.75	80.61%	\$306.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44380	SMALL BOWEL ENDOSCOPY BR/WA		\$46.00	\$205.03	\$57.81	\$56.88	80.88%	\$46.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44381	SMALL BOWEL ENDOSCOPY BR/WA		\$68.00	\$1,017.64	\$84.91	\$82.02	82.90%	\$68.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44382	SMALL BOWEL ENDOSCOPY		\$59.73	\$310.13	\$74.23	\$72.90	81.93%	\$59.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44384	SMALL BOWEL ENDOSCOPY		\$123.20	\$150.83	\$150.83	\$150.83	81.68%	\$123.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44385	ENDOSCOPY OF BOWEL POUCH		\$58.78	\$224.41	\$72.99	\$72.35	81.24%	\$58.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44386	ENDOSCOPY BOWEL POUCH/BIOP		\$71.73	\$322.30	\$89.21	\$87.61	81.87%	\$71.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44388	COLONOSCOPY THRU STOMA SPX		\$124.80	\$325.13	\$154.78	\$153.70	81.20%	\$124.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44389	COLONOSCOPY WITH BIOPSY		\$137.28	\$424.65	\$170.18	\$168.23	81.60%	\$137.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44390	COLONOSCOPY FOR FOREIGN BODY		\$168.00	\$415.91	\$208.41	\$206.80	81.24%	\$168.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44391	COLONOSCOPY FOR BLEEDING		\$184.00	\$658.78	\$228.34	\$224.70	81.89%	\$184.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44394	COLONOSCOPY W/SNARE		\$179.80	\$450.13	\$222.99	\$220.99	81.36%	\$179.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44500	INTRO GASTROINTESTINAL TUBE		\$15.47	\$18.74	\$18.74	\$18.74	82.53%	\$15.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44602	SUTURE SMALL INTESTINE		\$1,121.84	\$1,390.66	\$1,390.66	\$1,390.66	80.67%	\$1,121.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44603	SUTURE SMALL INTESTINE		\$1,290.71	\$1,600.87	\$1,600.87	\$1,600.87	80.63%	\$1,290.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44604	SUTURE LARGE INTESTINE		\$843.61	\$1,046.38	\$1,046.38	\$1,046.38	80.62%	\$843.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44605	REPAIR OF BOWEL LESION		\$1,037.20	\$1,277.53	\$1,277.53	\$1,277.53	81.19%	\$1,037.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44620	REPAIR BOWEL OPENING		\$694.88	\$861.73	\$861.73	\$861.73	80.64%	\$694.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44625	REPAIR BOWEL OPENING		\$810.41	\$1,005.80	\$1,005.80	\$1,005.80	80.57%	\$810.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44626	REPAIR BOWEL OPENING		\$1,270.40	\$1,572.94	\$1,572.94	\$1,572.94	80.77%	\$1,270.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44640	REPAIR BOWEL-SKIN FISTULA		\$1,114.22	\$1,382.88	\$1,382.88	\$1,382.88	80.57%	\$1,114.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44650	REPAIR BOWEL FISTULA		\$1,149.76	\$1,426.57	\$1,426.57	\$1,426.57	80.60%	\$1,149.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44661	REPAIR BOWEL-BLADDER FISTULA		\$1,232.80	\$1,525.88	\$1,525.88	\$1,525.88	80.79%	\$1,232.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	44680	SURGICAL REVISION INTESTINE		\$863.20	\$1,070.94	\$1,070.94	\$1,070.94	80.60%	\$863.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44700	SUSPEND BOWEL W/PROSTHESIS		\$801.87	\$999.17	\$999.17	\$999.17	80.25%	\$801.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44800	EXCISION OF BOWEL POUCH		\$626.16	\$781.04	\$781.04	\$781.04	80.17%	\$626.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44820	EXCISION OF MESENTERY LESION		\$684.80	\$851.53	\$851.53	\$851.53	80.42%	\$684.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44850	REPAIR OF MESENTERY		\$601.11	\$749.36	\$749.36	\$749.36	80.22%	\$601.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44950	APPENDECTOMY		\$516.42	\$641.69	\$641.69	\$641.69	80.48%	\$516.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44955	APPENDECTOMY ADD-ON		\$66.39	\$82.08	\$82.08	\$82.08	80.89%	\$66.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44960	APPENDECTOMY		\$704.46	\$874.58	\$874.58	\$874.58	80.55%	\$704.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	44970	LAPAROSCOPY APPENDECTOMY		\$486.85	\$605.48	\$605.48	\$605.48	80.41%	\$486.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45000	DRAINAGE OF PELVIC ABSCESS		\$349.60	\$435.68	\$435.68	\$435.68	80.24%	\$349.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45005	DRAINAGE OF RECTAL ABSCESS		\$201.60	\$325.43	\$168.40	\$246.07	81.93%	\$201.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45020	DRAINAGE OF RECTAL ABSCESS		\$468.40	\$575.43	\$575.43	\$575.43	81.40%	\$468.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45100	BIOPSY OF RECTUM		\$248.46	\$310.08	\$310.08	\$310.08	80.13%	\$248.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45110	REMOVAL OF RECTUM		\$1,462.24	\$1,808.42	\$1,808.42	\$1,808.42	80.86%	\$1,462.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45112	REMOVAL OF RECTUM		\$1,456.00	\$1,803.28	\$1,803.28	\$1,803.28	80.74%	\$1,456.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45113	PARTIAL PROCTECTOMY		\$1,500.00	\$1,856.15	\$1,856.15	\$1,856.15	80.81%	\$1,500.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45116	PARTIAL REMOVAL OF RECTUM		\$1,241.60	\$1,539.42	\$1,539.42	\$1,539.42	80.65%	\$1,241.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45119	REMOVE RECTUM W/RESERVOIR		\$1,511.20	\$1,869.75	\$1,869.75	\$1,869.75	80.82%	\$1,511.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45120	REMOVAL OF RECTUM		\$1,282.40	\$1,592.21	\$1,592.21	\$1,592.21	80.54%	\$1,282.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45126	PELVIC EXENTERATION		\$2,186.80	\$2,725.46	\$2,725.46	\$2,725.46	80.24%	\$2,186.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45130	EXCISION OF RECTAL PROLAPSE		\$873.12	\$1,082.71	\$1,082.71	\$1,082.71	80.64%	\$873.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45136	EXCISE ILEOANAL RESERVIOR		\$1,438.67	\$1,780.76	\$1,780.76	\$1,780.76	80.79%	\$1,438.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45150	EXCISION OF RECTAL STRICTURE		\$345.60	\$430.29	\$430.29	\$430.29	80.32%	\$345.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45160	EXCISION OF RECTAL LESION		\$826.00	\$1,027.12	\$1,027.12	\$1,027.12	80.42%	\$826.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45171	EXC RECT TUM TRANSANAL PART		\$506.76	\$627.77	\$627.77	\$627.77	80.72%	\$506.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45172	EXC RECT TUM TRANSANAL FULL		\$671.80	\$833.19	\$833.19	\$833.19	80.63%	\$671.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45300	PROCTOSIGMOIDOSCOPY DX		\$81.13	\$132.77	\$48.30	\$99.40	81.62%	\$81.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45303	PROCTOSIGMOIDOSCOPY DILATE		\$68.80	\$980.00	\$85.83	\$82.00	83.90%	\$68.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45305	PROCTOSIGMOIDOSCOPY W/BX		\$77.60	\$187.45	\$73.19	\$95.00	81.69%	\$77.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45307	PROCTOSIGMOIDOSCOPY FB		\$80.20	\$219.28	\$100.10	\$97.74	82.05%	\$80.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	45330	DIAGNOSTIC SIGMOIDOSCOPY		\$47.73	\$193.78	\$57.08	\$58.70	81.32%	\$47.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45331	SIGMOIDOSCOPY AND BIOPSY		\$59.50	\$297.91	\$72.53	\$72.86	81.66%	\$59.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45332	SIGMOIDOSCOPY W/FB REMOVAL		\$84.00	\$287.19	\$105.27	\$103.30	81.31%	\$84.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45333	SIGMOIDOSCOPY & POLYPECTOMY		\$75.07	\$340.43	\$94.02	\$91.57	81.98%	\$75.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45334	SIGMOIDOSCOPY FOR BLEEDING		\$94.34	\$509.76	\$117.18	\$114.66	82.28%	\$94.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45335	SIGMOIDOSCOPY W/SUBMUC INJ		\$70.07	\$302.69	\$67.14	\$85.41	82.04%	\$70.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45337	SIGMOIDOSCOPY & DECOMPRESS		\$91.20	\$113.30	\$113.30	\$113.30	80.50%	\$91.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45338	SIGMOIDOSCOPY W/TUMR REMOVE		\$96.19	\$309.39	\$119.76	\$118.15	81.41%	\$96.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45340	SIG W/TNDSC BALLOON DILATION		\$62.97	\$473.83	\$78.44	\$76.41	82.41%	\$62.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45341	SIGMOIDOSCOPY W/ULTRASOUND		\$99.02	\$123.58	\$123.58	\$123.58	80.12%	\$99.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45342	SIGMOIDOSCOPY W/US GUIDE BX		\$136.80	\$169.19	\$169.19	\$169.19	80.86%	\$136.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45347	SIGMOIDOSCOPY W/PLCMT STENT		\$123.20	\$152.93	\$152.93	\$152.93	80.56%	\$123.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45349	SIGMOIDOSCOPY W/RESECTION		\$158.51	\$196.34	\$196.34	\$196.34	80.73%	\$158.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45350	SGMDSC W/BAND LIGATION		\$80.64	\$696.09	\$100.91	\$97.91	82.36%	\$80.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45378	DIAGNOSTIC COLONOSCOPY		\$248.16	\$349.13	\$182.99	\$189.49	130.96%	\$180.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45379	COLONOSCOPY W/FB REMOVAL		\$316.87	\$445.70	\$236.09	\$234.03	135.40%	\$222.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45380	COLONOSCOPY AND BIOPSY		\$259.60	\$446.68	\$198.86	\$204.28	127.08%	\$194.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45381	COLONOSCOPY SUBMUCOUS NJX		\$308.47	\$456.14	\$198.51	\$201.16	153.35%	\$191.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45382	COLONOSCOPY W/CONTROL BLEED		\$273.00	\$685.01	\$255.98	\$266.69	102.37%	\$253.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45384	COLONOSCOPY W/LESION REMOVAL		\$347.79	\$501.70	\$225.49	\$222.46	156.34%	\$211.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45385	COLONOSCOPY W/LESION REMOVAL		\$316.87	\$465.65	\$251.48	\$257.61	123.00%	\$244.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45386	COLONOSCOPY W/BALLOON DILAT		\$588.31	\$628.68	\$209.82	\$205.98	285.62%	\$195.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45388	COLONOSCOPY W/ABLATION		\$319.53	\$2,529.20	\$267.31	\$259.73	123.03%	\$246.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45390	COLONOSCOPY W/RESECTION		\$331.27	\$328.69	\$328.69	\$328.69	100.78%	\$312.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45391	COLONOSCOPY W/ENDOSCOPE US		\$274.13	\$255.03	\$255.03	\$255.03	107.49%	\$242.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45392	COLONOSCOPY W/ENDOSCOPIC FNB		\$303.43	\$300.86	\$300.86	\$300.86	100.85%	\$285.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45393	COLONOSCOPY W/DECOMPRESSION		\$250.43	\$248.13	\$248.13	\$248.13	100.93%	\$235.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45395	LAP REMOVAL OF RECTUM		\$1,964.06	\$1,945.74	\$1,945.74	\$1,945.74	100.94%	\$1,848.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45397	LAP REMOVE RECTUM W/POUCH		\$2,131.00	\$2,107.17	\$2,107.17	\$2,107.17	101.13%	\$2,001.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45398	COLONOSCOPY W/BAND LIGATION		\$248.16	\$848.44	\$232.58	\$227.34	109.16%	\$215.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	45400	LAPAROSCOPIC PROC		\$910.35	\$1,129.90	\$1,129.90	\$1,129.90	80.57%	\$910.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45402	LAP PROCTOPEXY W/SIG RESECT		\$1,214.67	\$1,505.86	\$1,505.86	\$1,505.86	80.66%	\$1,214.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45505	REPAIR OF RECTUM		\$493.60	\$612.61	\$612.61	\$612.61	80.57%	\$493.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45540	CORRECT RECTAL PROLAPSE		\$847.47	\$1,048.46	\$1,048.46	\$1,048.46	80.83%	\$847.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45541	CORRECT RECTAL PROLAPSE		\$760.00	\$941.77	\$941.77	\$941.77	80.70%	\$760.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45560	REPAIR OF RECTOCELE		\$561.33	\$696.88	\$696.88	\$696.88	80.55%	\$561.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45562	EXPLORATION/REPAIR OF RECTUM		\$915.20	\$1,169.33	\$1,169.33	\$1,169.33	78.27%	\$915.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45563	EXPLORATION/REPAIR OF RECTUM		\$1,332.60	\$1,650.77	\$1,650.77	\$1,650.77	80.73%	\$1,332.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45900	REDUCTION OF RECTAL PROLAPSE		\$172.80	\$214.84	\$214.84	\$214.84	80.43%	\$172.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45905	DILATION OF ANAL SPHINCTER		\$139.20	\$173.49	\$173.49	\$173.49	80.24%	\$139.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45910	DILATION OF RECTAL NARROWING		\$157.44	\$196.12	\$196.12	\$196.12	80.28%	\$157.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45915	REMOVE RECTAL OBSTRUCTION		\$187.41	\$363.31	\$232.21	\$231.46	80.97%	\$187.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	45990	SURGERY DX EXAM ANORECTAL		\$84.28	\$105.66	\$105.66	\$105.66	79.77%	\$84.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46020	PLACEMENT OF SETON		\$94.12	\$117.26	\$117.26	\$117.26	80.26%	\$94.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46030	REMOVAL OF RECTAL MARKER		\$70.20	\$262.72	\$86.76	\$85.19	82.40%	\$70.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46040	INCISION OF RECTAL ABSCESS		\$350.28	\$570.27	\$435.32	\$432.98	80.90%	\$350.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46045	INCISION OF RECTAL ABSCESS		\$360.00	\$448.72	\$448.72	\$448.72	80.23%	\$360.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46050	INCISION OF ANAL ABSCESS		\$92.69	\$245.91	\$103.95	\$113.80	81.45%	\$92.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46060	INCISION OF RECTAL ABSCESS		\$400.93	\$497.47	\$497.47	\$497.47	80.59%	\$400.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46080	INCISION OF ANAL SPHINCTER		\$133.32	\$295.74	\$159.03	\$163.51	81.54%	\$133.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46083	INCISE EXTERNAL HEMORRHOID		\$109.38	\$215.57	\$112.52	\$134.85	81.11%	\$109.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46200	REMOVAL OF ANAL FISSURE		\$280.42	\$492.32	\$349.66	\$345.90	81.07%	\$280.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46220	EXCISE ANAL EXT TAG/PAPILLA		\$171.04	\$260.32	\$124.32	\$210.20	81.37%	\$171.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46221	LIGATION OF HEMORRHOID(S)		\$213.28	\$292.82	\$197.13	\$262.61	81.22%	\$213.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46230	REMOVAL OF ANAL TAGS		\$185.29	\$323.08	\$176.21	\$228.79	80.99%	\$185.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46250	REMOVE EXT HEM GROUPS 2+		\$262.10	\$492.56	\$325.01	\$323.08	81.13%	\$262.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46255	REMOVE INT/EXT HEM 1 GROUP		\$296.53	\$534.13	\$361.33	\$364.68	81.31%	\$296.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46257	REMOVE IN/EX HEM GRP & FISS		\$343.20	\$426.45	\$426.45	\$426.45	80.48%	\$343.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46258	REMOVE IN/EX HEM GRP W/FISTU		\$393.40	\$490.79	\$490.79	\$490.79	80.16%	\$393.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46260	REMOVE IN/EX HEM GROUPS 2+		\$395.05	\$490.27	\$490.27	\$490.27	80.58%	\$395.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	46261	REMOVE IN/EX HEM GRPS & FISS		\$433.37	\$542.23	\$542.23	\$542.23	79.92%	\$433.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46262	REMOVE IN/EX HEM GRPS W/FIST		\$479.20	\$594.35	\$594.35	\$594.35	80.63%	\$479.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46270	REMOVE ANAL FIST SUBQ		\$330.49	\$549.59	\$411.14	\$406.94	81.21%	\$330.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46275	REMOVE ANAL FIST INTER		\$347.74	\$580.89	\$432.97	\$429.14	81.03%	\$347.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46280	REMOVE ANAL FIST COMPLEX		\$395.91	\$491.23	\$491.23	\$491.23	80.60%	\$395.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46285	REMOVE ANAL FIST 2 STAGE		\$347.84	\$580.39	\$434.22	\$430.61	80.78%	\$347.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46288	REPAIR ANAL FISTULA		\$458.27	\$569.82	\$569.82	\$569.82	80.42%	\$458.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46320	REMOVAL OF HEMORRHOID CLOT		\$134.03	\$221.09	\$115.59	\$165.39	81.04%	\$134.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46500	INJECTION INTO HEMORRHOID(S)		\$249.24	\$324.22	\$189.62	\$303.53	82.11%	\$249.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46505	CHEMODENERVATION ANAL MUSC		\$206.69	\$323.46	\$255.81	\$254.71	81.15%	\$206.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46600	DIAGNOSTIC ANOSCOPY SPX		\$94.68	\$122.58	\$41.96	\$114.78	82.49%	\$94.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46604	ANOSCOPY AND DILATION		\$53.60	\$670.45	\$66.51	\$63.69	84.16%	\$53.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46606	ANOSCOPY AND BIOPSY		\$96.24	\$291.06	\$75.84	\$117.40	81.98%	\$96.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46608	ANOSCOPY REMOVE FOR BODY		\$67.84	\$300.09	\$84.53	\$81.97	82.77%	\$67.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46611	ANOSCOPY		\$126.80	\$231.04	\$81.02	\$155.17	81.72%	\$126.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46612	ANOSCOPY REMOVE LESIONS		\$76.00	\$342.53	\$95.07	\$91.64	82.93%	\$76.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46614	ANOSCOPY CONTROL BLEEDING		\$52.00	\$174.31	\$64.95	\$63.68	81.66%	\$52.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46615	ANOSCOPY		\$72.87	\$182.65	\$91.16	\$89.23	81.66%	\$72.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46705	REPAIR OF ANAL STRICTURE		\$468.00	\$580.62	\$580.62	\$580.62	80.60%	\$468.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46707	REPAIR ANORECTAL FIST W/PLUG		\$412.80	\$512.98	\$512.98	\$512.98	80.47%	\$412.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46716	REP PERF ANOPER/VESTIB FISTU		\$1,001.40	\$1,245.90	\$1,245.90	\$1,245.90	80.38%	\$1,001.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46730	CONSTRUCTION OF ABSENT ANUS		\$1,602.00	\$1,990.12	\$1,990.12	\$1,990.12	80.50%	\$1,602.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46740	CONSTRUCTION OF ABSENT ANUS		\$1,745.37	\$2,168.49	\$2,168.49	\$2,168.49	80.49%	\$1,745.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46750	REPAIR OF ANAL SPHINCTER		\$608.80	\$755.07	\$755.07	\$755.07	80.63%	\$608.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46900	DESTRUCTION ANAL LESION(S)		\$193.20	\$249.31	\$140.65	\$240.20	80.43%	\$193.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46910	DESTRUCTION ANAL LESION(S)		\$110.04	\$274.09	\$138.09	\$136.44	80.65%	\$110.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46916	CRYOSURGERY ANAL LESION(S)		\$198.15	\$270.99	\$145.51	\$244.67	80.99%	\$198.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46917	LASER SURGERY ANAL LESIONS		\$105.20	\$461.77	\$131.58	\$127.94	82.23%	\$105.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46922	EXCISION OF ANAL LESION(S)		\$124.15	\$325.32	\$140.60	\$152.15	81.59%	\$124.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46924	DESTRUCTION ANAL LESION(S)		\$173.53	\$577.92	\$183.94	\$215.68	80.46%	\$173.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	46930	DESTROY INTERNAL HEMORRHOIDS		\$165.60	\$224.40	\$156.39	\$204.69	80.90%	\$165.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46940	TREATMENT OF ANAL FISSURE		\$118.40	\$275.74	\$146.75	\$145.86	81.18%	\$118.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46945	INT HRHC LIG 1 HROID W/O IMG		\$281.51	\$350.14	\$350.14	\$350.14	80.40%	\$281.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46946	INT HRHC LIG 2+HROID W/O IMG		\$314.93	\$390.31	\$390.31	\$390.31	80.69%	\$314.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46947	HEMORRHOIDOPEXY BY STAPLING		\$317.23	\$395.39	\$395.39	\$395.39	80.23%	\$317.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	46948	INT HRHC TRANAL DARTLZJ 2+		\$366.13	\$453.07	\$453.07	\$453.07	80.81%	\$366.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47000	NEEDLE BIOPSY OF LIVER		\$71.80	\$309.26	\$86.68	\$86.79	82.73%	\$71.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47001	NEEDLE BIOPSY LIVER ADD-ON		\$81.91	\$101.23	\$101.23	\$101.23	80.92%	\$81.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47010	OPEN DRAINAGE LIVER LESION		\$976.00	\$1,211.04	\$1,211.04	\$1,211.04	80.59%	\$976.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47100	WEDGE BIOPSY OF LIVER		\$686.22	\$853.56	\$853.56	\$853.56	80.39%	\$686.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47120	PARTIAL REMOVAL OF LIVER		\$1,869.41	\$2,319.29	\$2,319.29	\$2,319.29	80.60%	\$1,869.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47130	PARTIAL REMOVAL OF LIVER		\$2,632.64	\$3,261.80	\$3,261.80	\$3,261.80	80.71%	\$2,632.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47135	TRANSPLANTATION OF LIVER		\$4,304.64	\$5,354.54	\$5,354.54	\$5,354.54	80.39%	\$4,304.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47140	PARTIAL REMOVAL DONOR LIVER		\$2,852.00	\$3,547.28	\$3,547.28	\$3,547.28	80.40%	\$2,852.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47142	PARTIAL REMOVAL DONOR LIVER		\$3,739.20	\$4,659.21	\$4,659.21	\$4,659.21	80.25%	\$3,739.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47146	PREP DONOR LIVER/VENOUS		\$258.60	\$319.93	\$319.93	\$319.93	80.83%	\$258.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47147	PREP DONOR LIVER/ARTERIAL		\$301.33	\$373.76	\$373.76	\$373.76	80.62%	\$301.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47350	REPAIR LIVER WOUND		\$1,098.09	\$1,358.35	\$1,358.35	\$1,358.35	80.84%	\$1,098.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47360	REPAIR LIVER WOUND		\$1,499.56	\$1,858.87	\$1,858.87	\$1,858.87	80.67%	\$1,499.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47361	REPAIR LIVER WOUND		\$2,405.17	\$2,970.31	\$2,970.31	\$2,970.31	80.97%	\$2,405.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47362	REPAIR LIVER WOUND		\$1,151.09	\$1,443.47	\$1,443.47	\$1,443.47	79.74%	\$1,151.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47370	LAPARO ABLATE LIVER TUMOR RF		\$1,006.40	\$1,249.55	\$1,249.55	\$1,249.55	80.54%	\$1,006.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47380	OPEN ABLATE LIVER TUMOR RF		\$1,157.80	\$1,439.07	\$1,439.07	\$1,439.07	80.45%	\$1,157.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47382	PERCUT ABLATE LIVER RF		\$585.60	\$3,724.99	\$719.65	\$696.65	84.06%	\$585.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47383	PERQ ABLTJ LVR CRYOABLATION		\$358.40	\$6,034.54	\$439.23	\$421.91	84.95%	\$358.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47420	INCISION OF BILE DUCT		\$1,069.20	\$1,333.95	\$1,333.95	\$1,333.95	80.15%	\$1,069.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47490	INCISION OF GALLBLADDER		\$270.84	\$332.49	\$332.49	\$332.49	81.46%	\$270.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47531	INJECTION FOR CHOLANGIOGRAM		\$66.94	\$434.52	\$69.28	\$79.98	83.70%	\$66.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47532	INJECTION FOR CHOLANGIOGRAM		\$166.67	\$857.98	\$205.32	\$200.50	83.13%	\$166.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47533	PLMT BILIARY DRAINAGE CATH		\$208.80	\$1,188.33	\$255.60	\$249.77	83.60%	\$208.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	47534	PLMT BILIARY DRAINAGE CATH		\$291.88	\$1,301.47	\$357.53	\$350.04	83.38%	\$291.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47535	CONVERSION EXT BIL DRG CATH		\$154.80	\$905.22	\$190.17	\$185.32	83.53%	\$154.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47536	EXCHANGE BILIARY DRG CATH		\$104.05	\$648.83	\$128.31	\$124.27	83.73%	\$104.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47537	REMOVAL BILIARY DRG CATH		\$76.71	\$502.66	\$94.31	\$91.58	83.76%	\$76.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47538	PERQ PLMT BILE DUCT STENT		\$184.80	\$3,843.14	\$227.55	\$219.32	84.26%	\$184.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47541	PLMT ACCESS BIL TREE SM BWL		\$265.44	\$1,186.05	\$325.88	\$319.48	83.09%	\$265.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47542	DILATE BILIARY DUCT/AMPULLA		\$107.24	\$506.98	\$131.23	\$128.40	83.52%	\$107.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47543	ENDOLUMINAL BX BILIARY TREE		\$113.20	\$398.02	\$138.64	\$136.30	83.05%	\$113.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47544	REMOVAL DUCT GLBLDR CALCULI		\$123.20	\$853.32	\$151.24	\$147.20	83.70%	\$123.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47550	BILE DUCT ENDOSCOPY ADD-ON		\$129.60	\$160.06	\$160.06	\$160.06	80.97%	\$129.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47552	BILIARY ENDO PERQ DX W/SPECI		\$219.20	\$270.72	\$270.72	\$270.72	80.97%	\$219.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47554	BILIARY ENDOSCOPY THRU SKIN		\$355.00	\$437.47	\$437.47	\$437.47	81.15%	\$355.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47562	LAPAROSCOPIC CHOLECYSTECTOMY		\$532.14	\$662.69	\$662.69	\$662.69	80.30%	\$532.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47563	LAPARO CHOLECYSTECTOMY/GRAPH		\$579.74	\$719.95	\$719.95	\$719.95	80.53%	\$579.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47564	LAPARO CHOLECYSTECTOMY/EXPLR		\$899.25	\$1,118.22	\$1,118.22	\$1,118.22	80.42%	\$899.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47600	REMOVAL OF GALLBLADDER		\$860.05	\$1,068.78	\$1,068.78	\$1,068.78	80.47%	\$860.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47605	REMOVAL OF GALLBLADDER		\$906.47	\$1,124.61	\$1,124.61	\$1,124.61	80.60%	\$906.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47610	REMOVAL OF GALLBLADDER		\$1,004.80	\$1,242.48	\$1,242.48	\$1,242.48	80.87%	\$1,004.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47701	BILE DUCT REVISION		\$1,391.60	\$1,725.24	\$1,725.24	\$1,725.24	80.66%	\$1,391.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47715	EXCISION OF BILE DUCT CYST		\$1,069.60	\$1,326.63	\$1,326.63	\$1,326.63	80.63%	\$1,069.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47780	FUSE BILE DUCTS AND BOWEL		\$1,974.40	\$2,452.02	\$2,452.02	\$2,452.02	80.52%	\$1,974.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47785	FUSE BILE DUCTS AND BOWEL		\$2,579.84	\$3,198.96	\$3,198.96	\$3,198.96	80.65%	\$2,579.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47800	RECONSTRUCTION OF BILE DUCTS		\$1,250.80	\$1,548.50	\$1,548.50	\$1,548.50	80.78%	\$1,250.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47801	PLACEMENT BILE DUCT SUPPORT		\$899.20	\$1,115.27	\$1,115.27	\$1,115.27	80.63%	\$899.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	47900	SUTURE BILE DUCT INJURY		\$1,108.40	\$1,374.12	\$1,374.12	\$1,374.12	80.66%	\$1,108.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48000	DRAINAGE OF ABDOMEN		\$1,504.00	\$1,865.39	\$1,865.39	\$1,865.39	80.63%	\$1,504.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48105	RESECT/DEBRIDE PANCREAS		\$2,258.67	\$2,793.82	\$2,793.82	\$2,793.82	80.85%	\$2,258.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48120	REMOVAL OF PANCREAS LESION		\$894.40	\$1,109.40	\$1,109.40	\$1,109.40	80.62%	\$894.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48140	PARTIAL REMOVAL OF PANCREAS		\$1,254.86	\$1,558.10	\$1,558.10	\$1,558.10	80.54%	\$1,254.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48145	PARTIAL REMOVAL OF PANCREAS		\$1,307.20	\$1,621.64	\$1,621.64	\$1,621.64	80.61%	\$1,307.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	48150	PARTIAL REMOVAL OF PANCREAS		\$2,488.40	\$3,088.07	\$3,088.07	\$3,088.07	80.58%	\$2,488.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48153	PANCREATECTOMY		\$2,478.80	\$3,073.12	\$3,073.12	\$3,073.12	80.66%	\$2,478.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48155	REMOVAL OF PANCREAS		\$1,465.60	\$1,812.11	\$1,812.11	\$1,812.11	80.88%	\$1,465.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48510	DRAIN PANCREATIC PSEUDOCYST		\$884.40	\$1,097.08	\$1,097.08	\$1,097.08	80.61%	\$884.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48520	FUSE PANCREAS CYST AND BOWEL		\$883.47	\$1,095.51	\$1,095.51	\$1,095.51	80.64%	\$883.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48545	PANCREATORRHAPHY		\$1,080.00	\$1,340.81	\$1,340.81	\$1,340.81	80.55%	\$1,080.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	48547	DUODENAL EXCLUSION		\$1,432.40	\$1,776.54	\$1,776.54	\$1,776.54	80.63%	\$1,432.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49000	EXPLORATION OF ABDOMEN		\$618.44	\$768.72	\$768.72	\$768.72	80.45%	\$618.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49002	REOPENING OF ABDOMEN		\$834.87	\$1,036.71	\$1,036.71	\$1,036.71	80.53%	\$834.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49010	EXPLORATION BEHIND ABDOMEN		\$736.00	\$915.51	\$915.51	\$915.51	80.39%	\$736.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49013	PRPERTL PEL PACK HEMRRG TRMA		\$360.10	\$446.62	\$446.62	\$446.62	80.63%	\$360.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49014	REEXPLORATION PELVIC WOUND		\$300.27	\$372.71	\$372.71	\$372.71	80.56%	\$300.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49020	DRAINAGE ABDOM ABSCESS OPEN		\$1,277.16	\$1,587.78	\$1,587.78	\$1,587.78	80.44%	\$1,277.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49040	DRAIN OPEN ABDOM ABSCESS		\$807.60	\$1,000.87	\$1,000.87	\$1,000.87	80.69%	\$807.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49060	DRAIN OPEN RETROPERI ABSCESS		\$878.40	\$1,090.77	\$1,090.77	\$1,090.77	80.53%	\$878.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49082	ABD PARACENTESIS		\$61.09	\$219.29	\$73.13	\$74.93	81.53%	\$61.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49083	ABD PARACENTESIS W/IMAGING		\$87.08	\$300.80	\$104.86	\$105.55	82.50%	\$87.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49084	PERITONEAL LAVAGE		\$85.04	\$104.73	\$104.73	\$104.73	81.20%	\$85.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49180	BIOPSY ABDOMINAL MASS		\$69.11	\$178.05	\$80.95	\$84.22	82.06%	\$69.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49185	SCLEROTX FLUID COLLECTION		\$275.10	\$1,295.22	\$116.78	\$327.53	83.99%	\$275.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49203	EXC ABD TUM 5 CM OR LESS		\$960.24	\$1,192.97	\$1,192.97	\$1,192.97	80.49%	\$960.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49204	EXC ABD TUM OVER 5 CM		\$1,221.14	\$1,518.49	\$1,518.49	\$1,518.49	80.42%	\$1,221.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49205	EXC ABD TUM OVER 10 CM		\$1,401.06	\$1,741.05	\$1,741.05	\$1,741.05	80.47%	\$1,401.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49215	EXCISE SACRAL SPINE TUMOR		\$1,763.47	\$2,209.48	\$2,209.48	\$2,209.48	79.81%	\$1,763.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49250	EXCISION OF UMBILICUS		\$481.60	\$600.31	\$600.31	\$600.31	80.23%	\$481.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49255	REMOVAL OF OMENTUM		\$640.80	\$797.68	\$797.68	\$797.68	80.33%	\$640.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49320	DIAG LAPARO SEPARATE PROC		\$265.74	\$331.54	\$331.54	\$331.54	80.15%	\$265.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49321	LAPAROSCOPY BIOPSY		\$278.60	\$346.86	\$346.86	\$346.86	80.32%	\$278.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49322	LAPAROSCOPY ASPIRATION		\$303.01	\$376.63	\$376.63	\$376.63	80.45%	\$303.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49324	LAP INSERT TUNNEL IP CATH		\$311.21	\$386.22	\$386.22	\$386.22	80.58%	\$311.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	49325	LAP REVISION PERM IP CATH		\$331.80	\$411.49	\$411.49	\$411.49	80.63%	\$331.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49326	LAP W/OMENTOPEXY ADD-ON		\$148.40	\$184.00	\$184.00	\$184.00	80.65%	\$148.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49400	AIR INJECTION INTO ABDOMEN		\$76.13	\$151.58	\$88.14	\$92.96	81.89%	\$76.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49402	REMOVE FOREIGN BODY ADBOMEN		\$686.40	\$853.22	\$853.22	\$853.22	80.45%	\$686.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49405	IMAGE CATH FLUID COLXN VISC		\$154.20	\$905.85	\$189.74	\$184.71	83.48%	\$154.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49406	IMAGE CATH FLUID PERI/RETRO		\$154.20	\$906.20	\$189.74	\$184.71	83.48%	\$154.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49407	IMAGE CATH FLUID TRNS/VGNL		\$163.13	\$770.98	\$200.68	\$197.44	82.62%	\$163.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49411	INS MARK ABD/PEL FOR RT PERQ		\$147.83	\$494.39	\$182.78	\$179.79	82.22%	\$147.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49418	INSERT TUN IP CATH PERC		\$174.35	\$1,004.53	\$195.89	\$208.52	83.61%	\$174.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49421	INS TUN IP CATH FOR DIAL OPN		\$178.90	\$221.99	\$221.99	\$221.99	80.59%	\$178.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49422	REMOVE TUNNELED IP CATH		\$175.33	\$217.50	\$217.50	\$217.50	80.61%	\$175.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49423	EXCHANGE DRAINAGE CATHETER		\$65.72	\$600.90	\$68.82	\$77.91	84.35%	\$65.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49424	ASSESS CYST CONTRAST INJECT		\$29.83	\$185.79	\$36.47	\$35.61	83.78%	\$29.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49428	LIGATION OF SHUNT		\$347.20	\$431.09	\$431.09	\$431.09	80.54%	\$347.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49429	REMOVAL OF SHUNT		\$368.80	\$456.52	\$456.52	\$456.52	80.78%	\$368.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49436	EMBEDDED IP CATH EXIT-SITE		\$459.00	\$554.37	\$187.38	\$554.37	82.80%	\$459.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49440	PLACE GASTROSTOMY TUBE PERC		\$161.76	\$849.10	\$198.89	\$193.45	83.62%	\$161.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49441	PLACE DUOD/JEJ TUBE PERC		\$189.93	\$981.43	\$236.23	\$231.43	82.07%	\$189.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49446	CHANGE G-TUBE TO G-J PERC		\$115.97	\$817.00	\$142.25	\$138.79	83.56%	\$115.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49450	REPLACE G/C TUBE PERC		\$57.48	\$610.94	\$63.78	\$68.42	84.01%	\$57.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49451	REPLACE DUOD/JEJ TUBE PERC		\$78.85	\$652.26	\$86.17	\$93.94	83.94%	\$78.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49452	REPLACE G-J TUBE PERC		\$108.39	\$790.54	\$132.61	\$129.09	83.96%	\$108.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49460	FIX G/COLON TUBE W/DEVICE		\$39.60	\$753.65	\$49.81	\$49.37	80.21%	\$39.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49465	FLUORO EXAM OF G/COLON TUBE		\$24.45	\$141.28	\$29.82	\$29.82	81.99%	\$24.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49491	RPR HERN PREMIE REDUC		\$645.14	\$801.75	\$801.75	\$801.75	80.47%	\$645.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49492	RPR ING HERN PREMIE BLOCKED		\$772.98	\$961.07	\$961.07	\$961.07	80.43%	\$772.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49495	RPR ING HERNIA BABY REDUC		\$331.84	\$412.69	\$412.69	\$412.69	80.41%	\$331.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49496	RPR ING HERNIA BABY BLOCKED		\$498.40	\$620.70	\$620.70	\$620.70	80.30%	\$498.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49500	RPR ING HERNIA INIT REDUCE		\$339.39	\$422.95	\$422.95	\$422.95	80.24%	\$339.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49501	RPR ING HERNIA INIT BLOCKED		\$491.36	\$611.12	\$611.12	\$611.12	80.40%	\$491.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Digestive System	49505	PRP I/HERN INIT REDUC >5 YR		\$423.97	\$527.47	\$527.47	\$527.47	80.38%	\$423.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49507	PRP I/HERN INIT BLOCK >5 YR		\$476.24	\$592.10	\$592.10	\$592.10	80.43%	\$476.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49520	REREPAIR ING HERNIA REDUCE		\$511.77	\$636.89	\$636.89	\$636.89	80.35%	\$511.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49521	REREPAIR ING HERNIA BLOCKED		\$578.63	\$718.96	\$718.96	\$718.96	80.48%	\$578.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49525	REPAIR ING HERNIA SLIDING		\$464.80	\$577.57	\$577.57	\$577.57	80.48%	\$464.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49540	REPAIR LUMBAR HERNIA		\$549.60	\$674.35	\$674.35	\$674.35	81.50%	\$549.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49550	RPR REM HERNIA INIT REDUCE		\$467.92	\$581.89	\$581.89	\$581.89	80.41%	\$467.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49553	RPR FEM HERNIA INIT BLOCKED		\$512.00	\$635.97	\$635.97	\$635.97	80.51%	\$512.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49555	REREPAIR FEM HERNIA REDUCE		\$489.60	\$608.55	\$608.55	\$608.55	80.45%	\$489.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49600	REPAIR UMBILICAL LESION		\$593.87	\$737.88	\$737.88	\$737.88	80.48%	\$593.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49605	REPAIR UMBILICAL LESION		\$3,905.18	\$4,841.19	\$4,841.19	\$4,841.19	80.67%	\$3,905.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49606	REPAIR UMBILICAL LESION		\$910.67	\$1,130.09	\$1,130.09	\$1,130.09	80.58%	\$910.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49650	LAP ING HERNIA REPAIR INIT		\$351.59	\$438.24	\$438.24	\$438.24	80.23%	\$351.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49651	LAP ING HERNIA REPAIR RECUR		\$458.84	\$571.51	\$571.51	\$571.51	80.29%	\$458.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49900	REPAIR OF ABDOMINAL WALL		\$664.64	\$830.25	\$830.25	\$830.25	80.05%	\$664.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49904	OMENTAL FLAP EXTRA-ABDOM		\$1,120.00	\$1,390.79	\$1,390.79	\$1,390.79	80.53%	\$1,120.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Digestive System	49905	OMENTAL FLAP INTRA-ABDOM		\$279.34	\$345.84	\$345.84	\$345.84	80.77%	\$279.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65093	REVISE EYE WITH IMPLANT		\$615.28	\$758.13	\$758.13	\$758.13	81.16%	\$615.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65103	REMOVE EYE/INSERT IMPLANT		\$729.60	\$902.23	\$902.23	\$902.23	80.87%	\$729.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65105	REMOVE EYE/ATTACH IMPLANT		\$793.84	\$980.34	\$980.34	\$980.34	80.98%	\$793.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65110	REMOVAL OF EYE		\$1,088.80	\$1,347.22	\$1,347.22	\$1,347.22	80.82%	\$1,088.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65175	REMOVAL OF OCULAR IMPLANT		\$651.20	\$802.03	\$802.03	\$802.03	81.19%	\$651.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65205	REMOVE FOREIGN BODY FROM EYE		\$23.61	\$28.83	\$29.18	\$28.83	81.88%	\$23.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65210	REMOVE FOREIGN BODY FROM EYE		\$38.70	\$38.82	\$36.02	\$38.24	101.19%	\$36.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65220	REMOVE FOREIGN BODY FROM EYE		\$35.60	\$62.05	\$41.37	\$44.45	80.08%	\$35.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65222	REMOVE FOREIGN BODY FROM EYE		\$51.79	\$69.52	\$50.59	\$64.72	80.02%	\$51.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65235	REMOVE FOREIGN BODY FROM EYE		\$598.29	\$745.57	\$745.57	\$745.57	80.25%	\$598.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65265	REMOVE FOREIGN BODY FROM EYE		\$902.40	\$1,120.69	\$1,120.69	\$1,120.69	80.52%	\$902.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65270	REPAIR OF EYE WOUND		\$115.20	\$293.89	\$142.12	\$141.44	81.45%	\$115.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65272	REPAIR OF EYE WOUND		\$439.20	\$543.49	\$358.06	\$543.49	80.81%	\$439.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	65280	REPAIR OF EYE WOUND		\$545.60	\$678.48	\$678.48	\$678.48	80.41%	\$545.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65285	REPAIR OF EYE WOUND		\$897.94	\$1,116.81	\$1,116.81	\$1,116.81	80.40%	\$897.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65286	REPAIR OF EYE WOUND		\$447.20	\$715.93	\$501.77	\$553.26	80.83%	\$447.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65400	REMOVAL OF EYE LESION		\$519.95	\$709.90	\$613.16	\$646.47	80.43%	\$519.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65420	REMOVAL OF EYE LESION		\$342.77	\$555.95	\$388.75	\$424.24	80.80%	\$342.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65426	REMOVAL OF EYE LESION		\$402.73	\$688.44	\$486.54	\$498.35	80.81%	\$402.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65430	CORNEAL SMEAR		\$93.64	\$117.20	\$102.13	\$116.44	80.42%	\$93.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65435	CURETTE/TREAT CORNEA		\$66.55	\$84.32	\$70.65	\$82.71	80.46%	\$66.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65436	CURETTE/TREAT CORNEA		\$317.60	\$395.47	\$375.49	\$395.47	80.31%	\$317.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65600	REVISION OF CORNEA		\$383.26	\$449.78	\$347.43	\$344.20	111.35%	\$326.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65710	CORNEAL TRANSPLANT		\$932.53	\$1,156.43	\$1,156.43	\$1,156.43	80.64%	\$932.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65730	CORNEAL TRANSPLANT		\$1,056.35	\$1,269.45	\$1,269.45	\$1,269.45	83.21%	\$1,056.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65750	CORNEAL TRANSPLANT		\$1,070.86	\$1,275.76	\$1,275.76	\$1,275.76	83.94%	\$1,070.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65755	CORNEAL TRANSPLANT		\$1,064.74	\$1,272.00	\$1,272.00	\$1,272.00	83.71%	\$1,064.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65756	CORNEAL TRNSPL ENDOTHELIAL		\$956.40	\$1,192.01	\$1,192.01	\$1,192.01	80.23%	\$956.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65778	COVER EYE W/MEMBRANE		\$1,093.40	\$1,142.53	\$44.01	\$1,049.62	104.17%	\$997.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65779	COVER EYE W/MEMBRANE SUTURE		\$148.00	\$1,211.57	\$118.66	\$148.07	99.96%	\$140.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65800	DRAINAGE OF EYE		\$114.54	\$121.59	\$88.99	\$112.84	101.51%	\$107.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65815	DRAINAGE OF EYE		\$485.58	\$659.49	\$484.59	\$480.86	100.98%	\$456.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65820	RELIEVE INNER EYE PRESSURE		\$679.36	\$841.56	\$841.56	\$841.56	80.73%	\$679.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65850	INCISION OF EYE		\$687.20	\$853.86	\$853.86	\$853.86	80.48%	\$687.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65855	TRABECULOPLASTY LASER SURGERY		\$226.86	\$249.93	\$207.17	\$225.19	100.74%	\$213.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65860	INCISE INNER EYE ADHESIONS		\$271.05	\$314.22	\$251.12	\$314.22	86.26%	\$271.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65865	INCISE INNER EYE ADHESIONS		\$391.60	\$487.46	\$487.46	\$487.46	80.33%	\$391.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65875	INCISE INNER EYE ADHESIONS		\$518.70	\$645.84	\$645.84	\$645.84	80.31%	\$518.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65920	REMOVE IMPLANT OF EYE		\$673.06	\$804.64	\$804.64	\$804.64	83.65%	\$673.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	65930	REMOVE BLOOD CLOT FROM EYE		\$524.00	\$651.60	\$651.60	\$651.60	80.42%	\$524.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66020	INJECTION TREATMENT OF EYE		\$145.07	\$203.37	\$133.62	\$179.76	80.70%	\$145.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66030	INJECTION TREATMENT OF EYE		\$148.27	\$183.78	\$113.67	\$183.78	80.68%	\$148.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66160	GLAUCOMA SURGERY		\$805.07	\$1,002.49	\$1,002.49	\$1,002.49	80.31%	\$805.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	66170	GLAUCOMA SURGERY		\$891.47	\$1,111.35	\$1,111.35	\$1,111.35	80.21%	\$891.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66174	TRANSLUM DIL EYE CANAL		\$636.69	\$635.06	\$635.06	\$635.06	100.26%	\$603.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66179	AQUEOUS SHUNT EYE W/O GRAFT		\$880.00	\$1,096.82	\$1,096.82	\$1,096.82	80.23%	\$880.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66180	AQUEOUS SHUNT EYE W/GRAFT		\$927.18	\$1,154.73	\$1,154.73	\$1,154.73	80.29%	\$927.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66184	REVISION OF AQUEOUS SHUNT		\$647.20	\$806.53	\$806.53	\$806.53	80.25%	\$647.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66185	REVISE AQUEOUS SHUNT EYE		\$694.53	\$865.07	\$865.07	\$865.07	80.29%	\$694.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66250	FOLLOW-UP SURGERY OF EYE		\$515.27	\$771.36	\$565.26	\$637.18	80.87%	\$515.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66600	REMOVE IRIS AND LESION		\$746.67	\$923.89	\$923.89	\$923.89	80.82%	\$746.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66625	REMOVAL OF IRIS		\$369.17	\$436.59	\$436.59	\$436.59	84.56%	\$369.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66635	REMOVAL OF IRIS		\$466.31	\$581.25	\$581.25	\$581.25	80.23%	\$466.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66680	REPAIR IRIS & CILIARY BODY		\$426.40	\$530.74	\$530.74	\$530.74	80.34%	\$426.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66682	REPAIR IRIS & CILIARY BODY		\$589.80	\$729.23	\$729.23	\$729.23	80.88%	\$589.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66710	CILIARY TRANSSLERAL THERAPY		\$318.46	\$452.32	\$397.29	\$396.35	80.35%	\$318.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66711	ECP CILIARY BODY DESTRUCTION		\$414.40	\$517.63	\$517.63	\$517.63	80.06%	\$414.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66761	REVISION OF IRIS		\$234.36	\$306.71	\$240.11	\$290.72	80.61%	\$234.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66821	AFTER CATARACT LASER SURGERY		\$263.05	\$342.81	\$318.63	\$327.17	80.40%	\$263.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66825	REPOSITION INTRAOCULAR LENS		\$687.64	\$851.15	\$851.15	\$851.15	80.79%	\$687.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66830	REMOVAL OF LENS LESION		\$611.58	\$719.14	\$719.14	\$719.14	85.04%	\$611.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66840	REMOVAL OF LENS MATERIAL		\$563.80	\$702.20	\$702.20	\$702.20	80.29%	\$563.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66850	REMOVAL OF LENS MATERIAL		\$640.91	\$798.24	\$798.24	\$798.24	80.29%	\$640.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66852	REMOVAL OF LENS MATERIAL		\$728.04	\$848.58	\$848.58	\$848.58	85.80%	\$728.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66920	EXTRACTION OF LENS		\$649.77	\$757.73	\$757.73	\$757.73	85.75%	\$649.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66982	XCAPSL CTRC RMVL CPLX WO ECP		\$742.92	\$753.70	\$753.70	\$753.70	98.57%	\$716.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66984	XCAPSL CTRC RMVL W/O ECP		\$553.03	\$550.59	\$550.59	\$550.59	100.44%	\$523.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66985	INSERT LENS PROSTHESIS		\$654.73	\$780.19	\$780.19	\$780.19	83.92%	\$654.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66986	EXCHANGE LENS PROSTHESIS		\$754.36	\$912.75	\$912.75	\$912.75	82.65%	\$754.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66989	XCPSL CTRC RMVL CPLX INSJ 1+		\$866.80	\$863.95	\$863.95	\$863.95	100.33%	\$820.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66990	OPHTHALMIC ENDOSCOPE ADD-ON		\$70.40	\$87.97	\$87.97	\$87.97	80.03%	\$70.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	66991	XCAPSL CTRC RMVL INSJ 1+		\$694.00	\$691.76	\$691.76	\$691.76	100.32%	\$657.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67005	PARTIAL REMOVAL OF EYE FLUID		\$403.91	\$485.88	\$485.88	\$485.88	83.13%	\$403.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	67010	PARTIAL REMOVAL OF EYE FLUID		\$467.67	\$554.53	\$554.53	\$554.53	84.34%	\$467.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67015	RELEASE OF EYE FLUID		\$496.00	\$616.10	\$616.10	\$616.10	80.51%	\$496.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67025	REPLACE EYE FLUID		\$514.40	\$757.05	\$639.98	\$637.46	80.70%	\$514.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67027	IMPLANT EYE DRUG SYSTEM		\$688.16	\$856.52	\$856.52	\$856.52	80.34%	\$688.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67028	INJECTION EYE DRUG		\$114.80	\$115.14	\$92.01	\$112.48	102.06%	\$106.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67031	LASER SURGERY EYE STRANDS		\$319.50	\$396.65	\$359.14	\$396.65	80.55%	\$319.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67036	REMOVAL OF INNER EYE FLUID		\$833.01	\$906.63	\$906.63	\$906.63	91.88%	\$833.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67039	LASER TREATMENT OF RETINA		\$973.19	\$969.20	\$969.20	\$969.20	100.41%	\$920.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67040	LASER TREATMENT OF RETINA		\$1,049.61	\$1,044.94	\$1,044.94	\$1,044.94	100.45%	\$992.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67041	VIT FOR MACULAR PUCKER		\$925.90	\$1,151.01	\$1,151.01	\$1,151.01	80.44%	\$925.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67042	VIT FOR MACULAR HOLE		\$925.59	\$1,151.01	\$1,151.01	\$1,151.01	80.42%	\$925.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67105	REPAIR DETACHED RETINA PC		\$299.04	\$302.82	\$279.34	\$297.95	100.37%	\$283.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67107	REPAIR DETACHED RETINA		\$1,047.56	\$1,131.75	\$1,131.75	\$1,131.75	92.56%	\$1,047.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67108	REPAIR DETACHED RETINA		\$1,203.38	\$1,197.38	\$1,197.38	\$1,197.38	100.50%	\$1,137.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67110	REPAIR DETACHED RETINA		\$714.00	\$907.85	\$825.83	\$886.73	80.52%	\$714.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67113	REPAIR RETINAL DETACH CPLX		\$1,076.82	\$1,338.84	\$1,338.84	\$1,338.84	80.43%	\$1,076.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67120	REMOVE EYE IMPLANT MATERIAL		\$451.80	\$685.91	\$563.58	\$560.26	80.64%	\$451.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67121	REMOVE EYE IMPLANT MATERIAL		\$733.36	\$913.74	\$913.74	\$913.74	80.26%	\$733.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67141	PROPH RTA DTCHMNT CRTX DTHRM		\$278.50	\$277.22	\$220.79	\$277.22	100.46%	\$263.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67145	PROPH RTA DTCHMNT PC		\$239.50	\$249.18	\$220.79	\$238.72	100.33%	\$226.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67208	TREATMENT OF RETINAL LESION		\$468.91	\$612.23	\$584.54	\$583.54	80.36%	\$468.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67210	TREATMENT OF RETINAL LESION		\$458.12	\$524.41	\$505.83	\$519.36	88.21%	\$458.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67218	TREATMENT OF RETINAL LESION		\$1,128.80	\$1,399.49	\$1,399.49	\$1,399.49	80.66%	\$1,128.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67220	TREATMENT OF CHOROID LESION		\$531.17	\$540.25	\$505.90	\$528.45	100.51%	\$502.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67221	OCULAR PHOTODYNAMIC THER		\$259.29	\$276.09	\$208.09	\$256.57	101.06%	\$243.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67228	TREATMENT X10SV RETINOPATHY		\$334.08	\$345.16	\$305.56	\$332.48	100.48%	\$315.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67229	TR RETINAL LES PRETERM INF		\$938.49	\$1,167.53	\$1,167.53	\$1,167.53	80.38%	\$938.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67311	REVISE EYE MUSCLE		\$463.62	\$462.61	\$462.61	\$462.61	100.22%	\$439.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67312	REVISE TWO EYE MUSCLES		\$614.64	\$671.07	\$671.07	\$671.07	91.59%	\$614.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67314	REVISE EYE MUSCLE		\$463.62	\$462.61	\$462.61	\$462.61	100.22%	\$439.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	67316	REVISE TWO EYE MUSCLES		\$689.87	\$719.18	\$719.18	\$719.18	95.92%	\$683.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67318	REVISE EYE MUSCLE(S)		\$602.80	\$696.06	\$696.06	\$696.06	86.60%	\$602.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67320	REVISE EYE MUSCLE(S) ADD-ON		\$206.23	\$174.22	\$174.22	\$174.22	118.38%	\$165.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67331	EYE SURGERY FOLLOW-UP ADD-ON		\$197.96	\$157.39	\$157.39	\$157.39	125.78%	\$149.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67332	REREVISE EYE MUSCLES ADD-ON		\$211.53	\$202.69	\$202.69	\$202.69	104.36%	\$192.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67334	REVISE EYE MUSCLE W/SUTURE		\$156.00	\$154.85	\$154.85	\$154.85	100.75%	\$147.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67335	EYE SUTURE DURING SURGERY		\$150.92	\$186.14	\$186.14	\$186.14	81.08%	\$150.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67340	REVISE EYE MUSCLE ADD-ON		\$293.07	\$291.02	\$291.02	\$291.02	100.70%	\$276.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67343	RELEASE EYE TISSUE		\$547.60	\$684.48	\$684.48	\$684.48	80.00%	\$547.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67345	DESTROY NERVE OF EYE MUSCLE		\$178.60	\$246.66	\$217.91	\$217.56	82.09%	\$178.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67400	EXPLORE/BIOPSY EYE SOCKET		\$859.25	\$1,060.88	\$1,060.88	\$1,060.88	80.99%	\$859.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67405	EXPLORE/DRAIN EYE SOCKET		\$751.20	\$928.88	\$928.88	\$928.88	80.87%	\$751.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67412	EXPLORE/TREAT EYE SOCKET		\$823.17	\$1,012.83	\$1,012.83	\$1,012.83	81.27%	\$823.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67413	EXPLORE/TREAT EYE SOCKET		\$801.60	\$986.51	\$986.51	\$986.51	81.26%	\$801.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67414	EXPLR/DECOMPRESS EYE SOCKET		\$1,197.60	\$1,477.58	\$1,477.58	\$1,477.58	81.05%	\$1,197.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67415	ASPIRATION ORBITAL CONTENTS		\$82.40	\$102.52	\$102.52	\$102.52	80.38%	\$82.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67420	EXPLORE/TREAT EYE SOCKET		\$1,439.20	\$1,763.97	\$1,763.97	\$1,763.97	81.59%	\$1,439.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67500	INJECT/TREAT EYE SOCKET		\$62.40	\$78.45	\$64.43	\$78.45	79.54%	\$62.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67505	INJECT/TREAT EYE SOCKET		\$76.37	\$87.29	\$72.22	\$87.29	87.49%	\$76.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67515	INJECT/TREAT EYE SOCKET		\$41.09	\$52.05	\$47.15	\$49.25	83.44%	\$41.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67550	INSERT EYE SOCKET IMPLANT		\$899.60	\$1,109.35	\$1,109.35	\$1,109.35	81.09%	\$899.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67560	REVISE EYE SOCKET IMPLANT		\$917.33	\$1,133.79	\$1,133.79	\$1,133.79	80.91%	\$917.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67570	DECOMPRESS OPTIC NERVE		\$1,053.60	\$1,299.99	\$1,299.99	\$1,299.99	81.05%	\$1,053.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67700	DRAINAGE OF EYELID ABSCESS		\$177.23	\$294.31	\$118.70	\$217.02	81.66%	\$177.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67710	INCISION OF EYELID		\$80.80	\$251.85	\$100.42	\$98.58	81.96%	\$80.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67715	INCISION OF EYELID FOLD		\$95.44	\$270.30	\$109.41	\$107.14	89.08%	\$95.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67800	REMOVE EYELID LESION		\$100.54	\$132.36	\$103.62	\$124.90	80.50%	\$100.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67801	REMOVE EYELID LESIONS		\$129.65	\$167.06	\$132.71	\$160.65	80.70%	\$129.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67805	REMOVE EYELID LESIONS		\$144.67	\$209.06	\$165.25	\$180.43	80.18%	\$144.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67808	REMOVE EYELID LESION(S)		\$300.20	\$374.42	\$374.42	\$374.42	80.18%	\$300.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	67810	BIOPSY EYELID & LID MARGIN		\$129.87	\$190.19	\$67.86	\$158.56	81.91%	\$129.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67820	REVISE EYELASHES		\$15.80	\$19.00	\$22.50	\$19.13	82.60%	\$15.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67825	REVISE EYELASHES		\$111.87	\$138.29	\$124.62	\$138.29	80.90%	\$111.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67840	REMOVE EYELID LESION		\$200.79	\$288.97	\$159.28	\$246.58	81.43%	\$200.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67850	TREAT EYELID LESION		\$163.40	\$222.97	\$133.24	\$200.13	81.65%	\$163.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67875	CLOSURE OF EYELID BY SUTURE		\$98.87	\$187.76	\$96.62	\$101.61	97.30%	\$96.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67880	REVISION OF EYELID		\$322.00	\$480.62	\$374.42	\$399.33	80.63%	\$322.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67882	REVISION OF EYELID		\$413.33	\$586.06	\$478.10	\$512.62	80.63%	\$413.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67900	REPAIR BROW DEFECT		\$410.84	\$667.58	\$511.60	\$509.98	80.56%	\$410.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67901	REPAIR EYELID DEFECT		\$534.47	\$816.37	\$598.00	\$593.76	90.01%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67902	REPAIR EYELID DEFECT		\$610.82	\$734.51	\$734.51	\$734.51	83.16%	\$610.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67903	REPAIR EYELID DEFECT		\$490.28	\$618.32	\$486.17	\$486.34	100.81%	\$462.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67904	REPAIR EYELID DEFECT		\$610.82	\$758.29	\$603.01	\$599.58	101.87%	\$569.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67908	REPAIR EYELID DEFECT		\$381.78	\$556.81	\$439.74	\$446.50	85.51%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67909	REVISE EYELID DEFECT		\$381.78	\$563.04	\$444.22	\$441.38	86.50%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67911	REVISE EYELID DEFECT		\$479.50	\$566.66	\$566.66	\$566.66	84.62%	\$479.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67912	CORRECTION EYELID W/IMPLANT		\$495.33	\$927.12	\$492.13	\$484.24	102.29%	\$460.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67916	REPAIR EYELID DEFECT		\$381.78	\$627.05	\$436.37	\$431.73	88.43%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67917	REPAIR EYELID DEFECT		\$419.94	\$640.80	\$462.73	\$482.97	86.95%	\$419.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67921	REPAIR EYELID DEFECT		\$255.47	\$494.01	\$319.80	\$315.25	81.04%	\$255.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67923	REPAIR EYELID DEFECT		\$381.78	\$627.47	\$436.79	\$432.12	88.35%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67924	REPAIR EYELID DEFECT		\$381.78	\$667.51	\$462.81	\$458.39	83.29%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67930	REPAIR EYELID WOUND		\$190.80	\$381.20	\$237.14	\$236.28	80.75%	\$190.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67935	REPAIR EYELID WOUND		\$369.84	\$614.24	\$441.78	\$458.58	80.65%	\$369.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67938	REMOVE EYELID FOREIGN BODY		\$173.26	\$280.47	\$120.29	\$210.85	82.17%	\$173.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67950	REVISION OF EYELID		\$376.48	\$600.17	\$468.73	\$466.22	80.75%	\$376.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67961	REVISION OF EYELID		\$422.98	\$604.52	\$460.81	\$524.77	80.60%	\$422.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	67966	REVISION OF EYELID		\$543.07	\$794.47	\$660.92	\$673.37	80.65%	\$543.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68020	INCISE/DRAIN EYELID LINING		\$103.07	\$124.36	\$112.09	\$124.36	82.88%	\$103.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68040	TREATMENT OF EYELID LESIONS		\$50.40	\$63.62	\$47.85	\$63.62	79.22%	\$50.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	68100	BIOPSY OF EYELID LINING		\$95.60	\$185.38	\$96.35	\$117.64	81.26%	\$95.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68110	REMOVE EYELID LINING LESION		\$146.53	\$244.04	\$151.15	\$180.82	81.04%	\$146.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68115	REMOVE EYELID LINING LESION		\$174.88	\$343.02	\$185.64	\$215.21	81.26%	\$174.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68130	REMOVE EYELID LINING LESION		\$335.60	\$568.41	\$420.49	\$416.24	80.63%	\$335.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68135	REMOVE EYELID LINING LESION		\$122.40	\$161.13	\$152.02	\$151.61	80.73%	\$122.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68200	TREAT EYELID BY INJECTION		\$31.52	\$42.43	\$34.37	\$39.17	80.46%	\$31.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68320	REVISE/GRAFT EYELID LINING		\$458.12	\$764.57	\$549.35	\$544.44	84.15%	\$458.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68330	REVISE EYELID LINING		\$517.60	\$640.62	\$467.81	\$640.62	80.80%	\$517.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68420	INCISE/DRAIN TEAR SAC		\$278.40	\$342.34	\$168.48	\$342.34	81.32%	\$278.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68440	INCISE TEAR DUCT OPENING		\$84.48	\$107.98	\$103.07	\$105.49	80.08%	\$84.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68510	BIOPSY OF TEAR GLAND		\$231.20	\$461.85	\$287.64	\$285.09	81.10%	\$231.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68525	BIOPSY OF TEAR SAC		\$207.20	\$256.76	\$256.76	\$256.76	80.70%	\$207.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68530	CLEARANCE OF TEAR DUCT		\$257.00	\$446.47	\$256.14	\$253.64	101.33%	\$240.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68700	REPAIR TEAR DUCTS		\$489.84	\$610.97	\$610.97	\$610.97	80.17%	\$489.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68720	CREATE TEAR SAC DRAIN		\$665.54	\$825.06	\$825.06	\$825.06	80.67%	\$665.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68750	CREATE TEAR DUCT DRAIN		\$706.67	\$877.48	\$877.48	\$877.48	80.53%	\$706.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68760	CLOSE TEAR DUCT OPENING		\$175.23	\$226.22	\$148.76	\$206.20	84.98%	\$175.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68761	CLOSE TEAR DUCT OPENING		\$120.95	\$150.11	\$119.62	\$149.37	80.97%	\$120.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68770	CLOSE TEAR SYSTEM FISTULA		\$510.40	\$635.08	\$635.08	\$635.08	80.37%	\$510.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68801	DILATE TEAR DUCT OPENING		\$80.14	\$99.70	\$81.82	\$99.70	80.39%	\$80.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68810	PROBE NASOLACRIMAL DUCT		\$126.62	\$165.74	\$130.34	\$157.01	80.64%	\$126.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68811	PROBE NASOLACRIMAL DUCT		\$123.71	\$137.17	\$137.17	\$137.17	90.19%	\$123.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68815	PROBE NASOLACRIMAL DUCT		\$184.37	\$387.23	\$226.34	\$226.54	81.39%	\$184.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68816	PROBE NL DUCT W/BALLOON		\$160.00	\$882.38	\$159.27	\$154.77	103.38%	\$147.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68840	EXPLORE/IRRIGATE TEAR DUCTS		\$107.81	\$137.16	\$119.98	\$133.87	80.53%	\$107.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	68841	INSJ RX ELUT IMPLT LAC CANAL		\$33.07	\$38.92	\$32.61	\$32.90	100.50%	\$31.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69000	DRAIN EXTERNAL EAR LESION		\$109.66	\$193.01	\$129.22	\$134.89	81.30%	\$109.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69005	DRAIN EXTERNAL EAR LESION		\$151.94	\$226.67	\$165.68	\$187.72	80.94%	\$151.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69020	DRAIN OUTER EAR CANAL LESION		\$172.53	\$241.77	\$148.88	\$210.02	82.15%	\$172.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69100	BIOPSY OF EXTERNAL EAR		\$79.83	\$98.71	\$46.48	\$97.44	81.93%	\$79.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	69105	BIOPSY OF EXTERNAL EAR CANAL		\$123.10	\$150.30	\$65.12	\$150.30	81.90%	\$123.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69110	REMOVE EXTERNAL EAR PARTIAL		\$273.47	\$487.48	\$338.16	\$335.78	81.44%	\$273.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69120	REMOVAL OF EXTERNAL EAR		\$325.20	\$399.89	\$399.89	\$399.89	81.32%	\$325.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69140	REMOVE EAR CANAL LESION(S)		\$759.40	\$932.46	\$932.46	\$932.46	81.44%	\$759.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69145	REMOVE EAR CANAL LESION(S)		\$242.24	\$427.94	\$266.70	\$297.00	81.56%	\$242.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69150	EXTENSIVE EAR CANAL SURGERY		\$835.20	\$1,026.88	\$1,026.88	\$1,026.88	81.33%	\$835.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69200	CLEAR OUTER EAR CANAL		\$48.52	\$82.84	\$47.79	\$60.08	80.76%	\$48.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69205	CLEAR OUTER EAR CANAL		\$79.27	\$97.86	\$97.86	\$97.86	81.01%	\$79.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69209	REMOVE IMPACTED EAR WAX UNI		\$16.28	\$16.75	\$16.75	\$16.75	97.20%	\$15.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69210	REMOVE IMPACTED EAR WAX UNI		\$35.79	\$48.96	\$32.48	\$44.78	79.92%	\$35.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69220	CLEAN OUT MASTOID CAVITY		\$55.94	\$80.58	\$51.83	\$69.29	80.74%	\$55.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69222	CLEAN OUT MASTOID CAVITY		\$163.82	\$225.14	\$141.36	\$201.50	81.30%	\$163.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69300	REVISE EXTERNAL EAR		\$496.30	\$672.40	\$481.72	\$510.00	97.31%	\$484.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69310	REBUILD OUTER EAR CANAL		\$938.60	\$1,150.14	\$1,150.14	\$1,150.14	81.61%	\$938.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69320	REBUILD OUTER EAR CANAL		\$1,305.20	\$1,600.44	\$1,600.44	\$1,600.44	81.55%	\$1,305.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69420	INCISION OF EARDRUM		\$150.85	\$198.68	\$124.72	\$185.53	81.31%	\$150.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69421	INCISION OF EARDRUM		\$126.49	\$156.34	\$156.34	\$156.34	80.91%	\$126.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69424	REMOVE VENTILATING TUBE		\$51.35	\$132.57	\$61.77	\$62.94	81.59%	\$51.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69433	CREATE EARDRUM OPENING		\$161.40	\$210.08	\$136.83	\$198.88	81.16%	\$161.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69436	CREATE EARDRUM OPENING		\$152.71	\$164.46	\$164.46	\$164.46	92.86%	\$152.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69440	EXPLORATION OF MIDDLE EAR		\$580.00	\$713.78	\$713.78	\$713.78	81.26%	\$580.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69450	EARDRUM REVISION		\$459.64	\$566.59	\$566.59	\$566.59	81.12%	\$459.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69502	MASTOIDECTOMY		\$784.00	\$966.04	\$966.04	\$966.04	81.16%	\$784.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69511	EXTENSIVE MASTOID SURGERY		\$1,052.80	\$1,291.49	\$1,291.49	\$1,291.49	81.52%	\$1,052.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69530	EXTENSIVE MASTOID SURGERY		\$1,395.20	\$1,712.76	\$1,712.76	\$1,712.76	81.46%	\$1,395.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69540	REMOVE EAR LESION		\$144.60	\$220.33	\$135.15	\$177.11	81.65%	\$144.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69550	REMOVE EAR LESION		\$892.00	\$1,093.47	\$1,093.47	\$1,093.47	81.58%	\$892.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69552	REMOVE EAR LESION		\$1,320.40	\$1,620.35	\$1,620.35	\$1,620.35	81.49%	\$1,320.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69602	MASTOID SURGERY REVISION		\$906.40	\$1,115.72	\$1,115.72	\$1,115.72	81.24%	\$906.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69610	REPAIR OF EARDRUM		\$241.11	\$394.24	\$292.24	\$297.57	81.03%	\$241.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Eye & Auditory System	69620	REPAIR OF EARDRUM		\$542.36	\$769.08	\$509.00	\$532.28	101.89%	\$505.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69631	REPAIR EARDRUM STRUCTURES		\$825.38	\$916.28	\$916.28	\$916.28	90.08%	\$825.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69632	REBUILD EARDRUM STRUCTURES		\$954.40	\$1,109.71	\$1,109.71	\$1,109.71	86.00%	\$954.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69633	REBUILD EARDRUM STRUCTURES		\$954.40	\$1,081.09	\$1,081.09	\$1,081.09	88.28%	\$954.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69635	REPAIR EARDRUM STRUCTURES		\$1,069.87	\$1,313.28	\$1,313.28	\$1,313.28	81.47%	\$1,069.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69636	REBUILD EARDRUM STRUCTURES		\$1,179.20	\$1,445.53	\$1,445.53	\$1,445.53	81.58%	\$1,179.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69637	REBUILD EARDRUM STRUCTURES		\$1,174.00	\$1,439.81	\$1,439.81	\$1,439.81	81.54%	\$1,174.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69641	REVISE MIDDLE EAR & MASTOID		\$981.53	\$1,068.30	\$1,068.30	\$1,068.30	91.88%	\$981.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69642	REVISE MIDDLE EAR & MASTOID		\$1,145.31	\$1,369.78	\$1,369.78	\$1,369.78	83.61%	\$1,145.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69643	REVISE MIDDLE EAR & MASTOID		\$1,068.94	\$1,251.65	\$1,251.65	\$1,251.65	85.40%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69644	REVISE MIDDLE EAR & MASTOID		\$1,258.80	\$1,543.23	\$1,543.23	\$1,543.23	81.57%	\$1,258.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69645	REVISE MIDDLE EAR & MASTOID		\$1,235.69	\$1,514.66	\$1,514.66	\$1,514.66	81.58%	\$1,235.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69646	REVISE MIDDLE EAR & MASTOID		\$1,310.25	\$1,609.32	\$1,609.32	\$1,609.32	81.42%	\$1,310.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69660	REVISE MIDDLE EAR BONE		\$879.22	\$945.98	\$945.98	\$945.98	92.94%	\$879.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69661	REVISE MIDDLE EAR BONE		\$1,001.07	\$1,231.50	\$1,231.50	\$1,231.50	81.29%	\$1,001.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69662	REVISE MIDDLE EAR BONE		\$958.13	\$1,181.41	\$1,181.41	\$1,181.41	81.10%	\$958.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69666	REPAIR MIDDLE EAR STRUCTURES		\$763.53	\$830.24	\$830.24	\$830.24	91.96%	\$763.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69711	REMOVE/REPAIR HEARING AID		\$698.40	\$859.59	\$859.59	\$859.59	81.25%	\$698.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69714	IMPLANT TEMPLE BONE W/STIMUL		\$509.70	\$505.87	\$505.87	\$505.87	100.76%	\$480.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69716	IMPLTJ OI IMPLT SKL TC ESP		\$638.21	\$631.38	\$631.38	\$631.38	101.08%	\$599.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69717	REVJ/RPLCMT OI IMPLT PRQ ESP		\$577.09	\$572.07	\$572.07	\$572.07	100.88%	\$543.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69719	REVJ/RPLCMT OI IMPLT TC ESP		\$673.25	\$655.45	\$655.45	\$655.45	102.72%	\$622.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69801	INCISE INNER EAR		\$199.66	\$235.46	\$125.40	\$196.27	101.73%	\$186.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69806	EXPLORE INNER EAR		\$897.54	\$940.70	\$940.70	\$940.70	95.41%	\$893.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69910	REMOVE INNER EAR & MASTOID		\$970.46	\$1,010.19	\$1,010.19	\$1,010.19	96.07%	\$959.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Eye & Auditory System	69930	IMPLANT COCHLEAR DEVICE		\$1,181.56	\$1,235.37	\$1,235.37	\$1,235.37	95.64%	\$1,173.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10030	GUIDE CATHET FLUID DRAINAGE		\$143.23	\$659.18	\$132.70	\$137.40	104.24%	\$130.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10035	PERQ DEV SOFT TISS 1ST IMAG		\$109.06	\$375.08	\$82.75	\$104.39	104.48%	\$99.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10036	PERQ DEV SOFT TISS ADD IMAG		\$39.69	\$308.18	\$41.79	\$40.23	98.67%	\$38.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10040	ACNE SURGERY		\$96.41	\$120.57	\$52.21	\$119.16	80.91%	\$96.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	10060	DRAINAGE OF SKIN ABSCESS		\$92.33	\$131.44	\$110.06	\$115.89	79.67%	\$92.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10061	DRAINAGE OF SKIN ABSCESS		\$153.53	\$220.71	\$188.81	\$192.22	79.87%	\$153.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10080	DRAINAGE OF PILONIDAL CYST		\$102.88	\$260.96	\$108.13	\$126.05	81.62%	\$102.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10081	DRAINAGE OF PILONIDAL CYST		\$151.41	\$355.50	\$173.24	\$186.55	81.16%	\$151.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10120	REMOVE FOREIGN BODY		\$98.46	\$157.93	\$108.86	\$122.85	80.15%	\$98.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10121	REMOVE FOREIGN BODY		\$160.78	\$272.25	\$186.37	\$199.15	80.73%	\$160.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10140	DRAINAGE OF HEMATOMA/FLUID		\$107.31	\$175.52	\$121.19	\$133.56	80.34%	\$107.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10160	PUNCTURE DRAINAGE OF LESION		\$85.40	\$133.98	\$98.92	\$105.62	80.85%	\$85.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	10180	COMPLEX DRAINAGE WOUND		\$151.12	\$270.33	\$181.65	\$186.66	80.96%	\$151.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11000	DEBRIDE INFECTED SKIN		\$36.54	\$61.12	\$27.47	\$46.28	78.95%	\$36.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11004	DEBRIDE GENITALIA & PERINEUM		\$451.06	\$558.45	\$558.45	\$558.45	80.77%	\$451.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11005	DEBRIDE ABDOM WALL		\$611.51	\$757.38	\$757.38	\$757.38	80.74%	\$611.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11006	DEBRIDE GENIT/PER/ABDOM WALL		\$568.46	\$686.84	\$686.84	\$686.84	82.76%	\$568.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11008	REMOVE MESH FROM ABD WALL		\$230.98	\$266.48	\$266.48	\$266.48	86.68%	\$230.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11010	DEBRIDE SKIN AT FX SITE		\$286.93	\$459.25	\$277.68	\$279.66	102.60%	\$265.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11011	DEBRIDE SKIN MUSC AT FX SITE		\$297.08	\$511.43	\$296.56	\$294.71	100.81%	\$279.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11012	DEB SKIN BONE AT FX SITE		\$418.72	\$664.54	\$414.27	\$412.90	101.41%	\$392.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11042	DEB SUBQ TISSUE 20 SQ CM/<		\$62.62	\$134.21	\$60.95	\$77.95	80.34%	\$62.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11043	DEB MUSC/FASCIA 20 SQ CM/<		\$132.67	\$237.96	\$153.48	\$165.09	80.36%	\$132.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11044	DEB BONE 20 SQ CM/<		\$184.79	\$316.63	\$224.44	\$230.24	80.26%	\$184.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11045	DEB SUBQ TISSUE ADD-ON		\$25.78	\$40.71	\$24.94	\$25.66	100.45%	\$24.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11046	DEB MUSC/FASCIA ADD-ON		\$46.21	\$73.79	\$54.16	\$54.68	84.51%	\$46.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11047	DEB BONE ADD-ON		\$77.14	\$121.56	\$95.62	\$95.79	80.53%	\$77.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11055	TRIM SKIN LESION		\$39.53	\$74.26	\$15.37	\$48.52	81.47%	\$39.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11056	TRIM SKIN LESIONS 2 TO 4		\$45.20	\$85.88	\$21.73	\$55.91	80.85%	\$45.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11057	TRIM SKIN LESIONS OVER 4		\$51.04	\$93.64	\$28.44	\$63.30	80.63%	\$51.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11102	TANGNTL BX SKIN SINGLE LES		\$81.77	\$104.34	\$37.74	\$99.74	81.98%	\$81.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11103	TANGNTL BX SKIN EA SEP/ADDL		\$40.54	\$52.06	\$21.91	\$49.95	81.15%	\$40.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11104	PUNCH BX SKIN SINGLE LESION		\$95.66	\$129.80	\$46.73	\$117.24	81.59%	\$95.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11105	PUNCH BX SKIN EA SEP/ADDL		\$43.95	\$61.62	\$25.51	\$54.49	80.66%	\$43.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	11106	INCAL BX SKN SINGLE LES		\$113.77	\$161.20	\$56.40	\$139.82	81.37%	\$113.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11107	INCAL BX SKN EA SEP/ADDL		\$52.51	\$73.68	\$30.56	\$64.40	81.54%	\$52.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11200	REMOVAL OF SKIN TAGS <W/15		\$74.71	\$95.89	\$79.06	\$93.88	79.58%	\$74.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11201	REMOVE SKIN TAGS ADD-ON		\$14.77	\$18.62	\$16.16	\$18.30	80.69%	\$14.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11300	SHAVE SKIN LESION 0.5 CM/<		\$83.12	\$104.43	\$33.98	\$101.39	81.98%	\$83.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11301	SHAVE SKIN LESION 0.6-1.0 CM		\$98.92	\$125.84	\$51.18	\$121.23	81.60%	\$98.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11302	SHAVE SKIN LESION 1.1-2.0 CM		\$111.17	\$142.01	\$59.64	\$136.65	81.35%	\$111.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11303	SHAVE SKIN LESION >2.0 CM		\$112.74	\$156.91	\$71.03	\$138.35	81.49%	\$112.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11305	SHAVE SKIN LESION 0.5 CM/<		\$77.59	\$109.04	\$37.18	\$95.00	81.67%	\$77.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11306	SHAVE SKIN LESION 0.6-1.0 CM		\$96.38	\$126.88	\$48.71	\$118.19	81.55%	\$96.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11307	SHAVE SKIN LESION 1.1-2.0 CM		\$107.52	\$143.11	\$62.15	\$131.52	81.75%	\$107.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11308	SHAVE SKIN LESION >2.0 CM		\$97.29	\$150.36	\$69.39	\$119.03	81.74%	\$97.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11310	SHAVE SKIN LESION 0.5 CM/<		\$96.18	\$120.10	\$45.44	\$117.58	81.80%	\$96.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11311	SHAVE SKIN LESION 0.6-1.0 CM		\$109.92	\$141.51	\$62.65	\$135.13	81.34%	\$109.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11312	SHAVE SKIN LESION 1.1-2.0 CM		\$124.91	\$160.69	\$74.11	\$152.84	81.73%	\$124.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11313	SHAVE SKIN LESION >2.0 CM		\$151.80	\$186.74	\$95.95	\$186.74	81.29%	\$151.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11400	EXC TR-EXT B9+MARG 0.5 CM<		\$102.78	\$133.40	\$87.13	\$127.35	80.71%	\$102.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11401	EXC TR-EXT B9+MARG 0.6-1 CM		\$119.86	\$161.97	\$108.69	\$148.21	80.87%	\$119.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11402	EXC TR-EXT B9+MARG 1.1-2 CM		\$131.21	\$178.32	\$118.73	\$162.70	80.64%	\$131.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11403	EXC TR-EXT B9+MARG 2.1-3CM		\$152.66	\$204.82	\$153.65	\$189.52	80.55%	\$152.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11404	EXC TR-EXT B9+MARG 3.1-4 CM		\$166.14	\$231.51	\$168.41	\$205.82	80.72%	\$166.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11406	EXC TR-EXT B9+MARG >4.0 CM		\$230.45	\$327.31	\$252.30	\$286.70	80.38%	\$230.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11420	EXC H-F-NK-SP B9+MARG 0.5/<		\$97.83	\$131.60	\$84.63	\$120.32	81.31%	\$97.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11421	EXC H-F-NK-SP B9+MARG 0.6-1		\$121.11	\$165.47	\$111.84	\$149.68	80.91%	\$121.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11422	EXC H-F-NK-SP B9+MARG 1.1-2		\$138.54	\$185.53	\$139.62	\$171.50	80.78%	\$138.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11423	EXC H-F-NK-SP B9+MARG 2.1-3		\$156.36	\$212.20	\$161.03	\$194.72	80.30%	\$156.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11424	EXC H-F-NK-SP B9+MARG 3.1-4		\$173.45	\$245.17	\$184.88	\$217.17	79.87%	\$173.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11426	EXC H-F-NK-SP B9+MARG >4 CM		\$237.95	\$335.80	\$271.65	\$293.37	81.11%	\$237.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11440	EXC FACE-MM B9+MARG 0.5 CM/<		\$109.57	\$149.37	\$111.17	\$135.65	80.77%	\$109.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11441	EXC FACE-MM B9+MARG 0.6-1 CM		\$132.60	\$180.58	\$137.46	\$164.34	80.69%	\$132.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	11442	EXC FACE-MM B9+MARG 1.1-2 CM		\$146.02	\$200.25	\$151.17	\$180.89	80.72%	\$146.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11443	EXC FACE-MM B9+MARG 2.1-3 CM		\$171.75	\$235.24	\$183.37	\$212.64	80.77%	\$171.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11444	EXC FACE-MM B9+MARG 3.1-4 CM		\$206.21	\$291.25	\$229.91	\$255.83	80.60%	\$206.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11446	EXC FACE-MM B9+MARG >4 CM		\$282.55	\$393.24	\$321.74	\$351.73	80.33%	\$282.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11450	REMOVAL SWEAT GLAND LESION		\$301.55	\$444.58	\$267.92	\$296.55	101.69%	\$281.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11451	REMOVAL SWEAT GLAND LESION		\$339.33	\$540.39	\$337.44	\$332.73	101.98%	\$316.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11462	REMOVAL SWEAT GLAND LESION		\$287.43	\$432.74	\$255.38	\$355.12	80.94%	\$287.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11470	REMOVAL SWEAT GLAND LESION		\$267.23	\$469.44	\$292.78	\$288.98	92.47%	\$267.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11471	REMOVAL SWEAT GLAND LESION		\$286.00	\$562.43	\$358.08	\$356.19	80.29%	\$286.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11600	EXC TR-EXT MAL+MARG 0.5 CM/<		\$165.60	\$204.46	\$124.89	\$204.46	80.99%	\$165.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11601	EXC TR-EXT MAL+MARG 0.6-1 CM		\$191.03	\$236.52	\$151.00	\$236.52	80.77%	\$191.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11602	EXC TR-EXT MAL+MARG 1.1-2 CM		\$198.66	\$253.05	\$164.02	\$245.88	80.79%	\$198.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11603	EXC TR-EXT MAL+MARG 2.1-3 CM		\$218.47	\$287.30	\$195.47	\$270.06	80.90%	\$218.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11604	EXC TR-EXT MAL+MARG 3.1-4 CM		\$238.45	\$319.83	\$214.67	\$294.97	80.84%	\$238.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11606	EXC TR-EXT MAL+MARG >4 CM		\$296.23	\$458.78	\$317.52	\$367.70	80.56%	\$296.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11620	EXC H-F-NK-SP MAL+MARG 0.5/<		\$133.60	\$205.42	\$125.86	\$164.84	81.05%	\$133.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11621	EXC S/N/H/F/G MAL+MRG 0.6-1		\$192.00	\$237.14	\$151.61	\$237.14	80.97%	\$192.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11622	EXC S/N/H/F/G MAL+MRG 1.1-2		\$206.11	\$261.65	\$171.92	\$255.63	80.63%	\$206.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11623	EXC S/N/H/F/G MAL+MRG 2.1-3		\$230.27	\$304.64	\$211.41	\$284.92	80.82%	\$230.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11624	EXC S/N/H/F/G MAL+MRG 3.1-4		\$230.29	\$346.44	\$239.88	\$285.03	80.80%	\$230.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11626	EXC S/N/H/F/G MAL+MRG >4 CM		\$286.00	\$415.28	\$291.90	\$353.23	80.97%	\$286.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11640	EXC F/E/E/N/L MAL+MRG 0.5CM<		\$117.64	\$210.79	\$129.47	\$145.67	80.76%	\$117.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11641	EXC F/E/E/N/L MAL+MRG 0.6-1		\$185.46	\$244.99	\$158.06	\$229.28	80.89%	\$185.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11642	EXC F/E/E/N/L MAL+MRG 1.1-2		\$220.30	\$276.74	\$184.55	\$273.08	80.67%	\$220.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11643	EXC F/E/E/N/L MAL+MRG 2.1-3		\$237.50	\$323.71	\$229.42	\$293.98	80.79%	\$237.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11644	EXC F/E/E/N/L MAL+MRG 3.1-4		\$306.40	\$398.94	\$283.62	\$379.66	80.70%	\$306.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11646	EXC F/E/E/N/L MAL+MRG >4 CM		\$382.67	\$514.91	\$390.13	\$473.15	80.88%	\$382.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11719	TRIM NAIL(S) ANY NUMBER		\$10.29	\$14.74	\$7.38	\$12.60	81.63%	\$10.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11720	DEBRIDE NAIL 1-5		\$20.86	\$34.00	\$14.02	\$20.84	100.11%	\$19.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11721	DEBRIDE NAIL 6 OR MORE		\$36.64	\$45.86	\$23.43	\$38.94	94.10%	\$36.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	11730	REMOVAL OF NAIL PLATE		\$78.54	\$119.03	\$53.83	\$97.13	80.86%	\$78.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11732	REMOVE NAIL PLATE ADD-ON		\$24.07	\$33.91	\$16.73	\$29.44	81.77%	\$24.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11740	DRAIN BLOOD FROM UNDER NAIL		\$29.20	\$60.21	\$33.22	\$36.66	79.64%	\$29.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11750	REMOVAL OF NAIL BED		\$127.42	\$166.31	\$103.91	\$159.29	79.99%	\$127.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11755	BIOPSY NAIL UNIT		\$100.64	\$126.02	\$60.47	\$124.03	81.14%	\$100.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11760	REPAIR OF NAIL BED		\$114.54	\$191.02	\$111.45	\$112.50	101.82%	\$106.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11765	EXCISION OF NAIL FOLD TOE		\$110.22	\$172.68	\$95.57	\$137.19	80.34%	\$110.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11770	REMOVE PILONIDAL CYST SIMPLE		\$162.75	\$365.50	\$187.79	\$199.71	81.49%	\$162.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11771	REMOVE PILONIDAL CYST EXTEN		\$371.52	\$646.33	\$457.75	\$459.80	80.80%	\$371.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11772	REMOVE PILONIDAL CYST COMPL		\$480.93	\$792.16	\$590.26	\$593.07	81.09%	\$480.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11900	INJECT SKIN LESIONS </W 7		\$42.78	\$59.41	\$29.97	\$53.36	80.17%	\$42.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11901	INJECT SKIN LESIONS >7		\$58.17	\$72.16	\$45.52	\$70.32	82.72%	\$58.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11921	CORRECT SKN COLOR 6.1-20.0CM		\$192.80	\$228.27	\$131.53	\$189.05	101.98%	\$179.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11922	CORRECT SKIN COLOR EA 20.0CM		\$56.12	\$63.08	\$28.73	\$63.08	88.96%	\$56.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11951	TX CONTOUR DEFECTS 1.1-5.0CC		\$74.00	\$111.18	\$72.62	\$73.25	101.03%	\$69.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11952	TX CONTOUR DEFECTS 5.1-10CC		\$103.02	\$148.31	\$102.04	\$102.60	100.41%	\$97.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11960	INSERT TISSUE EXPANDER(S)		\$837.07	\$1,039.82	\$1,039.82	\$1,039.82	80.50%	\$837.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11970	RPLCMT TISS XPNDR PERM IMPLT		\$460.75	\$572.45	\$572.45	\$572.45	80.49%	\$460.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11971	RMVL TIS XPNDR WO INSJ IMPLT		\$453.30	\$564.72	\$564.72	\$564.72	80.27%	\$453.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11976	REMOVE CONTRACEPTIVE CAPSULE		\$115.07	\$148.25	\$92.17	\$131.70	87.37%	\$115.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11980	IMPLANT HORMONE PELLETT(S)		\$93.53	\$96.42	\$55.06	\$93.50	100.04%	\$88.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11981	INSERT DRUG IMPLANT DEVICE		\$98.12	\$102.92	\$62.26	\$96.03	102.18%	\$91.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11982	REMOVE DRUG IMPLANT DEVICE		\$111.99	\$113.26	\$72.60	\$108.26	103.45%	\$102.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	11983	REMOVE/INSERT DRUG IMPLANT		\$140.71	\$144.25	\$102.54	\$139.26	101.04%	\$132.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12001	RPR S/N/AX/GEN/TRNK 2.5CM/<		\$38.44	\$97.08	\$44.51	\$47.63	80.71%	\$38.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12002	RPR S/N/AX/GEN/TRNK2.6-7.5CM		\$53.47	\$117.22	\$58.33	\$60.72	88.05%	\$53.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12004	RPR S/N/AX/GEN/TRK7.6-12.5CM		\$68.72	\$136.22	\$72.78	\$73.79	93.13%	\$68.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12005	RPR S/N/A/GEN/TRK12.6-20.0CM		\$84.00	\$181.22	\$93.24	\$95.54	87.92%	\$84.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12006	RPR S/N/A/GEN/TRK20.1-30.0CM		\$99.25	\$208.80	\$114.16	\$115.96	85.59%	\$99.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12007	RPR S/N/AX/GEN/TRNK >30.0 CM		\$115.04	\$236.30	\$142.02	\$142.71	80.61%	\$115.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	12011	RPR F/E/E/N/L/M 2.5 CM/<		\$46.02	\$115.29	\$55.00	\$56.73	81.13%	\$46.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12013	RPR F/E/E/N/L/M 2.6-5.0 CM		\$59.86	\$119.75	\$57.01	\$58.78	101.84%	\$55.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12014	RPR F/E/E/N/L/M 5.1-7.5 CM		\$74.63	\$145.96	\$73.76	\$73.59	101.41%	\$69.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12015	RPR F/E/E/N/L/M 7.6-12.5 CM		\$91.64	\$175.94	\$92.52	\$97.48	94.01%	\$91.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12016	RPR FE/E/EN/L/M 12.6-20.0 CM		\$106.88	\$222.56	\$125.47	\$124.61	85.77%	\$106.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12017	RPR FE/E/EN/L/M 20.1-30.0 CM		\$121.60	\$151.28	\$151.28	\$151.28	80.38%	\$121.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12020	CLOSURE OF SPLIT WOUND		\$180.74	\$309.36	\$191.23	\$222.90	81.09%	\$180.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12021	CLOSURE OF SPLIT WOUND		\$135.09	\$182.36	\$143.81	\$167.50	80.65%	\$135.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12031	INTMD RPR S/A/T/EXT 2.5 CM/<		\$180.57	\$272.38	\$154.26	\$222.26	81.24%	\$180.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12032	INTMD RPR S/A/T/EXT 2.6-7.5		\$209.39	\$314.42	\$193.84	\$258.36	81.05%	\$209.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12034	INTMD RPR S/TR/EXT 7.6-12.5		\$186.45	\$345.51	\$208.11	\$230.32	80.95%	\$186.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12035	INTMD RPR S/A/T/EXT 12.6-20		\$201.21	\$400.47	\$243.79	\$248.18	81.07%	\$201.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12036	INTMD RPR S/A/T/EXT 20.1-30		\$234.89	\$444.47	\$283.93	\$290.96	80.73%	\$234.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12037	INTMD RPR S/TR/EXT >30.0 CM		\$264.25	\$498.39	\$329.45	\$328.28	80.50%	\$264.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12041	INTMD RPR N-HF/GENIT 2.5CM/<		\$155.25	\$272.86	\$147.37	\$190.86	81.34%	\$155.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12042	INTMD RPR N-HF/GENIT2.6-7.5		\$194.80	\$320.37	\$198.74	\$240.51	80.99%	\$194.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12044	INTMD RPR N-HF/GENIT7.6-12.5		\$184.26	\$395.28	\$216.87	\$227.90	80.85%	\$184.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12045	INTMD RPR N-HF/GENIT12.6-20		\$224.00	\$425.24	\$277.32	\$275.18	81.40%	\$224.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12046	INTMD RPR N-HF/GENIT20.1-30		\$257.60	\$513.36	\$320.93	\$318.37	80.91%	\$257.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12051	INTMD RPR FACE/MM 2.5 CM/<		\$181.30	\$293.17	\$172.24	\$223.15	81.25%	\$181.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12052	INTMD RPR FACE/MM 2.6-5.0 CM		\$196.77	\$325.71	\$202.33	\$242.29	81.21%	\$196.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12053	INTMD RPR FACE/MM 5.1-7.5 CM		\$186.78	\$375.36	\$217.98	\$229.65	81.33%	\$186.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12054	INTMD RPR FACE/MM 7.6-12.5CM		\$182.31	\$394.29	\$221.84	\$223.27	81.65%	\$182.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12055	INTMD RPR FACE/MM 12.6-20 CM		\$243.31	\$517.50	\$304.38	\$296.95	81.94%	\$243.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	12057	INTMD RPR FACE/MM >30.0 CM		\$341.20	\$621.58	\$423.19	\$417.67	81.69%	\$341.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13100	CMPLX RPR TRUNK 1.1-2.5 CM		\$248.52	\$351.23	\$202.26	\$305.35	81.39%	\$248.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13101	CMPLX RPR TRUNK 2.6-7.5 CM		\$276.43	\$409.06	\$249.58	\$339.49	81.43%	\$276.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13102	CMPLX RPR TRUNK ADDL 5CM/<		\$65.19	\$118.97	\$71.30	\$80.11	81.37%	\$65.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13120	CMPLX RPR S/A/L 1.1-2.5 CM		\$262.52	\$365.80	\$234.36	\$322.38	81.43%	\$262.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13121	CMPLX RPR S/A/L 2.6-7.5 CM		\$285.01	\$437.73	\$259.67	\$350.56	81.30%	\$285.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	13122	CMPLEX RPR S/A/L ADDL 5 CM/>		\$72.17	\$129.38	\$82.06	\$84.71	85.20%	\$72.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13131	CMPLEX RPR F/C/C/M/N/AX/G/H/F		\$274.49	\$399.30	\$243.68	\$337.64	81.30%	\$274.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13132	CMPLEX RPR F/C/C/M/N/AX/G/H/F		\$331.48	\$483.63	\$304.17	\$407.44	81.36%	\$331.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13133	CMPLEX RPR F/C/C/M/N/AX/G/H/F		\$106.51	\$171.20	\$124.93	\$127.33	83.65%	\$106.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13151	CMPLEX RPR E/N/E/L 1.1-2.5 CM		\$300.37	\$434.24	\$279.66	\$369.11	81.38%	\$300.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13152	CMPLEX RPR E/N/E/L 2.6-7.5 CM		\$334.64	\$509.31	\$336.85	\$411.95	81.23%	\$334.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13153	CMPLEX RPR E/N/E/L ADDL 5CM/<		\$115.63	\$187.84	\$135.61	\$142.07	81.39%	\$115.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	13160	LATE CLOSURE OF WOUND		\$647.30	\$803.78	\$803.78	\$803.78	80.53%	\$647.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14000	TIS TRNFR TRUNK 10 SQ CM/<		\$425.00	\$655.58	\$514.67	\$528.47	80.42%	\$425.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14001	TIS TRNFR TRUNK 10.1-30SQCM		\$541.10	\$832.50	\$663.55	\$672.62	80.45%	\$541.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14020	TIS TRNFR S/A/L 10 SQ CM/<		\$473.80	\$725.78	\$579.27	\$589.44	80.38%	\$473.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14021	TIS TRNFR S/A/L 10.1-30 SQCM		\$598.55	\$891.81	\$720.76	\$744.61	80.38%	\$598.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14040	TIS TRNFR F/C/C/M/N/A/G/H/F		\$522.52	\$782.08	\$635.21	\$650.00	80.39%	\$522.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14041	TIS TRNFR F/C/C/M/N/A/G/H/F		\$685.89	\$948.84	\$774.28	\$853.40	80.37%	\$685.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14060	TIS TRNFR E/N/E/L 10 SQ CM/<		\$562.53	\$789.40	\$676.88	\$699.41	80.43%	\$562.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14061	TIS TRNFR E/N/E/L10.1-30SQCM		\$754.90	\$1,024.57	\$831.79	\$940.34	80.28%	\$754.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14301	TIS TRNFR ANY 30.1-60 SQ CM		\$730.22	\$1,107.97	\$878.73	\$903.93	80.78%	\$730.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14302	TIS TRNFR ADDL 30 SQ CM		\$173.10	\$213.63	\$213.63	\$213.63	81.03%	\$173.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	14350	FILLETED FINGER/TOE FLAP		\$551.02	\$686.07	\$686.07	\$686.07	80.32%	\$551.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15002	WOUND PREP TRK/ARM/LEG		\$223.93	\$350.60	\$218.46	\$219.83	101.86%	\$208.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15003	WOUND PREP ADDL 100 CM		\$44.92	\$70.36	\$44.42	\$44.36	101.27%	\$42.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15004	WOUND PREP F/N/HF/G		\$266.13	\$400.68	\$258.72	\$261.75	101.67%	\$248.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15005	WND PREP F/N/HF/G ADDL CM		\$88.94	\$117.10	\$88.36	\$88.23	100.80%	\$83.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15040	HARVEST CULTURED SKIN GRAFT		\$124.72	\$268.88	\$125.16	\$121.84	102.36%	\$115.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15100	SKIN SPLT GRFT TRNK/ARM/LEG		\$583.48	\$886.55	\$724.61	\$721.48	80.87%	\$583.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15101	SKIN SPLT GRFT T/A/L ADD-ON		\$89.08	\$189.45	\$110.24	\$109.20	81.58%	\$89.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15110	EPIDRM AUTOGRFT TRNK/ARM/LEG		\$627.61	\$846.52	\$720.68	\$717.08	87.52%	\$627.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15111	EPIDRM AUTOGRFT T/A/L ADD-ON		\$98.87	\$112.89	\$99.93	\$101.19	97.71%	\$96.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15115	EPIDRM A-GRFT FACE/NCK/HF/G		\$589.83	\$822.47	\$702.59	\$699.63	84.31%	\$589.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15116	EPIDRM A-GRFT F/N/HF/G ADDL		\$128.28	\$153.00	\$136.18	\$136.55	93.94%	\$128.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	15120	SKN SPLT A-GRFT FAC/NCK/HF/G		\$561.68	\$864.65	\$698.86	\$696.32	80.66%	\$561.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15121	SKN SPLT A-GRFT F/N/HF/G ADD		\$114.54	\$211.32	\$131.40	\$131.48	87.12%	\$114.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15130	DERM AUTOGRAFT TRNK/ARM/LEG		\$598.40	\$737.48	\$608.14	\$737.48	81.14%	\$598.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15135	DERM AUTOGRAFT FACE/NCK/HF/G		\$620.00	\$890.72	\$768.39	\$761.72	81.39%	\$620.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15150	CULT SKIN GRFT T/ARM/LEG		\$516.80	\$711.95	\$642.55	\$639.72	80.78%	\$516.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15151	CULT SKIN GRFT T/A/L ADDL		\$104.23	\$117.25	\$106.74	\$107.37	97.08%	\$102.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15152	CULT SKIN GRAFT T/A/L +%		\$127.88	\$146.92	\$137.11	\$137.22	93.19%	\$127.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15200	SKIN FULL GRAFT TRUNK		\$548.27	\$861.39	\$683.68	\$681.61	80.44%	\$548.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15220	SKIN FULL GRAFT SCLP/ARM/LEG		\$498.67	\$792.48	\$621.78	\$619.56	80.49%	\$498.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15240	SKIN FULL GRFT FACE/GENIT/HF		\$664.71	\$955.37	\$812.01	\$826.24	80.45%	\$664.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15241	SKIN FULL GRAFT ADD-ON		\$112.36	\$178.20	\$106.35	\$111.67	100.62%	\$106.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15260	SKIN FULL GRAFT EEN & LIPS		\$768.30	\$1,027.16	\$860.67	\$955.41	80.42%	\$768.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15261	SKIN FULL GRAFT ADD-ON		\$137.00	\$209.39	\$135.09	\$134.59	101.79%	\$127.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15271	SKIN SUB GRAFT TRNK/ARM/LEG		\$86.60	\$158.39	\$83.73	\$85.99	100.71%	\$81.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15272	SKIN SUB GRAFT T/A/L ADD-ON		\$16.80	\$25.07	\$16.66	\$17.01	98.78%	\$16.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15273	SKIN SUB GRFT T/ARM/LG CHILD		\$195.46	\$314.52	\$193.24	\$191.69	101.97%	\$182.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15274	SKN SUB GRFT T/A/L CHILD ADD		\$44.56	\$82.70	\$43.79	\$43.11	103.36%	\$40.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15275	SKIN SUB GRAFT FACE/NK/HF/G		\$103.77	\$163.03	\$92.92	\$103.00	100.74%	\$97.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15276	SKIN SUB GRAFT F/N/HF/G ADDL		\$24.98	\$32.72	\$24.66	\$24.65	101.34%	\$23.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15277	SKN SUB GRFT F/N/HF/G CHILD		\$224.35	\$346.82	\$220.28	\$218.78	102.55%	\$207.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15278	SKN SUB GRFT F/N/HF/G CH ADD		\$55.56	\$96.54	\$54.83	\$54.40	102.14%	\$51.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15570	SKIN PEDICLE FLAP TRUNK		\$595.20	\$925.95	\$737.37	\$735.42	80.93%	\$595.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15574	PEDCLE FH/CH/CH/M/N/AX/G/H/F		\$599.94	\$906.24	\$750.61	\$751.19	79.86%	\$599.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15576	PEDICLE E/N/E/L/NTRORAL		\$572.51	\$800.68	\$658.02	\$709.13	80.73%	\$572.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15600	DELAY FLAP TRUNK		\$175.20	\$352.43	\$219.59	\$217.20	80.66%	\$175.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15610	DELAY FLAP ARMS/LEGS		\$202.40	\$382.62	\$252.22	\$250.25	80.88%	\$202.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15620	DELAY FLAP F/C/C/N/AX/G/H/F		\$269.60	\$463.49	\$335.90	\$333.78	80.77%	\$269.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15630	DELAY FLAP EYE/NOS/EAR/LIP		\$311.35	\$479.35	\$353.51	\$386.56	80.54%	\$311.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15731	FOREHEAD FLAP W/VASC PEDICLE		\$815.30	\$1,145.76	\$1,010.81	\$1,009.37	80.77%	\$815.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15733	MUSC MYOQ/FSCQ FLP H&N PEDCL		\$964.21	\$1,038.60	\$1,038.60	\$1,038.60	92.84%	\$964.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	15734	MUSCLE-SKIN GRAFT TRUNK		\$1,213.34	\$1,505.76	\$1,505.76	\$1,505.76	80.58%	\$1,213.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15736	MUSCLE-SKIN GRAFT ARM		\$990.40	\$1,231.19	\$1,231.19	\$1,231.19	80.44%	\$990.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15738	MUSCLE-SKIN GRAFT LEG		\$1,030.20	\$1,275.41	\$1,275.41	\$1,275.41	80.77%	\$1,030.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15740	ISLAND PEDICLE FLAP GRAFT		\$687.20	\$1,039.11	\$855.44	\$855.25	80.35%	\$687.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15750	NEUROVASCULAR PEDICLE FLAP		\$754.27	\$946.21	\$946.21	\$946.21	79.72%	\$754.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15756	FREE MYO/SKIN FLAP MICROVASC		\$2,215.77	\$2,290.01	\$2,290.01	\$2,290.01	96.76%	\$2,175.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15757	FREE SKIN FLAP MICROVASC		\$1,844.09	\$2,275.57	\$2,275.57	\$2,275.57	81.04%	\$1,844.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15758	FREE FASCIAL FLAP MICROVASC		\$1,837.97	\$2,266.66	\$2,266.66	\$2,266.66	81.09%	\$1,837.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15760	COMPOSITE SKIN GRAFT		\$572.86	\$868.04	\$709.96	\$709.70	80.72%	\$572.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15769	GRFG AUTOL SOFT TISS DIR EXC		\$491.03	\$488.06	\$488.06	\$488.06	100.61%	\$463.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15770	DERMA-FAT-FASCIA GRAFT		\$551.89	\$687.57	\$687.57	\$687.57	80.27%	\$551.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15771	GRFG AUTOL FAT LIPO 50 CC/<		\$519.77	\$626.52	\$521.71	\$519.77	100.00%	\$493.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15772	GRFG AUTOL FAT LIPO EA ADDL		\$148.97	\$194.34	\$147.37	\$148.02	100.64%	\$140.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15773	GRFG AUTOL FAT LIPO 25 CC/<		\$512.83	\$611.20	\$510.60	\$508.81	100.79%	\$483.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15774	GFRG AUTOL FAT LIPO EA ADDL		\$144.84	\$189.02	\$142.40	\$143.00	101.29%	\$135.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15777	ACELLULAR DERM MATRIX IMPLT		\$185.93	\$212.47	\$212.47	\$212.47	87.51%	\$185.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15786	ABRASION LESION SINGLE		\$192.00	\$237.01	\$136.76	\$237.01	81.01%	\$192.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15819	PLASTIC SURGERY NECK		\$655.20	\$813.20	\$813.20	\$813.20	80.57%	\$655.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15822	REVISION OF UPPER EYELID		\$340.90	\$476.74	\$409.44	\$408.58	83.44%	\$340.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15823	REVISION OF UPPER EYELID		\$454.97	\$640.83	\$564.42	\$566.26	80.35%	\$454.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15830	EXC SKIN ABD		\$953.56	\$1,182.41	\$1,182.41	\$1,182.41	80.65%	\$953.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15832	EXCISE EXCESSIVE SKIN THIGH		\$828.06	\$934.38	\$934.38	\$934.38	88.62%	\$828.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15836	EXCISE EXCESSIVE SKIN ARM		\$687.18	\$810.60	\$810.60	\$810.60	84.77%	\$687.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15839	EXCISE EXCESS SKIN & TISSUE		\$604.53	\$912.99	\$750.00	\$749.87	80.62%	\$604.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15840	NERVE PALSY FASCIAL GRAFT		\$916.23	\$1,024.96	\$1,024.96	\$1,024.96	89.39%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15851	REMOVE SUTURES DIFF SURGEON		\$47.80	\$57.04	\$65.80	\$59.35	80.54%	\$47.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15852	DRESSING CHANGE NOT FOR BURN		\$36.79	\$44.28	\$44.28	\$44.28	83.09%	\$36.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15860	TEST FOR BLOOD FLOW IN GRAFT		\$96.97	\$105.06	\$105.06	\$105.06	92.30%	\$96.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15920	REMOVAL OF TAIL BONE ULCER		\$524.80	\$641.10	\$641.10	\$641.10	81.86%	\$524.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15931	REMOVE SACRUM PRESSURE SORE		\$574.00	\$711.86	\$711.86	\$711.86	80.63%	\$574.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	15933	REMOVE SACRUM PRESSURE SORE		\$711.47	\$884.80	\$884.80	\$884.80	80.41%	\$711.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15936	REMOVE SACRUM PRESSURE SORE		\$823.08	\$905.52	\$905.52	\$905.52	90.90%	\$823.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15937	REMOVE SACRUM PRESSURE SORE		\$962.44	\$1,046.09	\$1,046.09	\$1,046.09	92.00%	\$962.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15940	REMOVE HIP PRESSURE SORE		\$577.60	\$717.43	\$717.43	\$717.43	80.51%	\$577.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15946	REMOVE HIP PRESSURE SORE		\$1,315.10	\$1,622.01	\$1,622.01	\$1,622.01	81.08%	\$1,315.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15950	REMOVE THIGH PRESSURE SORE		\$524.00	\$650.11	\$650.11	\$650.11	80.60%	\$524.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15956	REMOVE THIGH PRESSURE SORE		\$1,068.94	\$1,198.19	\$1,198.19	\$1,198.19	89.21%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	15958	REMOVE THIGH PRESSURE SORE		\$1,107.12	\$1,187.41	\$1,187.41	\$1,187.41	93.24%	\$1,107.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16000	INITIAL TREATMENT OF BURN(S)		\$39.87	\$81.74	\$45.28	\$50.25	79.34%	\$39.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16020	DRESS/DEBRID P-THICK BURN S		\$48.66	\$88.82	\$56.92	\$60.72	80.14%	\$48.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16025	DRESS/DEBRID P-THICK BURN M		\$89.39	\$161.36	\$112.28	\$111.61	80.09%	\$89.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16030	DRESS/DEBRID P-THICK BURN L		\$106.02	\$201.93	\$132.18	\$131.84	80.41%	\$106.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16035	INCISION OF BURN SCAB INITI		\$190.87	\$194.24	\$194.24	\$194.24	98.27%	\$184.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	16036	ESCHAROTOMY ADDL INCISION		\$73.67	\$81.15	\$81.15	\$81.15	90.79%	\$73.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17000	DESTRUCT PREMALG LESION		\$55.66	\$70.14	\$56.82	\$69.64	79.93%	\$55.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17003	DESTRUCT PREMALG LES 2-14		\$6.89	\$6.95	\$2.04	\$6.82	101.04%	\$6.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17004	DESTROY PREMAL LESIONS 15/>		\$152.33	\$173.48	\$100.22	\$171.13	89.01%	\$152.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17106	DESTRUCTION OF SKIN LESIONS		\$226.33	\$355.78	\$282.52	\$282.29	80.18%	\$226.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17107	DESTRUCTION OF SKIN LESIONS		\$367.01	\$461.69	\$367.75	\$366.47	100.15%	\$348.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17108	DESTRUCTION OF SKIN LESIONS		\$536.32	\$652.97	\$536.95	\$536.28	100.01%	\$509.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17110	DESTRUCT B9 LESION 1-14		\$93.14	\$118.65	\$70.98	\$115.43	80.69%	\$93.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17111	DESTRUCT LESION 15 OR MORE		\$109.03	\$138.35	\$85.77	\$135.38	80.53%	\$109.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17250	CHEM CAUT OF GRANLTJ TISSUE		\$56.87	\$90.48	\$38.26	\$69.82	81.46%	\$56.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17260	DESTRUCTION OF SKIN LESIONS		\$60.98	\$103.32	\$72.12	\$75.42	80.85%	\$60.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17261	DESTRUCTION OF SKIN LESIONS		\$118.83	\$154.23	\$89.03	\$147.70	80.45%	\$118.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17262	DESTRUCTION OF SKIN LESIONS		\$146.28	\$184.86	\$112.30	\$181.05	80.79%	\$146.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17263	DESTRUCTION OF SKIN LESIONS		\$154.78	\$199.82	\$124.10	\$191.76	80.72%	\$154.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17264	DESTRUCTION OF SKIN LESIONS		\$172.80	\$214.16	\$132.49	\$214.16	80.69%	\$172.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17270	DESTRUCTION OF SKIN LESIONS		\$84.17	\$155.25	\$97.42	\$104.32	80.68%	\$84.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17271	DESTRUCTION OF SKIN LESIONS		\$139.26	\$172.45	\$106.90	\$172.45	80.75%	\$139.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	17272	DESTRUCTION OF SKIN LESIONS		\$152.67	\$195.29	\$123.08	\$189.20	80.69%	\$152.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17280	DESTRUCTION OF SKIN LESIONS		\$118.73	\$146.16	\$88.68	\$139.70	84.99%	\$118.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17281	DESTRUCTION OF SKIN LESIONS		\$150.27	\$186.25	\$120.00	\$186.25	80.68%	\$150.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17282	DESTRUCTION OF SKIN LESIONS		\$171.60	\$212.54	\$138.23	\$212.54	80.74%	\$171.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17283	DESTRUCTION OF SKIN LESIONS		\$202.40	\$250.72	\$172.55	\$250.72	80.73%	\$202.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17311	MOHS 1 STAGE H/N/HF/G		\$523.08	\$702.71	\$354.64	\$648.97	80.60%	\$523.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17312	MOHS ADDL STAGE		\$316.82	\$427.42	\$188.71	\$392.69	80.68%	\$316.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17313	MOHS 1 STAGE T/A/L		\$505.85	\$661.00	\$318.20	\$628.09	80.54%	\$505.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17314	MOHS ADDL STAGE T/A/L		\$330.67	\$409.77	\$174.93	\$409.77	80.70%	\$330.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17315	MOHS SURGERY ADDL BLOCK		\$60.32	\$82.14	\$49.90	\$63.92	94.37%	\$60.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	17340	CRYOTHERAPY OF SKIN		\$43.02	\$53.55	\$49.70	\$53.50	80.41%	\$43.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19000	DRAINAGE OF BREAST LESION		\$52.34	\$103.42	\$41.73	\$63.44	82.50%	\$52.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19001	DRAIN BREAST LESION ADD-ON		\$17.67	\$26.69	\$20.73	\$22.03	80.23%	\$17.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19020	INCISION OF BREAST LESION		\$284.41	\$484.30	\$320.96	\$350.86	81.06%	\$284.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19030	INJECTION FOR BREAST X-RAY		\$61.60	\$168.68	\$74.75	\$74.84	82.31%	\$61.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19081	BX BREAST 1ST LESION STRTCTC		\$219.04	\$513.11	\$160.49	\$211.19	103.72%	\$200.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19082	BX BREAST ADD LESION STRTCTC		\$146.03	\$396.19	\$80.37	\$139.51	104.68%	\$132.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19083	BX BREAST 1ST LESION US IMAG		\$221.11	\$511.64	\$151.66	\$212.35	104.13%	\$201.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19084	BX BREAST ADD LESION US IMAG		\$121.29	\$390.11	\$75.69	\$115.71	104.82%	\$109.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19085	BX BREAST 1ST LESION MR IMAG		\$397.31	\$786.69	\$176.44	\$380.61	104.39%	\$361.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19086	BX BREAST ADD LESION MR IMAG		\$503.13	\$610.18	\$87.91	\$479.07	105.02%	\$455.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19100	BX BREAST PERCUT W/O IMAGE		\$111.52	\$152.80	\$67.97	\$135.55	82.27%	\$111.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19101	BIOPSY OF BREAST OPEN		\$181.80	\$335.53	\$225.47	\$223.06	81.50%	\$181.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19110	NIPPLE EXPLORATION		\$288.40	\$500.38	\$359.83	\$356.51	80.90%	\$288.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19112	EXCISE BREAST DUCT FISTULA		\$264.60	\$475.19	\$331.13	\$327.33	80.84%	\$264.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19120	REMOVAL OF BREAST LESION		\$341.90	\$531.44	\$423.83	\$425.28	80.39%	\$341.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19125	EXCISION BREAST LESION		\$376.43	\$584.71	\$467.99	\$468.25	80.39%	\$376.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19126	EXCISION ADDL BREAST LESION		\$151.94	\$157.24	\$157.24	\$157.24	96.63%	\$149.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19281	PERQ DEVICE BREAST 1ST IMAG		\$114.81	\$248.37	\$96.95	\$112.40	102.14%	\$106.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19282	PERQ DEVICE BREAST EA IMAG		\$68.71	\$176.59	\$48.65	\$66.92	102.67%	\$63.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Integumentary System	19283	PERQ DEV BREAST 1ST STRTCTC		\$106.21	\$266.37	\$97.78	\$103.18	102.93%	\$98.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19284	PERQ DEV BREAST ADD STRTCTC		\$88.19	\$195.72	\$48.85	\$84.93	103.83%	\$80.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19285	PERQ DEV BREAST 1ST US IMAG		\$144.68	\$378.59	\$82.75	\$138.51	104.45%	\$131.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19286	PERQ DEV BREAST ADD US IMAG		\$104.23	\$310.36	\$41.51	\$99.28	104.99%	\$94.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19287	PERQ DEV BREAST 1ST MR GUIDE		\$683.00	\$654.12	\$123.79	\$654.12	104.41%	\$621.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19300	REMOVAL OF BREAST TISSUE		\$388.64	\$592.97	\$440.84	\$435.63	89.21%	\$388.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19301	PARTIAL MASTECTOMY		\$533.96	\$664.15	\$664.15	\$664.15	80.40%	\$533.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19302	P-MASTECTOMY W/LN REMOVAL		\$732.80	\$911.43	\$911.43	\$911.43	80.40%	\$732.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19303	MAST SIMPLE COMPLETE		\$772.91	\$961.46	\$961.46	\$961.46	80.39%	\$772.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19305	MAST RADICAL		\$931.20	\$1,154.59	\$1,154.59	\$1,154.59	80.65%	\$931.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19307	MAST MOD RAD		\$953.92	\$1,184.91	\$1,184.91	\$1,184.91	80.51%	\$953.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19316	SUSPENSION OF BREAST		\$721.92	\$803.32	\$803.32	\$803.32	89.87%	\$721.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19318	BREAST REDUCTION		\$891.10	\$1,104.17	\$1,104.17	\$1,104.17	80.70%	\$891.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19325	BREAST AUGMENTATION W/IMPLT		\$534.47	\$627.04	\$627.04	\$627.04	85.24%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19328	RMVL INTACT BREAST IMPLANT		\$454.57	\$563.89	\$563.89	\$563.89	80.61%	\$454.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19330	RMVL RUPTURED BREAST IMPLANT		\$529.60	\$655.76	\$655.76	\$655.76	80.76%	\$529.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19340	INSJ BREAST IMPLT SM D MAST		\$621.36	\$770.44	\$770.44	\$770.44	80.65%	\$621.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19342	INSJ/RPLCMT BRST IMPLT SEP D		\$623.40	\$773.37	\$773.37	\$773.37	80.61%	\$623.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19350	BREAST RECONSTRUCTION		\$567.44	\$851.61	\$684.76	\$702.68	80.75%	\$567.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19355	CORRECT INVERTED NIPPLE(S)		\$625.60	\$773.20	\$627.04	\$773.20	80.91%	\$625.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19357	TISS XPNDR PLMT BRST RCNSTJ		\$951.28	\$1,180.44	\$1,180.44	\$1,180.44	80.59%	\$951.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19361	BRST RCNSTJ LATSMS DRSI FLAP		\$1,267.12	\$1,568.42	\$1,568.42	\$1,568.42	80.79%	\$1,267.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19364	BRST RCNSTJ FREE FLAP		\$2,204.64	\$2,723.14	\$2,723.14	\$2,723.14	80.96%	\$2,204.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19370	REVJ PERI-IMPLT CAPSULE BRST		\$550.09	\$683.20	\$683.20	\$683.20	80.52%	\$550.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19371	PERI-IMPLT CAPSLC BRST COMPL		\$583.24	\$722.22	\$722.22	\$722.22	80.76%	\$583.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Integumentary System	19380	REVJ RECONSTRUCTED BREAST		\$661.03	\$819.73	\$819.73	\$819.73	80.64%	\$661.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20100	EXPLORE WOUND NECK		\$481.34	\$598.41	\$598.41	\$598.41	80.44%	\$481.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20101	EXPLORE WOUND CHEST		\$233.28	\$593.56	\$209.74	\$282.49	82.58%	\$233.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20102	EXPLORE WOUND ABDOMEN		\$204.74	\$631.34	\$256.99	\$253.22	80.85%	\$204.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20103	EXPLORE WOUND EXTREMITY		\$286.48	\$578.73	\$348.09	\$353.32	81.08%	\$286.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	20200	MUSCLE BIOPSY		\$111.74	\$222.87	\$95.28	\$136.29	81.99%	\$111.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20205	DEEP MUSCLE BIOPSY		\$123.90	\$312.24	\$154.86	\$152.65	81.16%	\$123.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20206	NEEDLE BIOPSY MUSCLE		\$57.38	\$227.35	\$57.00	\$68.68	83.55%	\$57.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20220	BONE BIOPSY TROCAR/NEEDLE		\$78.81	\$239.23	\$86.41	\$94.91	83.03%	\$78.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20225	BONE BIOPSY TROCAR/NEEDLE		\$103.75	\$391.23	\$128.00	\$124.60	83.27%	\$103.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20240	BONE BIOPSY OPEN SUPERFICIAL		\$112.67	\$140.35	\$140.35	\$140.35	80.28%	\$112.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20245	BONE BIOPSY OPEN DEEP		\$276.82	\$342.39	\$342.39	\$342.39	80.85%	\$276.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20251	OPEN BONE BIOPSY		\$342.40	\$423.75	\$423.75	\$423.75	80.80%	\$342.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20500	INJECTION OF SINUS TRACT		\$93.06	\$127.70	\$91.24	\$115.25	80.75%	\$93.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20501	INJECT SINUS TRACT FOR X-RAY		\$38.56	\$146.60	\$35.84	\$46.43	83.06%	\$38.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20520	REMOVAL OF FOREIGN BODY		\$139.85	\$225.61	\$151.65	\$174.19	80.29%	\$139.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20525	REMOVAL OF FOREIGN BODY		\$208.08	\$478.70	\$250.87	\$255.39	81.47%	\$208.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20526	THER INJECTION CARP TUNNEL		\$65.91	\$84.24	\$56.90	\$82.09	80.29%	\$65.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20527	INJ DUPUYTREN CORD W/ENZYME		\$70.62	\$89.61	\$66.12	\$87.46	80.74%	\$70.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20550	INJ TENDON SHEATH/LIGAMENT		\$45.62	\$59.11	\$38.78	\$56.59	80.61%	\$45.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20551	INJ TENDON ORIGIN/INSERTION		\$46.70	\$58.84	\$38.51	\$57.67	80.98%	\$46.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20552	INJ TRIGGER POINT 1/2 MUSCL		\$40.34	\$53.79	\$36.97	\$49.75	81.08%	\$40.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20553	INJECT TRIGGER POINTS 3/>		\$49.42	\$61.99	\$42.01	\$60.68	81.45%	\$49.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20560	NDL INSJ W/O NJX 1 OR 2 MUSC		\$21.46	\$26.44	\$14.87	\$26.44	81.18%	\$21.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20561	NDL INSJ W/O NJX 3+ MUSC		\$31.16	\$38.04	\$22.26	\$38.04	81.92%	\$31.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20600	DRAIN/INJ JOINT/BURSA W/O US		\$42.06	\$55.12	\$35.84	\$53.13	79.16%	\$42.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20604	DRAIN/INJ JOINT/BURSA W/US		\$62.05	\$85.19	\$45.58	\$77.45	80.12%	\$62.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20605	DRAIN/INJ JOINT/BURSA W/O US		\$42.81	\$56.49	\$36.86	\$53.20	80.47%	\$42.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20606	DRAIN/INJ JOINT/BURSA W/US		\$66.79	\$92.51	\$51.85	\$83.55	79.94%	\$66.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20610	DRAIN/INJ JOINT/BURSA W/O US		\$50.62	\$66.54	\$45.51	\$63.37	79.87%	\$50.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20611	DRAIN/INJ JOINT/BURSA W/US		\$75.90	\$102.03	\$58.91	\$93.76	80.95%	\$75.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20612	ASPIRATE/INJ GANGLION CYST		\$51.00	\$66.90	\$41.31	\$64.24	79.39%	\$51.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20615	TREATMENT OF BONE CYST		\$132.26	\$262.95	\$165.86	\$164.54	80.38%	\$132.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20650	INSERT AND REMOVE BONE PIN		\$134.30	\$239.51	\$171.16	\$170.75	78.65%	\$134.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20660	APPLY REM FIXATION DEVICE		\$191.60	\$236.75	\$236.75	\$236.75	80.93%	\$191.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	20661	APPLICATION OF HEAD BRACE		\$426.40	\$541.06	\$541.06	\$541.06	78.81%	\$426.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20664	APPLICATION OF HALO		\$724.00	\$907.94	\$907.94	\$907.94	79.74%	\$724.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20670	REMOVAL OF SUPPORT IMPLANT		\$174.32	\$369.64	\$148.81	\$213.19	81.77%	\$174.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20680	REMOVAL OF SUPPORT IMPLANT		\$348.16	\$617.88	\$428.61	\$430.16	80.94%	\$348.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20690	APPLY BONE FIXATION DEVICE		\$487.08	\$606.24	\$606.24	\$606.24	80.34%	\$487.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20692	APPLY BONE FIXATION DEVICE		\$918.10	\$1,148.88	\$1,148.88	\$1,148.88	79.91%	\$918.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20693	ADJUST BONE FIXATION DEVICE		\$364.62	\$459.25	\$459.25	\$459.25	79.39%	\$364.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20694	REMOVE BONE FIXATION DEVICE		\$282.57	\$446.90	\$352.96	\$351.78	80.33%	\$282.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20696	COMP MULTIPLANE EXT FIXATION		\$955.46	\$1,180.72	\$1,180.72	\$1,180.72	80.92%	\$955.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20700	MNL PREP&INSJ DP RX DLVR DEV		\$67.76	\$83.90	\$83.90	\$83.90	80.76%	\$67.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20701	RMVL DEEP RX DELIVERY DEVICE		\$51.77	\$63.60	\$63.60	\$63.60	81.40%	\$51.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20702	MNL PREP&INSJ IMED RX DEV		\$114.00	\$141.19	\$141.19	\$141.19	80.74%	\$114.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20703	RMVL IMED RX DELIVERY DEVICE		\$82.24	\$103.18	\$103.18	\$103.18	79.70%	\$82.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20704	MNL PREP&INSJ I-ARTIC RX DEV		\$117.60	\$148.52	\$148.52	\$148.52	79.18%	\$117.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20705	RMVL I-ARTIC RX DELIVERY DEV		\$100.00	\$122.89	\$122.89	\$122.89	81.38%	\$100.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20900	REMOVAL OF BONE FOR GRAFT		\$146.55	\$396.94	\$180.67	\$177.73	82.46%	\$146.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20902	REMOVAL OF BONE FOR GRAFT		\$222.13	\$274.87	\$274.87	\$274.87	80.81%	\$222.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20910	REMOVE CARTILAGE FOR GRAFT		\$394.00	\$492.99	\$492.99	\$492.99	79.92%	\$394.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20912	REMOVE CARTILAGE FOR GRAFT		\$397.49	\$494.91	\$494.91	\$494.91	80.32%	\$397.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20922	REMOVAL OF FASCIA FOR GRAFT		\$402.40	\$630.82	\$507.44	\$506.19	79.50%	\$402.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20924	REMOVAL OF TENDON FOR GRAFT		\$415.66	\$517.66	\$517.66	\$517.66	80.30%	\$415.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20931	SP BONE ALGRFT STRUCT ADD-ON		\$87.46	\$108.52	\$108.52	\$108.52	80.59%	\$87.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20937	SP BONE AGRFT MORSEL ADD-ON		\$132.71	\$164.36	\$164.36	\$164.36	80.74%	\$132.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20938	SP BONE AGRFT STRUCT ADD-ON		\$144.80	\$180.54	\$180.54	\$180.54	80.20%	\$144.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20939	BONE MARROW ASPIR BONE GRFG		\$55.74	\$68.61	\$68.61	\$68.61	81.24%	\$55.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20950	FLUID PRESSURE MUSCLE		\$136.17	\$275.47	\$89.70	\$168.42	80.85%	\$136.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20955	FIBULA BONE GRAFT MICROVASC		\$1,997.60	\$2,450.47	\$2,450.47	\$2,450.47	81.52%	\$1,997.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20969	BONE/SKIN GRAFT MICROVASC		\$2,202.80	\$2,723.74	\$2,723.74	\$2,723.74	80.87%	\$2,202.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20974	ELECTRICAL BONE STIMULATION		\$68.80	\$86.55	\$51.85	\$86.55	79.49%	\$68.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20979	US BONE STIMULATION		\$46.80	\$58.68	\$31.69	\$58.68	79.75%	\$46.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	20982	ABLATE BONE TUMOR(S) PERQ		\$292.47	\$3,588.53	\$360.62	\$349.38	83.71%	\$292.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20983	ABLATE BONE TUMOR(S) PERQ		\$272.54	\$5,233.17	\$336.45	\$325.05	83.85%	\$272.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	20985	CPTR-ASST DIR MS PX		\$115.86	\$143.14	\$143.14	\$143.14	80.94%	\$115.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21011	EXC FACE LES SC <2 CM		\$247.82	\$387.77	\$268.94	\$306.92	80.74%	\$247.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21012	EXC FACE LES SBQ 2 CM/>		\$278.75	\$347.17	\$347.17	\$347.17	80.29%	\$278.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21013	EXC FACE TUM DEEP < 2 CM		\$361.43	\$551.10	\$411.24	\$445.81	81.07%	\$361.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21014	EXC FACE TUM DEEP 2 CM/>		\$428.87	\$532.28	\$532.28	\$532.28	80.57%	\$428.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21015	RESECT FACE/SCALP TUM < 2 CM		\$572.48	\$710.26	\$710.26	\$710.26	80.60%	\$572.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21016	RESECT FACE/SCALP TUM 2 CM/>		\$820.80	\$1,017.47	\$1,017.47	\$1,017.47	80.67%	\$820.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21025	EXCISION OF BONE LOWER JAW		\$541.20	\$812.76	\$673.95	\$673.54	80.35%	\$541.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21026	EXCISION OF FACIAL BONE(S)		\$352.40	\$552.06	\$439.54	\$438.08	80.44%	\$352.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21029	CONTOUR OF FACE BONE LESION		\$511.60	\$794.26	\$638.63	\$636.34	80.40%	\$511.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21031	REMOVE EXOSTOSIS MANDIBLE		\$225.06	\$396.30	\$279.92	\$278.11	80.92%	\$225.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21040	EXCISE MANDIBLE LESION		\$299.74	\$476.60	\$370.40	\$368.49	81.34%	\$299.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21044	REMOVAL OF JAW BONE LESION		\$707.20	\$876.80	\$876.80	\$876.80	80.66%	\$707.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21045	EXTENSIVE JAW SURGERY		\$982.00	\$1,214.56	\$1,214.56	\$1,214.56	80.85%	\$982.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21046	REMOVE MANDIBLE CYST COMPLEX		\$813.34	\$1,004.06	\$1,004.06	\$1,004.06	81.01%	\$813.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21047	EXCISE LWR JAW CYST W/REPAIR		\$992.00	\$1,222.13	\$1,222.13	\$1,222.13	81.17%	\$992.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21048	REMOVE MAXILLA CYST COMPLEX		\$818.00	\$1,012.12	\$1,012.12	\$1,012.12	80.82%	\$818.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21070	REMOVE CORONOID PROCESS		\$503.20	\$624.74	\$624.74	\$624.74	80.55%	\$503.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21073	MNPJ OF TMJ W/ANESTH		\$198.40	\$393.24	\$244.62	\$249.12	79.64%	\$198.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21085	PREPARE FACE/ORAL PROSTHESIS		\$391.84	\$695.52	\$486.61	\$489.81	80.00%	\$391.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21086	PREPARE FACE/ORAL PROSTHESIS		\$1,037.20	\$1,596.74	\$1,283.73	\$1,287.55	80.56%	\$1,037.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21120	RECONSTRUCTION OF CHIN		\$422.20	\$684.15	\$521.86	\$519.78	81.23%	\$422.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21122	RECONSTRUCTION OF CHIN		\$618.40	\$763.86	\$763.86	\$763.86	80.96%	\$618.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21125	AUGMENTATION LOWER JAW BONE		\$545.60	\$2,691.31	\$677.23	\$658.82	82.81%	\$545.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21127	AUGMENTATION LOWER JAW BONE		\$625.60	\$4,175.57	\$784.31	\$764.97	81.78%	\$625.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21137	REDUCTION OF FOREHEAD		\$616.00	\$763.04	\$763.04	\$763.04	80.73%	\$616.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21139	REDUCTION OF FOREHEAD		\$892.80	\$1,102.85	\$1,102.85	\$1,102.85	80.95%	\$892.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21141	LEFORT I-1 PIECE W/O GRAFT		\$1,094.80	\$1,348.87	\$1,348.87	\$1,348.87	81.16%	\$1,094.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	21145	LEFORT I-1 PIECE W/ GRAFT		\$1,270.14	\$1,564.05	\$1,564.05	\$1,564.05	81.21%	\$1,270.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21146	LEFORT I-2 PIECE W/ GRAFT		\$1,326.40	\$1,633.68	\$1,633.68	\$1,633.68	81.19%	\$1,326.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21147	LEFORT I-3/> PIECE W/ GRAFT		\$1,396.00	\$1,717.71	\$1,717.71	\$1,717.71	81.27%	\$1,396.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21175	RECONSTRUCT ORBIT/FOREHEAD		\$1,796.23	\$2,216.85	\$2,216.85	\$2,216.85	81.03%	\$1,796.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21179	RECONSTRUCT ENTIRE FOREHEAD		\$1,237.60	\$1,529.05	\$1,529.05	\$1,529.05	80.94%	\$1,237.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21181	CONTOUR CRANIAL BONE LESION		\$607.20	\$752.04	\$752.04	\$752.04	80.74%	\$607.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21182	RECONSTRUCT CRANIAL BONE		\$1,716.80	\$2,120.75	\$2,120.75	\$2,120.75	80.95%	\$1,716.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21193	RECONST LWR JAW W/O GRAFT		\$1,009.60	\$1,243.57	\$1,243.57	\$1,243.57	81.19%	\$1,009.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21194	RECONST LWR JAW W/GRAFT		\$1,168.00	\$1,437.43	\$1,437.43	\$1,437.43	81.26%	\$1,168.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21196	RECONST LWR JAW W/FIXATION		\$1,177.80	\$1,448.01	\$1,448.01	\$1,448.01	81.34%	\$1,177.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21209	REDUCTION OF FACIAL BONES		\$513.60	\$818.73	\$620.33	\$613.64	83.70%	\$513.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21215	LOWER JAW BONE GRAFT		\$643.10	\$4,233.82	\$800.85	\$780.86	82.36%	\$643.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21230	RIB CARTILAGE GRAFT		\$612.66	\$757.97	\$757.97	\$757.97	80.83%	\$612.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21235	EAR CARTILAGE GRAFT		\$469.47	\$760.69	\$585.08	\$583.18	80.50%	\$469.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21244	RECONSTRUCTION OF LOWER JAW		\$830.40	\$1,025.25	\$1,025.25	\$1,025.25	81.00%	\$830.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21245	RECONSTRUCTION OF JAW		\$781.60	\$1,251.68	\$961.45	\$956.29	81.73%	\$781.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21270	AUGMENTATION CHEEK BONE		\$612.00	\$1,043.67	\$757.65	\$759.00	80.63%	\$612.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21280	REVISION OF EYELID		\$484.00	\$604.17	\$604.17	\$604.17	80.11%	\$484.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21282	REVISION OF EYELID		\$330.24	\$412.34	\$412.34	\$412.34	80.09%	\$330.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21315	CLOSED TX NOSE FX W/O STABLJ		\$55.46	\$158.60	\$60.10	\$68.99	80.38%	\$55.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21320	CLOSED TX NOSE FX W/ STABLJ		\$84.90	\$224.35	\$95.71	\$103.97	81.66%	\$84.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21325	OPEN TX NOSE FX UNCOMPLICATD		\$373.20	\$460.67	\$460.67	\$460.67	81.01%	\$373.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21330	OPEN TX NOSE FX W/SKELE FIXJ		\$446.47	\$551.37	\$551.37	\$551.37	80.97%	\$446.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21335	OPEN TX NOSE & SEPTAL FX		\$592.58	\$734.78	\$734.78	\$734.78	80.65%	\$592.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21336	OPEN TX SEPTAL FX W/WO STABJ		\$530.56	\$656.46	\$656.46	\$656.46	80.82%	\$530.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21337	CLOSED TX SEPTAL&NOSE FX		\$255.95	\$433.36	\$311.38	\$315.47	81.13%	\$255.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21338	OPEN NASOETHMOID FX W/O FIXJ		\$561.34	\$691.48	\$691.48	\$691.48	81.18%	\$561.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21339	OPEN NASOETHMOID FX W/ FIXJ		\$632.64	\$778.87	\$778.87	\$778.87	81.23%	\$632.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21343	OPEN TX DPRSD FRONT SINUS FX		\$899.66	\$1,111.12	\$1,111.12	\$1,111.12	80.97%	\$899.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21344	OPEN TX COMPL FRONT SINUS FX		\$1,143.66	\$1,410.56	\$1,410.56	\$1,410.56	81.08%	\$1,143.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	21346	OPN TX NASOMAX FX W/FIXJ		\$853.60	\$1,047.43	\$1,047.43	\$1,047.43	81.50%	\$853.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21347	OPN TX NASOMAX FX MULTIPLE		\$860.40	\$1,058.45	\$1,058.45	\$1,058.45	81.29%	\$860.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21356	OPN TX DPRSD ZYGOMATIC ARCH		\$333.20	\$564.00	\$413.63	\$412.74	80.73%	\$333.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21360	OPN TX DPRSD MALAR FRACTURE		\$433.60	\$539.63	\$539.63	\$539.63	80.35%	\$433.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21365	OPN TX COMPLX MALAR FX		\$884.92	\$1,091.90	\$1,091.90	\$1,091.90	81.04%	\$884.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21366	OPN TX COMPLX MALAR W/GRFT		\$1,040.80	\$1,288.04	\$1,288.04	\$1,288.04	80.80%	\$1,040.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21386	OPN TX ORBIT FX PERIORBITAL		\$566.90	\$703.25	\$703.25	\$703.25	80.61%	\$566.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21390	OPN TX ORBIT PERIORBTL IMPLT		\$659.96	\$817.89	\$817.89	\$817.89	80.69%	\$659.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21395	OPN TX ORBIT PERIORBT W/GRFT		\$823.20	\$1,017.21	\$1,017.21	\$1,017.21	80.93%	\$823.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21406	OPN TX ORBIT FX W/O IMPLANT		\$480.62	\$596.54	\$596.54	\$596.54	80.57%	\$480.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21407	OPN TX ORBIT FX W/IMPLANT		\$531.74	\$654.96	\$654.96	\$654.96	81.19%	\$531.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21408	OPN TX ORBIT FX W/BONE GRFT		\$738.40	\$913.78	\$913.78	\$913.78	80.81%	\$738.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21421	TREAT MOUTH ROOF FRACTURE		\$453.00	\$665.30	\$559.79	\$559.78	80.92%	\$453.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21422	TREAT MOUTH ROOF FRACTURE		\$517.90	\$635.04	\$635.04	\$635.04	81.55%	\$517.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21423	TREAT MOUTH ROOF FRACTURE		\$654.50	\$808.12	\$808.12	\$808.12	80.99%	\$654.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21432	TREAT CRANIOFACIAL FRACTURE		\$590.40	\$725.33	\$725.33	\$725.33	81.40%	\$590.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21433	TREAT CRANIOFACIAL FRACTURE		\$1,409.60	\$1,741.92	\$1,741.92	\$1,741.92	80.92%	\$1,409.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21435	TREAT CRANIOFACIAL FRACTURE		\$1,148.00	\$1,421.40	\$1,421.40	\$1,421.40	80.77%	\$1,148.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21440	TREAT DENTAL RIDGE FRACTURE		\$513.12	\$792.02	\$631.13	\$697.31	73.59%	\$513.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21450	TREAT LOWER JAW FRACTURE		\$404.80	\$612.85	\$497.18	\$496.26	81.57%	\$404.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21451	TREAT LOWER JAW FRACTURE		\$593.20	\$795.42	\$661.17	\$728.48	81.43%	\$593.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21453	TREAT LOWER JAW FRACTURE		\$783.95	\$1,133.61	\$962.20	\$962.08	81.48%	\$783.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21461	TREAT LOWER JAW FRACTURE		\$885.52	\$1,904.55	\$1,095.20	\$1,087.35	81.44%	\$885.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21462	TREAT LOWER JAW FRACTURE		\$976.53	\$2,027.41	\$1,192.48	\$1,180.93	82.69%	\$976.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21465	TREAT LOWER JAW FRACTURE		\$650.94	\$809.66	\$809.66	\$809.66	80.40%	\$650.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21470	TREAT LOWER JAW FRACTURE		\$948.72	\$1,181.93	\$1,181.93	\$1,181.93	80.27%	\$948.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21480	RESET DISLOCATED JAW		\$24.90	\$147.15	\$30.78	\$30.47	81.71%	\$24.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21501	DRAIN NECK/CHEST LESION		\$276.94	\$505.23	\$347.15	\$342.57	80.84%	\$276.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21502	DRAIN CHEST LESION		\$411.20	\$511.42	\$511.42	\$511.42	80.40%	\$411.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21510	DRAINAGE OF BONE LESION		\$368.00	\$458.71	\$458.71	\$458.71	80.22%	\$368.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	21550	BIOPSY OF NECK/CHEST		\$176.24	\$276.32	\$159.25	\$217.22	81.14%	\$176.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21552	EXC NECK LES SC 3 CM/>		\$364.50	\$454.22	\$454.22	\$454.22	80.25%	\$364.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21554	EXC NECK TUM DEEP 5 CM/>		\$594.84	\$739.99	\$739.99	\$739.99	80.38%	\$594.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21555	EXC NECK LES SC < 3 CM		\$291.88	\$447.85	\$315.36	\$360.46	80.98%	\$291.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21556	EXC NECK TUM DEEP < 5 CM		\$435.08	\$539.47	\$539.47	\$539.47	80.65%	\$435.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21557	RESECT NECK THORAX TUMOR<5CM		\$774.51	\$966.35	\$966.35	\$966.35	80.15%	\$774.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21558	RESECT NECK TUMOR 5 CM/>		\$1,085.36	\$1,343.60	\$1,343.60	\$1,343.60	80.78%	\$1,085.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21600	PARTIAL REMOVAL OF RIB		\$463.45	\$578.68	\$578.68	\$578.68	80.09%	\$463.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21601	EXC CHEST WALL TUMOR W/RIBS		\$918.40	\$1,147.62	\$1,147.62	\$1,147.62	80.03%	\$918.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21602	EXC CH WAL TUM W/O LYMPHADEC		\$1,243.74	\$1,534.74	\$1,534.74	\$1,534.74	81.04%	\$1,243.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21610	PARTIAL REMOVAL OF RIB		\$916.80	\$1,218.72	\$1,218.72	\$1,218.72	75.23%	\$916.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21615	REMOVAL OF RIB		\$497.14	\$618.93	\$618.93	\$618.93	80.32%	\$497.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21620	PARTIAL REMOVAL OF STERNUM		\$409.46	\$507.54	\$507.54	\$507.54	80.68%	\$409.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21627	STERNAL DEBRIDEMENT		\$445.03	\$556.11	\$556.11	\$556.11	80.03%	\$445.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21630	EXTENSIVE STERNUM SURGERY		\$1,071.20	\$1,326.65	\$1,326.65	\$1,326.65	80.74%	\$1,071.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21685	HYOID MYOTOMY & SUSPENSION		\$805.60	\$997.90	\$997.90	\$997.90	80.73%	\$805.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21700	REVISION OF NECK MUSCLE		\$282.40	\$351.34	\$351.34	\$351.34	80.38%	\$282.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21740	RECONSTRUCTION OF STERNUM		\$814.80	\$1,013.26	\$1,013.26	\$1,013.26	80.41%	\$814.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21750	REPAIR OF STERNUM SEPARATION		\$539.80	\$670.23	\$670.23	\$670.23	80.54%	\$539.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21811	OPTX OF RIB FX W/FIXJ SCOPE		\$469.92	\$583.44	\$583.44	\$583.44	80.54%	\$469.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21812	TREATMENT OF RIB FRACTURE		\$569.90	\$704.23	\$704.23	\$704.23	80.92%	\$569.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21813	TREATMENT OF RIB FRACTURE		\$777.60	\$963.13	\$963.13	\$963.13	80.74%	\$777.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21820	TREAT STERNUM FRACTURE		\$125.06	\$159.47	\$157.37	\$156.97	79.67%	\$125.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21825	TREAT STERNUM FRACTURE		\$447.20	\$559.35	\$559.35	\$559.35	79.95%	\$447.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21920	BIOPSY SOFT TISSUE OF BACK		\$127.20	\$265.66	\$158.05	\$157.03	81.00%	\$127.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21925	BIOPSY SOFT TISSUE OF BACK		\$311.20	\$511.29	\$389.31	\$386.70	80.48%	\$311.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21930	EXC BACK LES SC < 3 CM		\$320.54	\$518.31	\$373.55	\$397.25	80.69%	\$320.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21931	EXC BACK LES SC 3 CM/>		\$382.28	\$476.49	\$476.49	\$476.49	80.23%	\$382.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21932	EXC BACK TUM DEEP < 5 CM		\$541.48	\$671.03	\$671.03	\$671.03	80.69%	\$541.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	21933	EXC BACK TUM DEEP 5 CM/>		\$599.44	\$744.92	\$744.92	\$744.92	80.47%	\$599.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	21936	RESECT BACK TUM 5 CM/>		\$1,139.00	\$1,417.15	\$1,417.15	\$1,417.15	80.37%	\$1,139.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22010	I&D P-SPINE C/T/CERV-THOR		\$787.66	\$986.74	\$986.74	\$986.74	79.82%	\$787.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22015	I&D ABSCESS P-SPINE L/S/LS		\$775.34	\$964.68	\$964.68	\$964.68	80.37%	\$775.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22100	REMOVE PART OF NECK VERTEBRA		\$704.80	\$964.67	\$964.67	\$964.67	73.06%	\$704.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22101	REMOVE PART THORAX VERTEBRA		\$710.00	\$894.41	\$894.41	\$894.41	79.38%	\$710.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22102	REMOVE PART LUMBAR VERTEBRA		\$636.00	\$785.51	\$785.51	\$785.51	80.97%	\$636.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22103	REMOVE EXTRA SPINE SEGMENT		\$107.46	\$132.69	\$132.69	\$132.69	80.99%	\$107.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22206	INCIS SPINE 3 COLUMN THORAC		\$1,964.80	\$2,451.39	\$2,451.39	\$2,451.39	80.15%	\$1,964.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22207	INCIS SPINE 3 COLUMN LUMBAR		\$1,927.84	\$2,402.40	\$2,402.40	\$2,402.40	80.25%	\$1,927.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22208	INCIS SPINE 3 COLUMN ADL SEG		\$464.80	\$579.42	\$579.42	\$579.42	80.22%	\$464.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22210	INCIS 1 VERTEBRAL SEG CERV		\$1,443.20	\$1,803.51	\$1,803.51	\$1,803.51	80.02%	\$1,443.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22212	INCIS 1 VERTEBRAL SEG THORAC		\$1,227.14	\$1,531.14	\$1,531.14	\$1,531.14	80.15%	\$1,227.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22214	INCIS 1 VERTEBRAL SEG LUMBAR		\$1,227.26	\$1,531.07	\$1,531.07	\$1,531.07	80.16%	\$1,227.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22216	INCIS ADDL SPINE SEGMENT		\$287.63	\$356.64	\$356.64	\$356.64	80.65%	\$287.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22224	OSTEOT DSC ANT 1VRT SGM LMBR		\$1,284.54	\$1,600.08	\$1,600.08	\$1,600.08	80.28%	\$1,284.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22310	CLOSED TX VERT FX W/O MANJ		\$253.37	\$323.08	\$308.01	\$316.68	80.01%	\$253.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22315	CLOSED TX VERT FX W/MANJ		\$732.00	\$925.44	\$797.15	\$925.44	79.10%	\$732.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22318	TREAT ODONTOID FX W/O GRAFT		\$1,331.20	\$1,664.82	\$1,664.82	\$1,664.82	79.96%	\$1,331.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22325	TREAT SPINE FRACTURE		\$1,195.79	\$1,494.58	\$1,494.58	\$1,494.58	80.01%	\$1,195.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22326	TREAT NECK SPINE FRACTURE		\$1,221.93	\$1,524.62	\$1,524.62	\$1,524.62	80.15%	\$1,221.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22327	TREAT THORAX SPINE FRACTURE		\$1,245.03	\$1,555.94	\$1,555.94	\$1,555.94	80.02%	\$1,245.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22328	TREAT EACH ADD SPINE FX		\$223.74	\$276.51	\$276.51	\$276.51	80.92%	\$223.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22510	PERQ CERVICOTHORACIC INJECT		\$347.66	\$1,851.63	\$429.23	\$416.46	83.48%	\$347.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22511	PERQ LUMBOSACRAL INJECTION		\$326.56	\$1,850.63	\$404.40	\$392.58	83.18%	\$326.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22512	VERTEBROPLASTY ADDL INJECT		\$164.40	\$747.81	\$203.46	\$198.84	82.68%	\$164.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22513	PERQ VERTEBRAL AUGMENTATION		\$1,333.40	\$5,873.99	\$507.92	\$1,590.18	83.85%	\$1,333.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22514	PERQ VERTEBRAL AUGMENTATION		\$1,135.78	\$5,850.02	\$473.78	\$1,355.12	83.81%	\$1,135.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22515	PERQ VERTEBRAL AUGMENTATION		\$503.63	\$3,009.45	\$214.07	\$598.82	84.10%	\$503.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22532	ARTHRD LAT XTRCVTRY TQ THRC		\$1,448.80	\$1,801.56	\$1,801.56	\$1,801.56	80.42%	\$1,448.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22533	ARTHRD LAT XTRCVTRY TQ LMBR		\$1,339.20	\$1,672.51	\$1,672.51	\$1,672.51	80.07%	\$1,339.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	22534	ARTHRD LAT XTRCVTRY TQ EA AD		\$285.60	\$354.99	\$354.99	\$354.99	80.45%	\$285.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22551	ARTHRD ANT NTRBDY CERVICAL		\$1,369.17	\$1,705.05	\$1,705.05	\$1,705.05	80.30%	\$1,369.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22552	ADDL NECK SPINE FUSION		\$313.70	\$389.60	\$389.60	\$389.60	80.52%	\$313.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22554	NECK SPINE FUSION		\$1,020.55	\$1,273.23	\$1,273.23	\$1,273.23	80.15%	\$1,020.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22556	ARTHRD ANT NTRBD MIN DSC THC		\$1,348.32	\$1,693.49	\$1,693.49	\$1,693.49	79.62%	\$1,348.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22558	ARTHRD ANT NTRBD MIN DSC LUM		\$1,230.38	\$1,529.84	\$1,529.84	\$1,529.84	80.43%	\$1,230.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22585	ADDITIONAL SPINAL FUSION		\$257.90	\$319.20	\$319.20	\$319.20	80.80%	\$257.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22590	ARTHRD PST TQ CRANIOCERVICAL		\$1,284.00	\$1,603.72	\$1,603.72	\$1,603.72	80.06%	\$1,284.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22595	ARTHRD PST TQ ATLAS-AXIS		\$1,225.83	\$1,534.13	\$1,534.13	\$1,534.13	79.90%	\$1,225.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22600	ARTHRD PST TQ 1NTRSPC CRV		\$1,055.73	\$1,319.45	\$1,319.45	\$1,319.45	80.01%	\$1,055.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22610	THORAX SPINE FUSION		\$1,038.90	\$1,297.80	\$1,297.80	\$1,297.80	80.05%	\$1,038.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22612	ARTHRD PST TQ 1NTRSPC LUMBAR		\$1,278.77	\$1,589.17	\$1,589.17	\$1,589.17	80.47%	\$1,278.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22614	ARTHRD PST TQ 1NTRSPC EA ADD		\$309.70	\$384.83	\$384.83	\$384.83	80.48%	\$309.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22630	ARTHRD PST TQ 1NTRSPC LUM		\$1,256.10	\$1,568.51	\$1,568.51	\$1,568.51	80.08%	\$1,256.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22632	ARTHRD PST TQ 1NTRSPC LM EA		\$253.60	\$315.54	\$315.54	\$315.54	80.37%	\$253.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22633	ARTHRD CMBN 1NTRSPC LUMBAR		\$1,455.81	\$1,813.27	\$1,813.27	\$1,813.27	80.29%	\$1,455.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22634	ARTHRD CMBN 1NTRSPC EA ADDL		\$383.61	\$476.57	\$476.57	\$476.57	80.49%	\$383.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22800	ARTHRD PST DFRM<6 VRT SGM		\$1,108.20	\$1,380.03	\$1,380.03	\$1,380.03	80.30%	\$1,108.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22802	ARTHRD PST DFRM 7-12 VRT SGM		\$1,706.12	\$2,123.65	\$2,123.65	\$2,123.65	80.34%	\$1,706.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22804	ARTHRD PST DFRM 13+ VRT SGM		\$1,958.10	\$2,434.63	\$2,434.63	\$2,434.63	80.43%	\$1,958.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22830	EXPLORATION OF SPINAL FUSION		\$668.68	\$834.76	\$834.76	\$834.76	80.10%	\$668.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22840	INSERT SPINE FIXATION DEVICE		\$600.69	\$744.45	\$744.45	\$744.45	80.69%	\$600.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22842	INSERT SPINE FIXATION DEVICE		\$604.66	\$750.55	\$750.55	\$750.55	80.56%	\$604.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22843	INSERT SPINE FIXATION DEVICE		\$647.21	\$803.76	\$803.76	\$803.76	80.52%	\$647.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22844	INSERT SPINE FIXATION DEVICE		\$782.52	\$968.89	\$968.89	\$968.89	80.76%	\$782.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22845	INSERT SPINE FIXATION DEVICE		\$575.50	\$714.25	\$714.25	\$714.25	80.57%	\$575.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22846	INSERT SPINE FIXATION DEVICE		\$598.75	\$743.33	\$743.33	\$743.33	80.55%	\$598.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22848	INSERT PELV FIXATION DEVICE		\$285.39	\$354.39	\$354.39	\$354.39	80.53%	\$285.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22849	REINSERT SPINAL FIXATION		\$1,054.82	\$1,313.40	\$1,313.40	\$1,313.40	80.31%	\$1,054.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22850	REMOVE SPINE FIXATION DEVICE		\$598.97	\$747.40	\$747.40	\$747.40	80.14%	\$598.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	22852	REMOVE SPINE FIXATION DEVICE		\$576.94	\$721.02	\$721.02	\$721.02	80.02%	\$576.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22853	INSJ BIOMECHANICAL DEVICE		\$204.44	\$253.45	\$253.45	\$253.45	80.66%	\$204.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22854	INSJ BIOMECHANICAL DEVICE		\$265.52	\$329.56	\$329.56	\$329.56	80.57%	\$265.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22855	REMOVE SPINE FIXATION DEVICE		\$897.20	\$1,117.37	\$1,117.37	\$1,117.37	80.30%	\$897.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22856	CERV ARTIFIC DISKECTOMY		\$1,308.57	\$1,629.14	\$1,629.14	\$1,629.14	80.32%	\$1,308.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22857	LUMBAR ARTIF DISKECTOMY		\$1,430.40	\$1,754.57	\$1,754.57	\$1,754.57	81.52%	\$1,430.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22858	SECOND LEVEL CER DISKECTOMY		\$401.56	\$497.94	\$497.94	\$497.94	80.64%	\$401.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22859	INSJ BIOMECHANICAL DEVICE		\$264.00	\$327.79	\$327.79	\$327.79	80.54%	\$264.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22864	REMOVE CERV ARTIF DISC		\$1,658.80	\$2,071.36	\$2,071.36	\$2,071.36	80.08%	\$1,658.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22867	INSJ STABLI DEV W/DCMPRN		\$870.94	\$1,080.23	\$1,080.23	\$1,080.23	80.63%	\$870.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22868	INSJ STABLI DEV W/DCMPRN		\$192.80	\$238.43	\$238.43	\$238.43	80.86%	\$192.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22869	INSJ STABLI DEV W/O DCMPRN		\$352.80	\$440.23	\$440.23	\$440.23	80.14%	\$352.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22870	INSJ STABLI DEV W/O DCMPRN		\$95.20	\$117.10	\$117.10	\$117.10	81.30%	\$95.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22900	EXC ABDL TUM DEEP < 5 CM		\$460.40	\$574.00	\$574.00	\$574.00	80.21%	\$460.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22901	EXC ABDL TUM DEEP 5 CM/>		\$540.16	\$673.02	\$673.02	\$673.02	80.26%	\$540.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22902	EXC ABD LES SC < 3 CM		\$295.67	\$485.94	\$341.53	\$366.19	80.74%	\$295.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22903	EXC ABD LES SC 3 CM/>		\$358.59	\$446.63	\$446.63	\$446.63	80.29%	\$358.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22904	RADICAL RESECT ABD TUMOR<5CM		\$847.20	\$1,052.14	\$1,052.14	\$1,052.14	80.52%	\$847.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	22905	RAD RESECT ABD TUMOR 5 CM/>		\$1,068.40	\$1,330.28	\$1,330.28	\$1,330.28	80.31%	\$1,068.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23030	DRAIN SHOULDER LESION		\$208.80	\$454.32	\$260.49	\$257.03	81.24%	\$208.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23031	DRAIN SHOULDER BURSA		\$183.20	\$448.61	\$228.83	\$224.92	81.45%	\$183.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23035	DRAIN SHOULDER BONE LESION		\$562.00	\$694.70	\$694.70	\$694.70	80.90%	\$562.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23040	EXPLORATORY SHOULDER SURGERY		\$591.21	\$735.20	\$735.20	\$735.20	80.41%	\$591.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23044	EXPLORATORY SHOULDER SURGERY		\$468.96	\$580.54	\$580.54	\$580.54	80.78%	\$468.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23066	BIOPSY SHOULDER TISSUES		\$303.10	\$594.51	\$382.10	\$380.02	79.76%	\$303.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23071	EXC SHOULDER LES SC 3 CM/>		\$343.17	\$428.03	\$428.03	\$428.03	80.18%	\$343.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23073	EXC SHOULDER TUM DEEP 5 CM/>		\$568.34	\$707.34	\$707.34	\$707.34	80.35%	\$568.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23075	EXC SHOULDER LES SC < 3 CM		\$351.00	\$532.60	\$338.77	\$433.06	81.05%	\$351.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23076	EXC SHOULDER TUM DEEP < 5 CM		\$445.92	\$555.27	\$555.27	\$555.27	80.31%	\$445.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23077	RESECT SHOULDER TUMOR < 5 CM		\$911.20	\$1,135.31	\$1,135.31	\$1,135.31	80.26%	\$911.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	23100	BIOPSY OF SHOULDER JOINT		\$421.20	\$525.44	\$525.44	\$525.44	80.16%	\$421.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23101	SHOULDER JOINT SURGERY		\$380.00	\$474.88	\$474.88	\$474.88	80.02%	\$380.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23105	REMOVE SHOULDER JOINT LINING		\$528.00	\$660.32	\$660.32	\$660.32	79.96%	\$528.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23106	INCISION OF COLLARBONE JOINT		\$417.60	\$521.49	\$521.49	\$521.49	80.08%	\$417.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23107	EXPLORE TREAT SHOULDER JOINT		\$546.00	\$683.67	\$683.67	\$683.67	79.86%	\$546.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23120	PARTIAL REMOVAL COLLAR BONE		\$486.94	\$608.50	\$608.50	\$608.50	80.02%	\$486.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23130	REMOVE SHOULDER BONE PART		\$512.40	\$638.53	\$638.53	\$638.53	80.25%	\$512.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23140	REMOVAL OF BONE LESION		\$460.20	\$574.08	\$574.08	\$574.08	80.16%	\$460.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23150	REMOVAL OF HUMERUS LESION		\$550.80	\$686.19	\$686.19	\$686.19	80.27%	\$550.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23155	REMOVAL OF HUMERUS LESION		\$656.80	\$816.96	\$816.96	\$816.96	80.40%	\$656.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23156	REMOVAL OF HUMERUS LESION		\$560.00	\$697.86	\$697.86	\$697.86	80.25%	\$560.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23170	REMOVE COLLAR BONE LESION		\$468.00	\$583.96	\$583.96	\$583.96	80.14%	\$468.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23180	REMOVE COLLAR BONE LESION		\$542.80	\$677.56	\$677.56	\$677.56	80.11%	\$542.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23184	REMOVE HUMERUS LESION		\$610.40	\$761.09	\$761.09	\$761.09	80.20%	\$610.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23210	RESECT SCAPULA TUMOR		\$1,430.00	\$1,775.76	\$1,775.76	\$1,775.76	80.53%	\$1,430.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23220	RESECT PROX HUMERUS TUMOR		\$1,565.60	\$1,942.33	\$1,942.33	\$1,942.33	80.60%	\$1,565.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23330	REMOVE SHOULDER FOREIGN BODY		\$138.40	\$313.19	\$173.33	\$170.63	81.11%	\$138.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23333	REMOVE SHOULDER FB DEEP		\$391.80	\$489.66	\$489.66	\$489.66	80.01%	\$391.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23334	SHOULDER PROSTHESIS REMOVAL		\$862.80	\$1,074.97	\$1,074.97	\$1,074.97	80.26%	\$862.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23335	SHOULDER PROSTHESIS REMOVAL		\$1,030.40	\$1,281.18	\$1,281.18	\$1,281.18	80.43%	\$1,030.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23350	INJECTION FOR SHOULDER X-RAY		\$79.46	\$167.75	\$49.28	\$95.70	83.03%	\$79.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23395	MUSCLE TRANSFER SHOULDER/ARM		\$1,045.60	\$1,302.85	\$1,302.85	\$1,302.85	80.25%	\$1,045.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23397	MUSCLE TRANSFERS		\$928.80	\$1,156.32	\$1,156.32	\$1,156.32	80.32%	\$928.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23400	FIXATION OF SHOULDER BLADE		\$796.00	\$989.71	\$989.71	\$989.71	80.43%	\$796.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23405	INCISION OF TENDON & MUSCLE		\$508.18	\$631.37	\$631.37	\$631.37	80.49%	\$508.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23410	REPAIR ROTATOR CUFF ACUTE		\$673.47	\$837.17	\$837.17	\$837.17	80.45%	\$673.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23412	REPAIR ROTATOR CUFF CHRONIC		\$699.11	\$869.81	\$869.81	\$869.81	80.37%	\$699.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23415	RELEASE OF SHOULDER LIGAMENT		\$576.11	\$717.31	\$717.31	\$717.31	80.32%	\$576.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23420	REPAIR OF SHOULDER		\$798.63	\$994.03	\$994.03	\$994.03	80.34%	\$798.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23430	REPAIR BICEPS TENDON		\$612.62	\$762.87	\$762.87	\$762.87	80.31%	\$612.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	23440	REMOVE/TRANSPLANT TENDON		\$620.80	\$774.20	\$774.20	\$774.20	80.19%	\$620.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23455	REPAIR SHOULDER CAPSULE		\$807.20	\$1,000.83	\$1,000.83	\$1,000.83	80.65%	\$807.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23460	REPAIR SHOULDER CAPSULE		\$890.00	\$1,106.66	\$1,106.66	\$1,106.66	80.42%	\$890.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23462	REPAIR SHOULDER CAPSULE		\$870.47	\$1,082.07	\$1,082.07	\$1,082.07	80.44%	\$870.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23465	REPAIR SHOULDER CAPSULE		\$912.40	\$1,134.28	\$1,134.28	\$1,134.28	80.44%	\$912.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23466	REPAIR SHOULDER CAPSULE		\$917.34	\$1,142.89	\$1,142.89	\$1,142.89	80.26%	\$917.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23470	RECONSTRUCT SHOULDER JOINT		\$975.05	\$1,211.86	\$1,211.86	\$1,211.86	80.46%	\$975.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23472	RECONSTRUCT SHOULDER JOINT		\$1,173.06	\$1,456.20	\$1,456.20	\$1,456.20	80.56%	\$1,173.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23473	REVIS RECONST SHOULDER JOINT		\$1,304.80	\$1,618.19	\$1,618.19	\$1,618.19	80.63%	\$1,304.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23474	REVIS RECONST SHOULDER JOINT		\$1,407.70	\$1,745.66	\$1,745.66	\$1,745.66	80.64%	\$1,407.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23480	REVISION OF COLLAR BONE		\$673.06	\$837.32	\$837.32	\$837.32	80.38%	\$673.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23485	REVISION OF COLLAR BONE		\$779.49	\$969.27	\$969.27	\$969.27	80.42%	\$779.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23500	TREAT CLAVICLE FRACTURE		\$193.51	\$239.44	\$245.05	\$242.98	79.64%	\$193.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23505	TREAT CLAVICLE FRACTURE		\$281.60	\$382.45	\$354.06	\$353.82	79.59%	\$281.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23515	TREAT CLAVICLE FRACTURE		\$594.20	\$739.65	\$739.65	\$739.65	80.34%	\$594.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23520	TREAT CLAVICLE DISLOCATION		\$204.40	\$258.03	\$255.92	\$256.59	79.66%	\$204.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23525	TREAT CLAVICLE DISLOCATION		\$307.20	\$423.45	\$385.59	\$386.25	79.53%	\$307.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23530	TREAT CLAVICLE DISLOCATION		\$477.06	\$594.12	\$594.12	\$594.12	80.30%	\$477.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23532	TREAT CLAVICLE DISLOCATION		\$518.40	\$645.89	\$645.89	\$645.89	80.26%	\$518.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23540	TREAT CLAVICLE DISLOCATION		\$203.70	\$255.47	\$253.36	\$254.66	79.99%	\$203.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23545	TREAT CLAVICLE DISLOCATION		\$273.54	\$385.38	\$344.37	\$344.19	79.47%	\$273.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23550	TREAT CLAVICLE DISLOCATION		\$473.82	\$589.62	\$589.62	\$589.62	80.36%	\$473.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23552	TREAT CLAVICLE DISLOCATION		\$534.84	\$667.60	\$667.60	\$667.60	80.11%	\$534.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23570	TREAT SHOULDER BLADE FX		\$204.50	\$251.26	\$260.02	\$257.03	79.56%	\$204.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23575	TREAT SHOULDER BLADE FX		\$320.00	\$436.06	\$401.36	\$401.41	79.72%	\$320.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23585	TREAT SCAPULA FRACTURE		\$798.31	\$991.65	\$991.65	\$991.65	80.50%	\$798.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23600	TREAT HUMERUS FRACTURE		\$276.42	\$357.36	\$338.43	\$346.95	79.67%	\$276.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23605	TREAT HUMERUS FRACTURE		\$358.88	\$496.98	\$449.31	\$449.25	79.88%	\$358.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23615	TREAT HUMERUS FRACTURE		\$724.71	\$902.03	\$902.03	\$902.03	80.34%	\$724.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23616	TREAT HUMERUS FRACTURE		\$1,006.40	\$1,251.43	\$1,251.43	\$1,251.43	80.42%	\$1,006.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	23620	TREAT HUMERUS FRACTURE		\$225.76	\$290.71	\$278.09	\$283.21	79.71%	\$225.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23625	TREAT HUMERUS FRACTURE		\$328.80	\$409.84	\$373.38	\$409.84	80.23%	\$328.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23630	TREAT HUMERUS FRACTURE		\$642.70	\$801.05	\$801.05	\$801.05	80.23%	\$642.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23650	TREAT SHOULDER DISLOCATION		\$253.58	\$354.46	\$318.71	\$319.44	79.38%	\$253.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23655	TREAT SHOULDER DISLOCATION		\$341.70	\$427.22	\$427.22	\$427.22	79.98%	\$341.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23660	TREAT SHOULDER DISLOCATION		\$485.60	\$603.67	\$603.67	\$603.67	80.44%	\$485.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23665	TREAT DISLOCATION/FRACTURE		\$336.00	\$461.37	\$422.47	\$422.37	79.55%	\$336.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23670	TREAT DISLOCATION/FRACTURE		\$714.24	\$890.69	\$890.69	\$890.69	80.19%	\$714.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23680	TREAT DISLOCATION/FRACTURE		\$761.60	\$938.99	\$938.99	\$938.99	81.11%	\$761.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23700	FIXATION OF SHOULDER		\$161.66	\$201.30	\$201.30	\$201.30	80.31%	\$161.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23920	AMPUTATION AT SHOULDER JOINT		\$916.00	\$1,140.07	\$1,140.07	\$1,140.07	80.35%	\$916.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23930	DRAINAGE OF ARM LESION		\$176.41	\$370.74	\$219.67	\$216.81	81.36%	\$176.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23931	DRAINAGE OF ARM BURSA		\$165.78	\$315.68	\$167.07	\$203.89	81.31%	\$165.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	23935	DRAIN ARM/ELBOW BONE LESION		\$426.60	\$532.60	\$532.60	\$532.60	80.10%	\$426.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24000	EXPLORATORY ELBOW SURGERY		\$397.17	\$495.92	\$495.92	\$495.92	80.09%	\$397.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24006	RELEASE ELBOW JOINT		\$586.94	\$733.14	\$733.14	\$733.14	80.06%	\$586.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24065	BIOPSY ARM/ELBOW SOFT TISSUE		\$216.80	\$268.51	\$167.21	\$268.51	80.74%	\$216.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24066	BIOPSY ARM/ELBOW SOFT TISSUE		\$347.57	\$648.62	\$435.85	\$431.83	80.49%	\$347.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24071	EXC ARM/ELBOW LES SC 3 CM/>		\$331.54	\$413.59	\$413.59	\$413.59	80.16%	\$331.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24073	EX ARM/ELBOW TUM DEEP 5 CM/>		\$565.20	\$703.36	\$703.36	\$703.36	80.36%	\$565.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24075	EXC ARM/ELBOW LES SC < 3 CM		\$316.07	\$548.41	\$339.15	\$387.28	81.61%	\$316.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24076	EX ARM/ELBOW TUM DEEP < 5 CM		\$450.40	\$560.50	\$560.50	\$560.50	80.36%	\$450.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24077	RESECT ARM/ELBOW TUM < 5 CM		\$838.40	\$1,035.65	\$1,035.65	\$1,035.65	80.95%	\$838.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24079	RESECT ARM/ELBOW TUM 5 CM/>		\$1,070.66	\$1,332.21	\$1,332.21	\$1,332.21	80.37%	\$1,070.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24101	EXPLORE/TREAT ELBOW JOINT		\$419.54	\$521.81	\$521.81	\$521.81	80.40%	\$419.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24105	REMOVAL OF ELBOW BURSA		\$302.30	\$378.47	\$378.47	\$378.47	79.87%	\$302.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24110	REMOVE HUMERUS LESION		\$489.40	\$610.29	\$610.29	\$610.29	80.19%	\$489.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24120	REMOVE ELBOW LESION		\$442.18	\$551.32	\$551.32	\$551.32	80.20%	\$442.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24130	REMOVAL OF HEAD OF RADIUS		\$426.60	\$529.69	\$529.69	\$529.69	80.54%	\$426.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24134	REMOVAL OF ARM BONE LESION		\$615.20	\$766.24	\$766.24	\$766.24	80.29%	\$615.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	24140	PARTIAL REMOVAL OF ARM BONE		\$580.00	\$721.58	\$721.58	\$721.58	80.38%	\$580.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24147	PARTIAL REMOVAL OF ELBOW		\$521.60	\$649.39	\$649.39	\$649.39	80.32%	\$521.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24149	RADICAL RESECTION OF ELBOW		\$968.26	\$1,205.86	\$1,205.86	\$1,205.86	80.30%	\$968.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24160	REMOVE ELBOW JOINT IMPLANT		\$1,023.20	\$1,270.97	\$1,270.97	\$1,270.97	80.51%	\$1,023.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24164	REMOVE RADIUS HEAD IMPLANT		\$596.00	\$742.41	\$742.41	\$742.41	80.28%	\$596.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24200	REMOVAL OF ARM FOREIGN BODY		\$135.26	\$227.90	\$145.53	\$170.33	79.41%	\$135.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24201	REMOVAL OF ARM FOREIGN BODY		\$318.96	\$640.08	\$415.75	\$443.96	71.84%	\$318.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24220	INJECTION FOR ELBOW X-RAY		\$61.26	\$195.80	\$65.76	\$74.17	82.60%	\$61.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24300	MANIPULATE ELBOW W/ANESTH		\$368.00	\$464.66	\$464.66	\$464.66	79.20%	\$368.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24301	MUSCLE/TENDON TRANSFER		\$619.30	\$768.53	\$768.53	\$768.53	80.58%	\$619.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24305	ARM TENDON LENGTHENING		\$479.82	\$598.79	\$598.79	\$598.79	80.13%	\$479.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24340	REPAIR OF BICEPS TENDON		\$496.54	\$615.83	\$615.83	\$615.83	80.63%	\$496.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24341	REPAIR ARM TENDON/MUSCLE		\$618.48	\$773.85	\$773.85	\$773.85	79.92%	\$618.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24342	REPAIR OF RUPTURED TENDON		\$636.58	\$791.85	\$791.85	\$791.85	80.39%	\$636.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24343	REPR ELBOW LAT LIGMNT W/TISS		\$591.39	\$737.29	\$737.29	\$737.29	80.21%	\$591.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24344	RECONSTRUCT ELBOW LAT LIGMNT		\$895.71	\$1,127.40	\$1,127.40	\$1,127.40	79.45%	\$895.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24345	REPR ELBW MED LIGMNT W/TISSU		\$587.89	\$733.71	\$733.71	\$733.71	80.13%	\$587.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24346	RECONSTRUCT ELBOW MED LIGMNT		\$905.20	\$1,127.40	\$1,127.40	\$1,127.40	80.29%	\$905.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24357	REPAIR ELBOW PERC		\$348.26	\$432.44	\$432.44	\$432.44	80.53%	\$348.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24358	REPAIR ELBOW W/DEB OPEN		\$439.52	\$549.21	\$549.21	\$549.21	80.03%	\$439.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24359	REPAIR ELBOW DEB/ATTCH OPEN		\$547.47	\$682.83	\$682.83	\$682.83	80.18%	\$547.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24360	RECONSTRUCT ELBOW JOINT		\$740.00	\$921.03	\$921.03	\$921.03	80.35%	\$740.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24363	REPLACE ELBOW JOINT		\$1,176.80	\$1,462.93	\$1,462.93	\$1,462.93	80.44%	\$1,176.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24366	RECONSTRUCT HEAD OF RADIUS		\$560.80	\$697.93	\$697.93	\$697.93	80.35%	\$560.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24370	REVISE RECONST ELBOW JOINT		\$1,248.80	\$1,549.23	\$1,549.23	\$1,549.23	80.61%	\$1,248.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24371	REVISE RECONST ELBOW JOINT		\$1,432.00	\$1,778.08	\$1,778.08	\$1,778.08	80.54%	\$1,432.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24400	REVISION OF HUMERUS		\$680.48	\$846.58	\$846.58	\$846.58	80.38%	\$680.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24430	REPAIR OF HUMERUS		\$862.65	\$1,072.64	\$1,072.64	\$1,072.64	80.42%	\$862.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24435	REPAIR HUMERUS WITH GRAFT		\$884.20	\$1,102.27	\$1,102.27	\$1,102.27	80.22%	\$884.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24500	TREAT HUMERUS FRACTURE		\$295.31	\$388.59	\$357.04	\$371.74	79.44%	\$295.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	24505	TREAT HUMERUS FRACTURE		\$384.63	\$533.74	\$475.20	\$482.61	79.70%	\$384.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24515	TREAT HUMERUS FRACTURE		\$723.65	\$900.07	\$900.07	\$900.07	80.40%	\$723.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24516	TREAT HUMERUS FRACTURE		\$704.34	\$875.56	\$875.56	\$875.56	80.44%	\$704.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24530	TREAT HUMERUS FRACTURE		\$314.22	\$409.53	\$374.12	\$394.18	79.72%	\$314.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24535	TREAT HUMERUS FRACTURE		\$481.77	\$654.16	\$598.08	\$605.34	79.59%	\$481.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24538	TREAT HUMERUS FRACTURE		\$654.61	\$813.16	\$813.16	\$813.16	80.50%	\$654.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24545	TREAT HUMERUS FRACTURE		\$759.44	\$946.72	\$946.72	\$946.72	80.22%	\$759.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24546	TREAT HUMERUS FRACTURE		\$847.63	\$1,054.82	\$1,054.82	\$1,054.82	80.36%	\$847.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24560	TREAT HUMERUS FRACTURE		\$270.46	\$356.69	\$314.98	\$338.47	79.91%	\$270.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24565	TREAT HUMERUS FRACTURE		\$415.31	\$571.81	\$519.93	\$520.12	79.85%	\$415.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24575	TREAT HUMERUS FRACTURE		\$604.35	\$753.99	\$753.99	\$753.99	80.15%	\$604.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24576	TREAT HUMERUS FRACTURE		\$281.30	\$378.50	\$336.09	\$354.33	79.39%	\$281.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24579	TREAT HUMERUS FRACTURE		\$686.64	\$855.05	\$855.05	\$855.05	80.30%	\$686.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24582	TREAT HUMERUS FRACTURE		\$675.89	\$842.93	\$842.93	\$842.93	80.18%	\$675.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24586	TREAT ELBOW FRACTURE		\$887.60	\$1,103.34	\$1,103.34	\$1,103.34	80.45%	\$887.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24600	TREAT ELBOW DISLOCATION		\$289.71	\$399.52	\$360.26	\$362.46	79.93%	\$289.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24605	TREAT ELBOW DISLOCATION		\$399.89	\$499.49	\$499.49	\$499.49	80.06%	\$399.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24615	TREAT ELBOW DISLOCATION		\$588.32	\$731.50	\$731.50	\$731.50	80.43%	\$588.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24620	TREAT ELBOW FRACTURE		\$489.38	\$611.99	\$611.99	\$611.99	79.97%	\$489.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24635	TREAT ELBOW FRACTURE		\$559.31	\$696.14	\$696.14	\$696.14	80.34%	\$559.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24640	TREAT ELBOW DISLOCATION		\$67.49	\$108.21	\$82.28	\$84.05	80.30%	\$67.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24650	TREAT RADIUS FRACTURE		\$217.46	\$284.43	\$264.45	\$273.49	79.51%	\$217.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24655	TREAT RADIUS FRACTURE		\$351.89	\$478.76	\$429.69	\$443.88	79.28%	\$351.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24665	TREAT RADIUS FRACTURE		\$544.44	\$678.98	\$678.98	\$678.98	80.19%	\$544.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24666	TREAT RADIUS FRACTURE		\$604.15	\$751.79	\$751.79	\$751.79	80.36%	\$604.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24670	TREAT ULNAR FRACTURE		\$239.70	\$314.11	\$286.42	\$301.02	79.63%	\$239.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24675	TREAT ULNAR FRACTURE		\$351.31	\$487.49	\$439.82	\$439.75	79.89%	\$351.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24685	TREAT ULNAR FRACTURE		\$541.08	\$674.88	\$674.88	\$674.88	80.17%	\$541.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24800	FUSION OF ELBOW JOINT		\$684.80	\$853.44	\$853.44	\$853.44	80.24%	\$684.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	24900	AMPUTATION OF UPPER ARM		\$605.34	\$756.26	\$756.26	\$756.26	80.04%	\$605.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	24920	AMPUTATION OF UPPER ARM		\$603.20	\$750.41	\$750.41	\$750.41	80.38%	\$603.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25000	INCISION OF TENDON SHEATH		\$290.88	\$363.92	\$363.92	\$363.92	79.93%	\$290.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25001	INCISE FLEXOR CARPI RADIALIS		\$290.40	\$365.01	\$365.01	\$365.01	79.56%	\$290.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25020	DECOMPRESS FOREARM 1 SPACE		\$626.15	\$767.55	\$767.55	\$767.55	81.58%	\$626.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25023	DECOMPRESS FOREARM 1 SPACE		\$1,087.20	\$1,344.79	\$1,344.79	\$1,344.79	80.85%	\$1,087.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25024	DECOMPRESS FOREARM 2 SPACES		\$636.22	\$797.89	\$797.89	\$797.89	79.74%	\$636.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25025	DECOMPRESS FOREARM 2 SPACES		\$1,000.11	\$1,243.61	\$1,243.61	\$1,243.61	80.42%	\$1,000.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25028	DRAINAGE OF FOREARM LESION		\$583.94	\$719.81	\$719.81	\$719.81	81.12%	\$583.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25031	DRAINAGE OF FOREARM BURSA		\$307.80	\$384.84	\$384.84	\$384.84	79.98%	\$307.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25035	TREAT FOREARM BONE LESION		\$485.60	\$608.64	\$608.64	\$608.64	79.78%	\$485.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25040	EXPLORE/TREAT WRIST JOINT		\$462.65	\$575.76	\$575.76	\$575.76	80.35%	\$462.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25065	BIOPSY FOREARM SOFT TISSUES		\$130.00	\$265.64	\$162.23	\$161.04	80.73%	\$130.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25066	BIOPSY FOREARM SOFT TISSUES		\$306.54	\$382.82	\$382.82	\$382.82	80.07%	\$306.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25071	EXC FOREARM LES SC 3 CM/>		\$347.66	\$434.11	\$434.11	\$434.11	80.09%	\$347.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25073	EXC FOREARM TUM DEEP 3 CM/>		\$442.54	\$550.66	\$550.66	\$550.66	80.37%	\$442.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25075	EXC FOREARM LES SC < 3 CM		\$334.24	\$536.68	\$326.37	\$410.54	81.42%	\$334.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25076	EXC FOREARM TUM DEEP < 3 CM		\$429.94	\$535.27	\$535.27	\$535.27	80.32%	\$429.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25077	RESECT FOREARM/WRIST TUM<3CM		\$723.20	\$865.52	\$865.52	\$865.52	83.56%	\$723.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25078	RESECT FORARM/WRIST TUM 3CM>		\$946.40	\$1,176.05	\$1,176.05	\$1,176.05	80.47%	\$946.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25085	INCISION OF WRIST CAPSULE		\$373.20	\$466.51	\$466.51	\$466.51	80.00%	\$373.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25100	BIOPSY OF WRIST JOINT		\$292.80	\$366.02	\$366.02	\$366.02	80.00%	\$292.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25101	EXPLORE/TREAT WRIST JOINT		\$338.00	\$423.76	\$423.76	\$423.76	79.76%	\$338.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25105	REMOVE WRIST JOINT LINING		\$406.40	\$506.28	\$506.28	\$506.28	80.27%	\$406.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25107	REMOVE WRIST JOINT CARTILAGE		\$513.00	\$640.81	\$640.81	\$640.81	80.05%	\$513.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25109	EXCISE TENDON FOREARM/WRIST		\$445.26	\$555.02	\$555.02	\$555.02	80.22%	\$445.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25110	REMOVE WRIST TENDON LESION		\$290.40	\$361.81	\$361.81	\$361.81	80.26%	\$290.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25111	REMOVE WRIST TENDON LESION		\$272.69	\$341.52	\$341.52	\$341.52	79.85%	\$272.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25112	REREMOVE WRIST TENDON LESION		\$326.16	\$408.26	\$408.26	\$408.26	79.89%	\$326.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25115	REMOVE WRIST/FOREARM LESION		\$625.06	\$778.89	\$778.89	\$778.89	80.25%	\$625.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25116	REMOVE WRIST/FOREARM LESION		\$501.60	\$626.73	\$626.73	\$626.73	80.04%	\$501.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	25118	EXCISE WRIST TENDON SHEATH		\$320.21	\$400.46	\$400.46	\$400.46	79.96%	\$320.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25119	PARTIAL REMOVAL OF ULNA		\$418.00	\$521.22	\$521.22	\$521.22	80.20%	\$418.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25120	REMOVAL OF FOREARM LESION		\$417.83	\$520.95	\$520.95	\$520.95	80.21%	\$417.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25125	REMOVE/GRAFT FOREARM LESION		\$493.60	\$615.62	\$615.62	\$615.62	80.18%	\$493.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25130	REMOVAL OF WRIST LESION		\$376.94	\$470.36	\$470.36	\$470.36	80.14%	\$376.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25135	REMOVE & GRAFT WRIST LESION		\$465.20	\$581.58	\$581.58	\$581.58	79.99%	\$465.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25136	REMOVE & GRAFT WRIST LESION		\$414.40	\$516.91	\$516.91	\$516.91	80.17%	\$414.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25145	REMOVE FOREARM BONE LESION		\$432.80	\$540.52	\$540.52	\$540.52	80.07%	\$432.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25150	PARTIAL REMOVAL OF ULNA		\$470.40	\$585.48	\$585.48	\$585.48	80.34%	\$470.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25151	PARTIAL REMOVAL OF RADIUS		\$484.54	\$603.54	\$603.54	\$603.54	80.28%	\$484.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25170	RESECT RADIUS/ULNAR TUMOR		\$1,190.80	\$1,479.46	\$1,479.46	\$1,479.46	80.49%	\$1,190.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25210	REMOVAL OF WRIST BONE		\$410.90	\$512.71	\$512.71	\$512.71	80.14%	\$410.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25215	REMOVAL OF WRIST BONES		\$513.44	\$639.75	\$639.75	\$639.75	80.26%	\$513.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25230	PARTIAL REMOVAL OF RADIUS		\$361.03	\$450.82	\$450.82	\$450.82	80.08%	\$361.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25240	PARTIAL REMOVAL OF ULNA		\$358.56	\$448.11	\$448.11	\$448.11	80.02%	\$358.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25246	INJECTION FOR WRIST X-RAY		\$91.86	\$201.40	\$72.41	\$111.22	82.59%	\$91.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25248	REMOVE FOREARM FOREIGN BODY		\$344.94	\$439.84	\$439.84	\$439.84	78.42%	\$344.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25259	MANIPULATE WRIST W/ANESTHES		\$364.54	\$456.67	\$456.67	\$456.67	79.83%	\$364.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25260	REPAIR FOREARM TENDON/MUSCLE		\$527.36	\$656.37	\$656.37	\$656.37	80.34%	\$527.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25265	REPAIR FOREARM TENDON/MUSCLE		\$619.34	\$773.94	\$773.94	\$773.94	80.02%	\$619.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25270	REPAIR FOREARM TENDON/MUSCLE		\$411.64	\$513.11	\$513.11	\$513.11	80.22%	\$411.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25272	REPAIR FOREARM TENDON/MUSCLE		\$464.32	\$579.05	\$579.05	\$579.05	80.19%	\$464.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25274	REPAIR FOREARM TENDON/MUSCLE		\$551.20	\$684.69	\$684.69	\$684.69	80.50%	\$551.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25275	REPAIR FOREARM TENDON SHEATH		\$556.00	\$692.63	\$692.63	\$692.63	80.27%	\$556.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25280	REVISE WRIST/FOREARM TENDON		\$469.44	\$585.49	\$585.49	\$585.49	80.18%	\$469.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25290	INCISE WRIST/FOREARM TENDON		\$363.24	\$453.81	\$453.81	\$453.81	80.04%	\$363.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25295	RELEASE WRIST/FOREARM TENDON		\$438.38	\$546.11	\$546.11	\$546.11	80.27%	\$438.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25300	FUSION OF TENDONS AT WRIST		\$570.80	\$711.11	\$711.11	\$711.11	80.27%	\$570.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25301	FUSION OF TENDONS AT WRIST		\$532.48	\$663.64	\$663.64	\$663.64	80.24%	\$532.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25310	TRANSPLANT FOREARM TENDON		\$515.29	\$642.09	\$642.09	\$642.09	80.25%	\$515.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	25312	TRANSPLANT FOREARM TENDON		\$592.00	\$736.75	\$736.75	\$736.75	80.35%	\$592.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25320	REPAIR/REVISE WRIST JOINT		\$815.66	\$1,018.80	\$1,018.80	\$1,018.80	80.06%	\$815.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25332	REVISE WRIST JOINT		\$695.40	\$865.49	\$865.49	\$865.49	80.35%	\$695.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25337	RECONSTRUCT ULNA/RADIOULNAR		\$732.64	\$912.98	\$912.98	\$912.98	80.25%	\$732.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25350	REVISION OF RADIUS		\$558.04	\$694.11	\$694.11	\$694.11	80.40%	\$558.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25360	REVISION OF ULNA		\$542.40	\$676.05	\$676.05	\$676.05	80.23%	\$542.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25390	SHORTEN RADIUS OR ULNA		\$633.40	\$787.51	\$787.51	\$787.51	80.43%	\$633.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25391	LENGTHEN RADIUS OR ULNA		\$815.20	\$1,013.03	\$1,013.03	\$1,013.03	80.47%	\$815.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25400	REPAIR RADIUS OR ULNA		\$660.35	\$820.21	\$820.21	\$820.21	80.51%	\$660.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25405	REPAIR/GRAFT RADIUS OR ULNA		\$848.10	\$1,054.30	\$1,054.30	\$1,054.30	80.44%	\$848.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25415	REPAIR RADIUS & ULNA		\$792.80	\$985.40	\$985.40	\$985.40	80.45%	\$792.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25430	VASC GRAFT INTO CARPAL BONE		\$603.60	\$752.76	\$752.76	\$752.76	80.18%	\$603.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25431	REPAIR NONUNION CARPAL BONE		\$648.00	\$806.68	\$806.68	\$806.68	80.33%	\$648.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25440	REPAIR/GRAFT WRIST BONE		\$632.78	\$787.81	\$787.81	\$787.81	80.32%	\$632.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25444	RECONSTRUCT WRIST JOINT		\$680.80	\$842.16	\$842.16	\$842.16	80.84%	\$680.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25445	RECONSTRUCT WRIST JOINT		\$595.20	\$739.67	\$739.67	\$739.67	80.47%	\$595.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25446	WRIST REPLACEMENT		\$957.20	\$1,189.89	\$1,189.89	\$1,189.89	80.44%	\$957.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25447	REPAIR WRIST JOINTS		\$686.41	\$854.95	\$854.95	\$854.95	80.29%	\$686.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25449	REMOVE WRIST JOINT IMPLANT		\$846.00	\$1,051.22	\$1,051.22	\$1,051.22	80.48%	\$846.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25450	REVISION OF WRIST JOINT		\$511.20	\$637.57	\$637.57	\$637.57	80.18%	\$511.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25455	REVISION OF WRIST JOINT		\$603.20	\$751.01	\$751.01	\$751.01	80.32%	\$603.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25500	TREAT FRACTURE OF RADIUS		\$233.51	\$306.41	\$276.61	\$293.97	79.43%	\$233.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25505	TREAT FRACTURE OF RADIUS		\$399.81	\$538.55	\$485.63	\$501.91	79.66%	\$399.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25515	TREAT FRACTURE OF RADIUS		\$554.09	\$691.94	\$691.94	\$691.94	80.08%	\$554.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25520	TREAT FRACTURE OF RADIUS		\$461.76	\$606.56	\$570.45	\$577.24	79.99%	\$461.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25525	TREAT FRACTURE OF RADIUS		\$652.61	\$812.44	\$812.44	\$812.44	80.33%	\$652.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25526	TREAT FRACTURE OF RADIUS		\$785.20	\$978.17	\$978.17	\$978.17	80.27%	\$785.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25530	TREAT FRACTURE OF ULNA		\$217.49	\$285.74	\$261.56	\$274.26	79.30%	\$217.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25535	TREAT FRACTURE OF ULNA		\$397.60	\$523.72	\$481.66	\$497.84	79.86%	\$397.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25545	TREAT FRACTURE OF ULNA		\$518.61	\$646.56	\$646.56	\$646.56	80.21%	\$518.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	25560	TREAT FRACTURE RADIUS & ULNA		\$236.76	\$312.31	\$277.96	\$297.61	79.55%	\$236.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25565	TREAT FRACTURE RADIUS & ULNA		\$397.77	\$547.87	\$487.23	\$496.00	80.20%	\$397.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25574	TREAT FRACTURE RADIUS & ULNA		\$559.36	\$696.34	\$696.34	\$696.34	80.33%	\$559.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25575	TREAT FRACTURE RADIUS/ULNA		\$743.80	\$926.31	\$926.31	\$926.31	80.30%	\$743.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25600	TREAT FRACTURE RADIUS/ULNA		\$284.10	\$364.72	\$348.60	\$356.84	79.61%	\$284.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25605	TREAT FRACTURE RADIUS/ULNA		\$431.20	\$568.83	\$535.53	\$539.19	79.97%	\$431.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25606	TREAT FX DISTAL RADIAL		\$554.54	\$692.77	\$692.77	\$692.77	80.05%	\$554.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25607	TREAT FX RAD EXTRA-ARTICUL		\$612.42	\$763.78	\$763.78	\$763.78	80.18%	\$612.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25608	TREAT FX RAD INTRA-ARTICUL		\$682.66	\$851.37	\$851.37	\$851.37	80.18%	\$682.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25609	TREAT FX RADIAL 3+ FRAG		\$864.94	\$1,077.10	\$1,077.10	\$1,077.10	80.30%	\$864.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25622	TREAT WRIST BONE FRACTURE		\$252.63	\$330.78	\$304.50	\$317.28	79.62%	\$252.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25624	TREAT WRIST BONE FRACTURE		\$396.00	\$522.40	\$471.22	\$497.04	79.67%	\$396.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25628	TREAT WRIST BONE FRACTURE		\$594.26	\$739.88	\$739.88	\$739.88	80.32%	\$594.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25630	TREAT WRIST BONE FRACTURE		\$256.70	\$327.24	\$303.41	\$321.81	79.77%	\$256.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25635	TREAT WRIST BONE FRACTURE		\$356.80	\$495.52	\$447.85	\$447.99	79.64%	\$356.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25645	TREAT WRIST BONE FRACTURE		\$474.00	\$590.43	\$590.43	\$590.43	80.28%	\$474.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25650	TREAT WRIST BONE FRACTURE		\$269.94	\$352.86	\$326.22	\$337.41	80.00%	\$269.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25651	PIN ULNAR STYLOID FRACTURE		\$409.20	\$512.34	\$512.34	\$512.34	79.87%	\$409.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25652	TREAT FRACTURE ULNAR STYLOID		\$516.71	\$644.05	\$644.05	\$644.05	80.23%	\$516.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25660	TREAT WRIST DISLOCATION		\$377.60	\$472.99	\$472.99	\$472.99	79.83%	\$377.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25670	TREAT WRIST DISLOCATION		\$503.40	\$626.48	\$626.48	\$626.48	80.35%	\$503.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25671	PIN RADIOULNAR DISLOCATION		\$442.66	\$557.27	\$557.27	\$557.27	79.43%	\$442.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25675	TREAT WRIST DISLOCATION		\$346.80	\$484.41	\$435.34	\$434.82	79.76%	\$346.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25676	TREAT WRIST DISLOCATION		\$522.40	\$651.49	\$651.49	\$651.49	80.19%	\$522.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25680	TREAT WRIST FRACTURE		\$444.00	\$554.84	\$554.84	\$554.84	80.02%	\$444.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25685	TREAT WRIST FRACTURE		\$605.44	\$754.05	\$754.05	\$754.05	80.29%	\$605.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25690	TREAT WRIST DISLOCATION		\$412.00	\$515.89	\$515.89	\$515.89	79.86%	\$412.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25695	TREAT WRIST DISLOCATION		\$524.16	\$653.04	\$653.04	\$653.04	80.26%	\$524.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25800	FUSION OF WRIST JOINT		\$604.00	\$749.82	\$749.82	\$749.82	80.55%	\$604.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25810	FUSION/GRAFT OF WRIST JOINT		\$713.60	\$888.36	\$888.36	\$888.36	80.33%	\$713.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	25820	FUSION OF HAND BONES		\$541.28	\$671.10	\$671.10	\$671.10	80.66%	\$541.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25825	FUSE HAND BONES WITH GRAFT		\$658.90	\$817.94	\$817.94	\$817.94	80.56%	\$658.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25830	FUSION RADIOULNAR JNT/ULNA		\$846.00	\$1,061.17	\$1,061.17	\$1,061.17	79.72%	\$846.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	25900	AMPUTATION OF FOREARM		\$590.40	\$736.49	\$736.49	\$736.49	80.16%	\$590.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26010	DRAINAGE OF FINGER ABSCESS		\$135.34	\$358.72	\$146.31	\$165.65	81.70%	\$135.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26011	DRAINAGE OF FINGER ABSCESS		\$162.79	\$495.85	\$190.90	\$196.99	82.64%	\$162.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26020	DRAIN HAND TENDON SHEATH		\$462.51	\$576.13	\$576.13	\$576.13	80.28%	\$462.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26025	DRAINAGE OF PALM BURSA		\$349.26	\$434.86	\$434.86	\$434.86	80.32%	\$349.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26030	DRAINAGE OF PALM BURSAS		\$407.86	\$508.71	\$508.71	\$508.71	80.17%	\$407.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26034	TREAT HAND BONE LESION		\$458.70	\$572.26	\$572.26	\$572.26	80.16%	\$458.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26035	DECOMPRESS FINGERS/HAND		\$709.00	\$883.72	\$883.72	\$883.72	80.23%	\$709.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26037	DECOMPRESS FINGERS/HAND		\$464.20	\$578.04	\$578.04	\$578.04	80.31%	\$464.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26040	RELEASE PALM CONTRACTURE		\$265.80	\$332.11	\$332.11	\$332.11	80.03%	\$265.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26045	RELEASE PALM CONTRACTURE		\$393.84	\$491.52	\$491.52	\$491.52	80.13%	\$393.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26055	INCISE FINGER TENDON SHEATH		\$273.68	\$615.17	\$305.67	\$335.16	81.66%	\$273.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26070	EXPLORE/TREAT HAND JOINT		\$270.40	\$338.14	\$338.14	\$338.14	79.97%	\$270.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26075	EXPLORE/TREAT FINGER JOINT		\$283.77	\$354.17	\$354.17	\$354.17	80.12%	\$283.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26080	EXPLORE/TREAT FINGER JOINT		\$333.92	\$417.70	\$417.70	\$417.70	79.94%	\$333.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26105	BIOPSY FINGER JOINT LINING		\$286.80	\$358.19	\$358.19	\$358.19	80.07%	\$286.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26110	BIOPSY FINGER JOINT LINING		\$273.34	\$341.19	\$341.19	\$341.19	80.11%	\$273.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26111	EXC HAND LES SC 1.5 CM/>		\$343.90	\$429.49	\$429.49	\$429.49	80.07%	\$343.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26113	EXC HAND TUM DEEP 1.5 CM/>		\$452.86	\$564.95	\$564.95	\$564.95	80.16%	\$452.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26115	EXC HAND LES SC < 1.5 CM		\$310.67	\$572.04	\$345.95	\$382.69	81.18%	\$310.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26116	EXC HAND TUM DEEP < 1.5 CM		\$435.59	\$543.01	\$543.01	\$543.01	80.22%	\$435.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26117	RAD RESECT HAND TUMOR < 3 CM		\$610.40	\$762.83	\$762.83	\$762.83	80.02%	\$610.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26121	RELEASE PALM CONTRACTURE		\$497.60	\$619.79	\$619.79	\$619.79	80.29%	\$497.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26123	RELEASE PALM CONTRACTURE		\$692.82	\$863.50	\$863.50	\$863.50	80.23%	\$692.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26125	RELEASE PALM CONTRACTURE		\$215.78	\$266.98	\$266.98	\$266.98	80.82%	\$215.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26145	TENDON EXCISION PALM/FINGER		\$429.34	\$535.54	\$535.54	\$535.54	80.17%	\$429.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26160	REMOVE TENDON SHEATH LESION		\$305.83	\$641.50	\$330.94	\$375.23	81.50%	\$305.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	26170	REMOVAL OF PALM TENDON EACH		\$341.40	\$425.97	\$425.97	\$425.97	80.15%	\$341.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26180	REMOVAL OF FINGER TENDON		\$375.94	\$469.50	\$469.50	\$469.50	80.07%	\$375.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26200	REMOVE HAND BONE LESION		\$376.14	\$468.53	\$468.53	\$468.53	80.28%	\$376.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26205	REMOVE/GRAFT BONE LESION		\$500.80	\$623.97	\$623.97	\$623.97	80.26%	\$500.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26210	REMOVAL OF FINGER LESION		\$374.56	\$467.45	\$467.45	\$467.45	80.13%	\$374.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26215	REMOVE/GRAFT FINGER LESION		\$470.94	\$586.60	\$586.60	\$586.60	80.28%	\$470.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26230	PARTIAL REMOVAL OF HAND BONE		\$415.70	\$517.70	\$517.70	\$517.70	80.30%	\$415.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26235	PARTIAL REMOVAL FINGER BONE		\$409.20	\$511.12	\$511.12	\$511.12	80.06%	\$409.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26236	PARTIAL REMOVAL FINGER BONE		\$367.20	\$459.50	\$459.50	\$459.50	79.91%	\$367.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26320	REMOVAL OF IMPLANT FROM HAND		\$292.48	\$364.60	\$364.60	\$364.60	80.22%	\$292.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26340	MANIPULATE FINGER W/ANESTH		\$300.79	\$379.22	\$379.22	\$379.22	79.32%	\$300.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26341	MANIPULAT PALM CORD POST INJ		\$91.20	\$122.14	\$80.78	\$112.83	80.83%	\$91.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26350	REPAIR FINGER/HAND TENDON		\$631.85	\$778.05	\$778.05	\$778.05	81.21%	\$631.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26352	REPAIR/GRAFT HAND TENDON		\$702.40	\$862.41	\$862.41	\$862.41	81.45%	\$702.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26356	REPAIR FINGER/HAND TENDON		\$661.50	\$822.22	\$822.22	\$822.22	80.45%	\$661.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26357	REPAIR FINGER/HAND TENDON		\$738.16	\$918.18	\$918.18	\$918.18	80.39%	\$738.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26358	REPAIR/GRAFT HAND TENDON		\$811.60	\$1,009.96	\$1,009.96	\$1,009.96	80.36%	\$811.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26370	REPAIR FINGER/HAND TENDON		\$661.74	\$812.67	\$812.67	\$812.67	81.43%	\$661.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26373	REPAIR FINGER/HAND TENDON		\$741.06	\$911.40	\$911.40	\$911.40	81.31%	\$741.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26390	REVISE HAND/FINGER TENDON		\$734.66	\$904.98	\$904.98	\$904.98	81.18%	\$734.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26392	REPAIR/GRAFT HAND TENDON		\$837.86	\$1,032.12	\$1,032.12	\$1,032.12	81.18%	\$837.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26410	REPAIR HAND TENDON		\$510.69	\$627.73	\$627.73	\$627.73	81.35%	\$510.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26412	REPAIR/GRAFT HAND TENDON		\$605.60	\$743.69	\$743.69	\$743.69	81.43%	\$605.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26418	REPAIR FINGER TENDON		\$531.18	\$654.22	\$654.22	\$654.22	81.19%	\$531.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26420	REPAIR/GRAFT FINGER TENDON		\$626.60	\$771.14	\$771.14	\$771.14	81.26%	\$626.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26426	REPAIR FINGER/HAND TENDON		\$419.43	\$522.98	\$522.98	\$522.98	80.20%	\$419.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26432	REPAIR FINGER TENDON		\$463.06	\$568.71	\$568.71	\$568.71	81.42%	\$463.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26433	REPAIR FINGER TENDON		\$486.11	\$596.51	\$596.51	\$596.51	81.49%	\$486.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26437	REALIGNMENT OF TENDONS		\$564.00	\$694.00	\$694.00	\$694.00	81.27%	\$564.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26440	RELEASE PALM/FINGER TENDON		\$552.58	\$678.30	\$678.30	\$678.30	81.47%	\$552.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	26442	RELEASE PALM & FINGER TENDON		\$831.60	\$1,025.63	\$1,025.63	\$1,025.63	81.08%	\$831.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26445	RELEASE HAND/FINGER TENDON		\$516.40	\$631.34	\$631.34	\$631.34	81.79%	\$516.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26449	RELEASE FOREARM/HAND TENDON		\$580.54	\$725.05	\$725.05	\$725.05	80.07%	\$580.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26450	INCISION OF PALM TENDON		\$394.40	\$485.59	\$485.59	\$485.59	81.22%	\$394.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26460	INCISE HAND/FINGER TENDON		\$381.60	\$472.96	\$472.96	\$472.96	80.68%	\$381.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26476	TENDON LENGTHENING		\$545.06	\$671.63	\$671.63	\$671.63	81.16%	\$545.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26479	SHORTENING OF HAND TENDON		\$570.94	\$703.61	\$703.61	\$703.61	81.14%	\$570.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26480	TRANSPLANT HAND TENDON		\$663.83	\$816.64	\$816.64	\$816.64	81.29%	\$663.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26483	TRANSPLANT/GRAFT HAND TENDON		\$732.80	\$902.65	\$902.65	\$902.65	81.18%	\$732.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26485	TRANSPLANT PALM TENDON		\$704.32	\$867.21	\$867.21	\$867.21	81.22%	\$704.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26489	TRANSPLANT/GRAFT PALM TENDON		\$808.80	\$995.15	\$995.15	\$995.15	81.27%	\$808.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26490	REVISE THUMB TENDON		\$704.00	\$867.35	\$867.35	\$867.35	81.17%	\$704.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26494	HAND TENDON/MUSCLE TRANSFER		\$706.21	\$870.96	\$870.96	\$870.96	81.08%	\$706.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26499	REVISION OF FINGER		\$730.40	\$899.94	\$899.94	\$899.94	81.16%	\$730.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26500	HAND TENDON RECONSTRUCTION		\$559.74	\$715.67	\$715.67	\$715.67	78.21%	\$559.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26502	HAND TENDON RECONSTRUCTION		\$636.00	\$783.81	\$783.81	\$783.81	81.14%	\$636.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26508	RELEASE THUMB CONTRACTURE		\$572.00	\$704.86	\$704.86	\$704.86	81.15%	\$572.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26516	FUSION OF KNUCKLE JOINT		\$626.04	\$771.10	\$771.10	\$771.10	81.19%	\$626.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26520	RELEASE KNUCKLE CONTRACTURE		\$579.10	\$710.60	\$710.60	\$710.60	81.49%	\$579.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26525	RELEASE FINGER CONTRACTURE		\$581.50	\$714.62	\$714.62	\$714.62	81.37%	\$581.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26530	REVISE KNUCKLE JOINT		\$448.80	\$562.20	\$562.20	\$562.20	79.83%	\$448.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26531	REVISE KNUCKLE WITH IMPLANT		\$524.09	\$652.81	\$652.81	\$652.81	80.28%	\$524.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26535	REVISE FINGER JOINT		\$365.44	\$456.32	\$456.32	\$456.32	80.08%	\$365.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26536	REVISE/IMPLANT FINGER JOINT		\$633.60	\$779.75	\$779.75	\$779.75	81.26%	\$633.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26540	REPAIR HAND JOINT		\$590.52	\$726.61	\$726.61	\$726.61	81.27%	\$590.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26541	REPAIR HAND JOINT WITH GRAFT		\$699.13	\$864.20	\$864.20	\$864.20	80.90%	\$699.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26542	REPAIR HAND JOINT WITH GRAFT		\$608.26	\$749.97	\$749.97	\$749.97	81.10%	\$608.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26545	RECONSTRUCT FINGER JOINT		\$617.60	\$763.10	\$763.10	\$763.10	80.93%	\$617.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26546	REPAIR NONUNION HAND		\$869.38	\$1,073.19	\$1,073.19	\$1,073.19	81.01%	\$869.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26548	RECONSTRUCT FINGER JOINT		\$672.20	\$828.06	\$828.06	\$828.06	81.18%	\$672.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	26560	REPAIR OF WEB FINGER		\$538.10	\$662.31	\$662.31	\$662.31	81.25%	\$538.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26561	REPAIR OF WEB FINGER		\$819.86	\$1,011.11	\$1,011.11	\$1,011.11	81.08%	\$819.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26562	REPAIR OF WEB FINGER		\$1,140.00	\$1,410.37	\$1,410.37	\$1,410.37	80.83%	\$1,140.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26565	CORRECT METACARPAL FLAW		\$601.60	\$737.69	\$737.69	\$737.69	81.55%	\$601.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26567	CORRECT FINGER DEFORMITY		\$606.31	\$746.53	\$746.53	\$746.53	81.22%	\$606.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26568	LENGTHEN METACARPAL/FINGER		\$781.60	\$960.98	\$960.98	\$960.98	81.33%	\$781.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26580	REPAIR HAND DEFORMITY		\$1,271.20	\$1,572.78	\$1,572.78	\$1,572.78	80.82%	\$1,271.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26587	RECONSTRUCT EXTRA FINGER		\$855.58	\$1,064.90	\$1,064.90	\$1,064.90	80.34%	\$855.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26591	REPAIR MUSCLES OF HAND		\$415.34	\$512.89	\$512.89	\$512.89	80.98%	\$415.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26596	EXCISION CONSTRICTING TISSUE		\$682.97	\$843.90	\$843.90	\$843.90	80.93%	\$682.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26600	TREAT METACARPAL FRACTURE		\$250.61	\$324.28	\$308.51	\$315.10	79.53%	\$250.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26605	TREAT METACARPAL FRACTURE		\$259.47	\$353.46	\$317.35	\$325.10	79.81%	\$259.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26607	TREAT METACARPAL FRACTURE		\$426.94	\$529.25	\$529.25	\$529.25	80.67%	\$426.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26608	TREAT METACARPAL FRACTURE		\$403.54	\$503.65	\$503.65	\$503.65	80.12%	\$403.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26615	TREAT METACARPAL FRACTURE		\$478.47	\$597.22	\$597.22	\$597.22	80.12%	\$478.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26641	TREAT THUMB DISLOCATION		\$326.00	\$446.17	\$405.16	\$408.89	79.73%	\$326.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26645	TREAT THUMB FRACTURE		\$344.00	\$459.54	\$416.78	\$431.23	79.77%	\$344.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26650	TREAT THUMB FRACTURE		\$404.62	\$503.98	\$503.98	\$503.98	80.29%	\$404.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26665	TREAT THUMB FRACTURE		\$520.97	\$649.47	\$649.47	\$649.47	80.22%	\$520.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26670	TREAT HAND DISLOCATION		\$271.00	\$373.34	\$331.98	\$342.33	79.16%	\$271.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26675	TREAT HAND DISLOCATION		\$355.20	\$489.91	\$445.40	\$445.35	79.76%	\$355.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26676	PIN HAND DISLOCATION		\$427.80	\$533.71	\$533.71	\$533.71	80.16%	\$427.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26685	TREAT HAND DISLOCATION		\$478.55	\$598.89	\$598.89	\$598.89	79.91%	\$478.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26686	TREAT HAND DISLOCATION		\$515.20	\$641.81	\$641.81	\$641.81	80.27%	\$515.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26700	TREAT KNUCKLE DISLOCATION		\$266.86	\$361.50	\$332.05	\$334.40	79.80%	\$266.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26705	TREAT KNUCKLE DISLOCATION		\$334.40	\$465.05	\$419.48	\$419.07	79.80%	\$334.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26715	TREAT KNUCKLE DISLOCATION		\$477.20	\$595.17	\$595.17	\$595.17	80.18%	\$477.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26720	TREAT FINGER FRACTURE EACH		\$166.28	\$217.31	\$203.99	\$209.73	79.28%	\$166.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26725	TREAT FINGER FRACTURE EACH		\$263.59	\$365.00	\$323.64	\$330.41	79.78%	\$263.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26727	TREAT FINGER FRACTURE EACH		\$397.78	\$496.79	\$496.79	\$496.79	80.07%	\$397.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	26735	TREAT FINGER FRACTURE EACH		\$494.14	\$616.77	\$616.77	\$616.77	80.12%	\$494.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26740	TREAT FINGER FRACTURE EACH		\$193.48	\$251.25	\$237.22	\$243.90	79.33%	\$193.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26742	TREAT FINGER FRACTURE EACH		\$289.60	\$396.51	\$354.10	\$361.29	80.16%	\$289.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26746	TREAT FINGER FRACTURE EACH		\$613.54	\$763.30	\$763.30	\$763.30	80.38%	\$613.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26750	TREAT FINGER FRACTURE EACH		\$161.61	\$202.53	\$204.98	\$203.57	79.39%	\$161.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26755	TREAT FINGER FRACTURE EACH		\$238.14	\$341.21	\$290.74	\$297.72	79.99%	\$238.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26756	PIN FINGER FRACTURE EACH		\$357.49	\$445.70	\$445.70	\$445.70	80.21%	\$357.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26765	TREAT FINGER FRACTURE EACH		\$420.26	\$525.32	\$525.32	\$525.32	80.00%	\$420.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26770	TREAT FINGER DISLOCATION		\$222.79	\$308.89	\$279.79	\$281.43	79.16%	\$222.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26775	TREAT FINGER DISLOCATION		\$312.66	\$421.83	\$377.31	\$392.08	79.74%	\$312.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26776	PIN FINGER DISLOCATION		\$377.80	\$471.47	\$471.47	\$471.47	80.13%	\$377.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26785	TREAT FINGER DISLOCATION		\$456.80	\$569.15	\$569.15	\$569.15	80.26%	\$456.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26841	FUSION OF THUMB		\$650.50	\$805.03	\$805.03	\$805.03	80.80%	\$650.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26842	THUMB FUSION WITH GRAFT		\$698.40	\$861.00	\$861.00	\$861.00	81.11%	\$698.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26843	FUSION OF HAND JOINT		\$657.60	\$810.54	\$810.54	\$810.54	81.13%	\$657.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26850	FUSION OF KNUCKLE		\$619.02	\$762.28	\$762.28	\$762.28	81.21%	\$619.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26852	FUSION OF KNUCKLE WITH GRAFT		\$699.46	\$863.18	\$863.18	\$863.18	81.03%	\$699.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26860	FUSION OF FINGER JOINT		\$519.82	\$640.11	\$640.11	\$640.11	81.21%	\$519.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26861	FUSION OF FINGER JNT ADD-ON		\$80.80	\$101.12	\$101.12	\$101.12	79.91%	\$80.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26862	FUSION/GRAFT OF FINGER JOINT		\$644.80	\$795.67	\$795.67	\$795.67	81.04%	\$644.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26910	AMPUTATE METACARPAL BONE		\$640.70	\$788.34	\$788.34	\$788.34	81.27%	\$640.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26951	AMPUTATION OF FINGER/THUMB		\$591.98	\$732.03	\$732.03	\$732.03	80.87%	\$591.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26952	AMPUTATION OF FINGER/THUMB		\$577.06	\$710.12	\$710.12	\$710.12	81.26%	\$577.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26990	DRAINAGE OF PELVIS LESION		\$564.22	\$700.25	\$700.25	\$700.25	80.57%	\$564.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	26991	DRAINAGE OF PELVIS BURSA		\$434.80	\$730.00	\$541.07	\$535.74	81.16%	\$434.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27000	INCISION OF HIP TENDON		\$325.60	\$403.03	\$403.03	\$403.03	80.79%	\$325.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27001	INCISION OF HIP TENDON		\$446.80	\$555.55	\$555.55	\$555.55	80.43%	\$446.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27003	INCISION OF HIP TENDON		\$495.60	\$617.99	\$617.99	\$617.99	80.20%	\$495.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27005	INCISION OF HIP TENDON		\$588.20	\$736.80	\$736.80	\$736.80	79.83%	\$588.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27006	INCISION OF HIP TENDONS		\$586.40	\$733.32	\$733.32	\$733.32	79.97%	\$586.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27025	INCISION OF HIP/THIGH FASCIA		\$754.40	\$946.56	\$946.56	\$946.56	79.70%	\$754.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27030	DRAINAGE OF HIP JOINT		\$764.78	\$950.53	\$950.53	\$950.53	80.46%	\$764.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27036	EXCISION OF HIP JOINT/MUSCLE		\$832.00	\$1,036.64	\$1,036.64	\$1,036.64	80.26%	\$832.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27040	BIOPSY OF SOFT TISSUES		\$162.66	\$349.69	\$202.13	\$200.10	81.29%	\$162.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27041	BIOPSY OF SOFT TISSUES		\$582.10	\$721.84	\$721.84	\$721.84	80.64%	\$582.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27043	EXC HIP PELVIS LES SC 3 CM/>		\$382.29	\$476.07	\$476.07	\$476.07	80.30%	\$382.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27045	EXC HIP/PELV TUM DEEP 5 CM/>		\$598.72	\$742.17	\$742.17	\$742.17	80.67%	\$598.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27047	EXC HIP/PELVIS LES SC < 3 CM		\$326.52	\$509.95	\$370.09	\$405.16	80.59%	\$326.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27048	EXC HIP/PELV TUM DEEP < 5 CM		\$499.46	\$622.61	\$622.61	\$622.61	80.22%	\$499.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27050	BIOPSY OF SACROILIAC JOINT		\$337.86	\$422.97	\$422.97	\$422.97	79.88%	\$337.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27054	REMOVAL OF HIP JOINT LINING		\$568.00	\$706.75	\$706.75	\$706.75	80.37%	\$568.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27062	REMOVE FEMUR LESION/BURSA		\$377.24	\$469.88	\$469.88	\$469.88	80.28%	\$377.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27065	REMOVE HIP BONE LES SUPER		\$437.60	\$540.81	\$540.81	\$540.81	80.92%	\$437.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27066	REMOVE HIP BONE LES DEEP		\$674.00	\$834.10	\$834.10	\$834.10	80.81%	\$674.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27071	PART REMOVAL HIP BONE DEEP		\$803.88	\$993.40	\$993.40	\$993.40	80.92%	\$803.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27078	RSECT HIP TUM INCL FEMUR		\$1,657.60	\$2,058.03	\$2,058.03	\$2,058.03	80.54%	\$1,657.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27080	REMOVAL OF TAIL BONE		\$419.64	\$519.72	\$519.72	\$519.72	80.74%	\$419.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27087	REMOVE HIP FOREIGN BODY		\$502.94	\$626.19	\$626.19	\$626.19	80.32%	\$502.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27091	REMOVAL OF HIP PROSTHESIS		\$1,290.86	\$1,602.71	\$1,602.71	\$1,602.71	80.54%	\$1,290.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27093	INJECTION FOR HIP X-RAY		\$134.50	\$238.78	\$67.38	\$161.79	83.13%	\$134.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27095	INJECTION FOR HIP X-RAY		\$65.83	\$317.17	\$81.27	\$78.68	83.67%	\$65.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27096	INJECT SACROILIAC JOINT		\$94.06	\$169.53	\$83.31	\$117.37	80.14%	\$94.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27122	RECONSTRUCTION OF HIP SOCKET		\$899.09	\$1,118.50	\$1,118.50	\$1,118.50	80.38%	\$899.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27125	PARTIAL HIP REPLACEMENT		\$921.44	\$1,145.74	\$1,145.74	\$1,145.74	80.42%	\$921.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27130	TOTAL HIP ARTHROPLASTY		\$1,041.85	\$1,294.37	\$1,294.37	\$1,294.37	80.49%	\$1,041.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27132	TOTAL HIP ARTHROPLASTY		\$1,352.89	\$1,679.99	\$1,679.99	\$1,679.99	80.53%	\$1,352.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27134	REVISE HIP JOINT REPLACEMENT		\$1,537.05	\$1,907.05	\$1,907.05	\$1,907.05	80.60%	\$1,537.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27137	REVISE HIP JOINT REPLACEMENT		\$1,185.60	\$1,472.79	\$1,472.79	\$1,472.79	80.50%	\$1,185.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27138	REVISE HIP JOINT REPLACEMENT		\$1,231.20	\$1,529.03	\$1,529.03	\$1,529.03	80.52%	\$1,231.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27146	INCISION OF HIP BONE		\$1,030.99	\$1,293.56	\$1,293.56	\$1,293.56	79.70%	\$1,030.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27147	REVISION OF HIP BONE		\$1,186.40	\$1,474.91	\$1,474.91	\$1,474.91	80.44%	\$1,186.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27151	INCISION OF HIP BONES		\$1,281.67	\$1,591.79	\$1,591.79	\$1,591.79	80.52%	\$1,281.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27156	REVISION OF HIP BONES		\$1,379.60	\$1,713.18	\$1,713.18	\$1,713.18	80.53%	\$1,379.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27165	INCISION/FIXATION OF FEMUR		\$1,118.52	\$1,386.87	\$1,386.87	\$1,386.87	80.65%	\$1,118.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27170	REPAIR/GRAFT FEMUR HEAD/NECK		\$952.00	\$1,180.96	\$1,180.96	\$1,180.96	80.61%	\$952.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27176	TREAT SLIPPED EPIPHYSIS		\$755.68	\$939.91	\$939.91	\$939.91	80.40%	\$755.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27181	TREAT SLIPPED EPIPHYSIS		\$913.60	\$1,137.06	\$1,137.06	\$1,137.06	80.35%	\$913.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27185	REVISION OF FEMUR EPIPHYSIS		\$592.00	\$736.72	\$736.72	\$736.72	80.36%	\$592.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27187	REINFORCE HIP BONES		\$814.27	\$1,012.98	\$1,012.98	\$1,012.98	80.38%	\$814.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27197	CLSD TX PELVIC RING FX		\$110.51	\$136.99	\$136.99	\$136.99	80.67%	\$110.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27198	CLSD TX PELVIC RING FX		\$257.20	\$319.26	\$319.26	\$319.26	80.56%	\$257.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27200	TREAT TAIL BONE FRACTURE		\$159.04	\$201.42	\$203.87	\$202.87	78.39%	\$159.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27220	TREAT HIP SOCKET FRACTURE		\$343.03	\$431.85	\$425.89	\$427.04	80.33%	\$343.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27222	TREAT HIP SOCKET FRACTURE		\$806.05	\$996.21	\$996.21	\$996.21	80.91%	\$806.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27226	TREAT HIP WALL FRACTURE		\$860.34	\$1,072.08	\$1,072.08	\$1,072.08	80.25%	\$860.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27227	TREAT HIP FRACTURE(S)		\$1,335.85	\$1,660.53	\$1,660.53	\$1,660.53	80.45%	\$1,335.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27228	TREAT HIP FRACTURE(S)		\$1,517.94	\$1,884.24	\$1,884.24	\$1,884.24	80.56%	\$1,517.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27230	TREAT THIGH FRACTURE		\$398.40	\$508.32	\$498.51	\$498.00	80.00%	\$398.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27235	TREAT THIGH FRACTURE		\$740.80	\$922.14	\$922.14	\$922.14	80.34%	\$740.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27236	TREAT THIGH FRACTURE		\$970.79	\$1,208.05	\$1,208.05	\$1,208.05	80.36%	\$970.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27238	TREAT THIGH FRACTURE		\$389.40	\$486.83	\$486.83	\$486.83	79.99%	\$389.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27240	TREAT THIGH FRACTURE		\$781.60	\$968.36	\$968.36	\$968.36	80.71%	\$781.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27244	TREAT THIGH FRACTURE		\$998.44	\$1,241.70	\$1,241.70	\$1,241.70	80.41%	\$998.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27245	TREAT THIGH FRACTURE		\$997.52	\$1,240.09	\$1,240.09	\$1,240.09	80.44%	\$997.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27246	TREAT THIGH FRACTURE		\$323.74	\$407.34	\$403.13	\$404.26	80.08%	\$323.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27248	TREAT THIGH FRACTURE		\$609.60	\$757.29	\$757.29	\$757.29	80.50%	\$609.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27250	TREAT HIP DISLOCATION		\$142.84	\$176.56	\$176.56	\$176.56	80.90%	\$142.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27252	TREAT HIP DISLOCATION		\$616.56	\$762.15	\$762.15	\$762.15	80.90%	\$616.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27253	TREAT HIP DISLOCATION		\$768.14	\$954.14	\$954.14	\$954.14	80.51%	\$768.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27254	TREAT HIP DISLOCATION		\$1,034.00	\$1,285.05	\$1,285.05	\$1,285.05	80.46%	\$1,034.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27256	TREAT HIP DISLOCATION		\$258.40	\$323.87	\$241.49	\$323.87	79.79%	\$258.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27257	TREAT HIP DISLOCATION		\$294.06	\$366.21	\$366.21	\$366.21	80.30%	\$294.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27258	TREAT HIP DISLOCATION		\$906.43	\$1,127.25	\$1,127.25	\$1,127.25	80.41%	\$906.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27259	TREAT HIP DISLOCATION		\$1,251.84	\$1,555.87	\$1,555.87	\$1,555.87	80.46%	\$1,251.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27265	TREAT HIP DISLOCATION		\$347.00	\$435.97	\$435.97	\$435.97	79.59%	\$347.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27266	TREAT HIP DISLOCATION		\$482.86	\$599.95	\$599.95	\$599.95	80.48%	\$482.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27267	CLTX THIGH FX		\$367.20	\$459.96	\$459.96	\$459.96	79.83%	\$367.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27268	CLTX THIGH FX W/MNPJ		\$451.20	\$562.16	\$562.16	\$562.16	80.26%	\$451.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27269	OPTX THIGH FX		\$1,006.88	\$1,249.87	\$1,249.87	\$1,249.87	80.56%	\$1,006.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27275	MANIPULATION OF HIP JOINT		\$151.86	\$189.85	\$189.85	\$189.85	79.99%	\$151.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27279	ARTHRODESIS SACROILIAC JOINT		\$662.19	\$810.40	\$810.40	\$810.40	81.71%	\$662.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27280	FUSION OF SACROILIAC JOINT		\$1,099.34	\$1,367.08	\$1,367.08	\$1,367.08	80.42%	\$1,099.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27282	FUSION OF PUBIC BONES		\$706.00	\$878.39	\$878.39	\$878.39	80.37%	\$706.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27290	AMPUTATION OF LEG AT HIP		\$1,317.60	\$1,636.31	\$1,636.31	\$1,636.31	80.52%	\$1,317.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27295	AMPUTATION OF LEG AT HIP		\$1,019.20	\$1,269.42	\$1,269.42	\$1,269.42	80.29%	\$1,019.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27301	DRAIN THIGH/KNEE LESION		\$419.22	\$694.69	\$521.89	\$519.48	80.70%	\$419.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27303	DRAINAGE OF BONE LESION		\$524.80	\$658.32	\$658.32	\$658.32	79.72%	\$524.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27305	INCISE THIGH TENDON & FASCIA		\$401.20	\$499.48	\$499.48	\$499.48	80.32%	\$401.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27306	INCISION OF THIGH TENDON		\$278.66	\$356.56	\$356.56	\$356.56	78.15%	\$278.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27307	INCISION OF THIGH TENDONS		\$338.80	\$421.80	\$421.80	\$421.80	80.32%	\$338.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27310	EXPLORATION OF KNEE JOINT		\$602.95	\$750.98	\$750.98	\$750.98	80.29%	\$602.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27323	BIOPSY THIGH SOFT TISSUES		\$144.00	\$284.11	\$179.30	\$178.34	80.75%	\$144.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27324	BIOPSY THIGH SOFT TISSUES		\$339.37	\$423.62	\$423.62	\$423.62	80.11%	\$339.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27327	EXC THIGH/KNEE LES SC < 3 CM		\$299.07	\$517.86	\$324.72	\$368.11	81.25%	\$299.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27328	EXC THIGH/KNEE TUM DEEP <5CM		\$510.22	\$635.73	\$635.73	\$635.73	80.26%	\$510.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27330	BIOPSY KNEE JOINT LINING		\$351.60	\$439.97	\$439.97	\$439.97	79.91%	\$351.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27331	EXPLORE/TREAT KNEE JOINT		\$396.00	\$493.84	\$493.84	\$493.84	80.19%	\$396.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27332	REMOVAL OF KNEE CARTILAGE		\$533.60	\$665.18	\$665.18	\$665.18	80.22%	\$533.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27334	REMOVE KNEE JOINT LINING		\$566.76	\$705.10	\$705.10	\$705.10	80.38%	\$566.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27335	REMOVE KNEE JOINT LINING		\$629.60	\$784.58	\$784.58	\$784.58	80.25%	\$629.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27337	EXC THIGH/KNEE LES SC 3 CM/>		\$342.62	\$427.32	\$427.32	\$427.32	80.18%	\$342.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27339	EXC THIGH/KNEE TUM DEP 5CM/>		\$613.20	\$766.08	\$766.08	\$766.08	80.04%	\$613.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27340	REMOVAL OF KNEECAP BURSA		\$312.84	\$391.76	\$391.76	\$391.76	79.86%	\$312.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27345	REMOVAL OF KNEE CYST		\$403.20	\$503.97	\$503.97	\$503.97	80.00%	\$403.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27347	REMOVE KNEE CYST		\$437.60	\$545.57	\$545.57	\$545.57	80.21%	\$437.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27350	REMOVAL OF KNEECAP		\$540.66	\$673.57	\$673.57	\$673.57	80.27%	\$540.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27355	REMOVE FEMUR LESION		\$502.75	\$625.89	\$625.89	\$625.89	80.33%	\$502.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27356	REMOVE FEMUR LESION/GRAFT		\$609.40	\$758.95	\$758.95	\$758.95	80.29%	\$609.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27360	PARTIAL REMOVAL LEG BONE(S)		\$746.05	\$925.02	\$925.02	\$925.02	80.65%	\$746.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27364	RESECT THIGH/KNEE TUM 5 CM/>		\$1,263.84	\$1,568.85	\$1,568.85	\$1,568.85	80.56%	\$1,263.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27365	RESECT FEMUR/KNEE TUMOR		\$1,656.80	\$2,057.10	\$2,057.10	\$2,057.10	80.54%	\$1,656.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27369	NJX CNTRST KNE ARTHG/CT/MRI		\$68.40	\$190.60	\$39.88	\$82.48	82.93%	\$68.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27372	REMOVAL OF FOREIGN BODY		\$330.51	\$605.31	\$411.13	\$406.01	81.40%	\$330.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27380	REPAIR OF KNEECAP TENDON		\$518.47	\$643.11	\$643.11	\$643.11	80.62%	\$518.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27381	REPAIR/GRAFT KNEECAP TENDON		\$677.34	\$840.70	\$840.70	\$840.70	80.57%	\$677.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27385	REPAIR OF THIGH MUSCLE		\$505.83	\$628.75	\$628.75	\$628.75	80.45%	\$505.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27386	REPAIR/GRAFT OF THIGH MUSCLE		\$706.29	\$877.90	\$877.90	\$877.90	80.45%	\$706.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27390	INCISION OF THIGH TENDON		\$374.40	\$468.11	\$468.11	\$468.11	79.98%	\$374.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27394	LENGTHENING OF THIGH TENDONS		\$539.60	\$673.63	\$673.63	\$673.63	80.10%	\$539.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27395	LENGTHENING OF THIGH TENDONS		\$724.00	\$901.32	\$901.32	\$901.32	80.33%	\$724.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27403	REPAIR OF KNEE CARTILAGE		\$531.98	\$663.67	\$663.67	\$663.67	80.16%	\$531.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27405	REPAIR OF KNEE LIGAMENT		\$557.40	\$695.12	\$695.12	\$695.12	80.19%	\$557.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27407	REPAIR OF KNEE LIGAMENT		\$655.60	\$816.27	\$816.27	\$816.27	80.32%	\$655.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27409	REPAIR OF KNEE LIGAMENTS		\$792.00	\$984.64	\$984.64	\$984.64	80.44%	\$792.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27415	OSTEOCHONDRAL KNEE ALLOGRAFT		\$1,117.59	\$1,390.11	\$1,390.11	\$1,390.11	80.40%	\$1,117.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27416	OSTEOCHONDRAL KNEE AUTOGRAFT		\$801.20	\$996.18	\$996.18	\$996.18	80.43%	\$801.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27418	REPAIR DEGENERATED KNEECAP		\$681.19	\$840.06	\$840.06	\$840.06	81.09%	\$681.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27420	REVISION OF UNSTABLE KNEECAP		\$613.94	\$768.56	\$768.56	\$768.56	79.88%	\$613.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27422	REVISION OF UNSTABLE KNEECAP		\$610.53	\$759.98	\$759.98	\$759.98	80.34%	\$610.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27425	LAT RETINACULAR RELEASE OPEN		\$378.40	\$472.90	\$472.90	\$472.90	80.02%	\$378.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27427	RECONSTRUCTION KNEE		\$584.67	\$726.33	\$726.33	\$726.33	80.50%	\$584.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27428	RECONSTRUCTION KNEE		\$914.26	\$1,138.66	\$1,138.66	\$1,138.66	80.29%	\$914.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27430	REVISION OF THIGH MUSCLES		\$610.72	\$760.95	\$760.95	\$760.95	80.26%	\$610.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27437	REVISE KNEECAP		\$544.80	\$679.57	\$679.57	\$679.57	80.17%	\$544.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27438	REVISE KNEECAP WITH IMPLANT		\$688.98	\$857.88	\$857.88	\$857.88	80.31%	\$688.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27446	REVISION OF KNEE JOINT		\$932.94	\$1,160.37	\$1,160.37	\$1,160.37	80.40%	\$932.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27447	TOTAL KNEE ARTHROPLASTY		\$1,040.78	\$1,292.42	\$1,292.42	\$1,292.42	80.53%	\$1,040.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27448	INCISION OF THIGH		\$679.20	\$845.14	\$845.14	\$845.14	80.37%	\$679.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27450	INCISION OF THIGH		\$829.95	\$1,025.65	\$1,025.65	\$1,025.65	80.92%	\$829.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27454	REALIGNMENT OF THIGH BONE		\$1,052.40	\$1,308.16	\$1,308.16	\$1,308.16	80.45%	\$1,052.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27455	REALIGNMENT OF KNEE		\$787.80	\$978.60	\$978.60	\$978.60	80.50%	\$787.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27457	REALIGNMENT OF KNEE		\$784.20	\$958.17	\$958.17	\$958.17	81.84%	\$784.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27466	LENGTHENING OF THIGH BONE		\$965.60	\$1,200.71	\$1,200.71	\$1,200.71	80.42%	\$965.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27470	REPAIR OF THIGH		\$962.58	\$1,197.71	\$1,197.71	\$1,197.71	80.37%	\$962.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27472	REPAIR/GRAFT OF THIGH		\$1,029.43	\$1,279.52	\$1,279.52	\$1,279.52	80.45%	\$1,029.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27475	SURGERY TO STOP LEG GROWTH		\$546.96	\$681.60	\$681.60	\$681.60	80.25%	\$546.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27477	SURGERY TO STOP LEG GROWTH		\$603.36	\$751.09	\$751.09	\$751.09	80.33%	\$603.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27479	SURGERY TO STOP LEG GROWTH		\$751.40	\$934.69	\$934.69	\$934.69	80.39%	\$751.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27485	SURGERY TO STOP LEG GROWTH		\$554.00	\$689.41	\$689.41	\$689.41	80.36%	\$554.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27486	REVISE/REPLACE KNEE JOINT		\$1,139.70	\$1,416.37	\$1,416.37	\$1,416.37	80.47%	\$1,139.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27487	REVISE/REPLACE KNEE JOINT		\$1,418.14	\$1,761.48	\$1,761.48	\$1,761.48	80.51%	\$1,418.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27488	REMOVAL OF KNEE PROSTHESIS		\$977.40	\$1,215.70	\$1,215.70	\$1,215.70	80.40%	\$977.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27495	REINFORCE THIGH		\$921.20	\$1,144.91	\$1,144.91	\$1,144.91	80.46%	\$921.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27496	DECOMPRESSION OF THIGH/KNEE		\$455.20	\$568.88	\$568.88	\$568.88	80.02%	\$455.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27498	DECOMPRESSION OF THIGH/KNEE		\$542.66	\$676.42	\$676.42	\$676.42	80.22%	\$542.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27500	TREATMENT OF THIGH FRACTURE		\$415.40	\$544.14	\$497.52	\$517.06	80.34%	\$415.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27501	TREATMENT OF THIGH FRACTURE		\$414.40	\$523.08	\$515.02	\$515.41	80.40%	\$414.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27502	TREATMENT OF THIGH FRACTURE		\$618.01	\$766.31	\$766.31	\$766.31	80.65%	\$618.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27503	TREATMENT OF THIGH FRACTURE		\$658.08	\$816.60	\$816.60	\$816.60	80.59%	\$658.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27506	TREATMENT OF THIGH FRACTURE		\$1,089.10	\$1,354.31	\$1,354.31	\$1,354.31	80.42%	\$1,089.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27507	TREATMENT OF THIGH FRACTURE		\$787.74	\$978.23	\$978.23	\$978.23	80.53%	\$787.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27508	TREATMENT OF THIGH FRACTURE		\$428.05	\$549.15	\$518.65	\$535.08	80.00%	\$428.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27509	TREATMENT OF THIGH FRACTURE		\$561.78	\$696.48	\$696.48	\$696.48	80.66%	\$561.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27510	TREATMENT OF THIGH FRACTURE		\$560.32	\$697.80	\$697.80	\$697.80	80.30%	\$560.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27511	TREATMENT OF THIGH FRACTURE		\$809.66	\$1,005.25	\$1,005.25	\$1,005.25	80.54%	\$809.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27513	TREATMENT OF THIGH FRACTURE		\$1,001.47	\$1,241.59	\$1,241.59	\$1,241.59	80.66%	\$1,001.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27514	TREATMENT OF THIGH FRACTURE		\$785.30	\$975.09	\$975.09	\$975.09	80.54%	\$785.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27516	TREAT THIGH FX GROWTH PLATE		\$436.00	\$545.76	\$508.95	\$545.76	79.89%	\$436.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27517	TREAT THIGH FX GROWTH PLATE		\$570.50	\$710.46	\$710.46	\$710.46	80.30%	\$570.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27519	TREAT THIGH FX GROWTH PLATE		\$725.60	\$900.75	\$900.75	\$900.75	80.55%	\$725.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27520	TREAT KNEECAP FRACTURE		\$266.27	\$348.81	\$321.12	\$334.40	79.63%	\$266.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27524	TREAT KNEECAP FRACTURE		\$619.45	\$770.93	\$770.93	\$770.93	80.35%	\$619.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27530	TREAT KNEE FRACTURE		\$255.03	\$330.37	\$309.69	\$320.21	79.64%	\$255.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27532	TREAT KNEE FRACTURE		\$480.00	\$645.82	\$600.25	\$599.92	80.01%	\$480.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27535	TREAT KNEE FRACTURE		\$730.19	\$907.10	\$907.10	\$907.10	80.50%	\$730.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27536	TREAT KNEE FRACTURE		\$966.86	\$1,203.35	\$1,203.35	\$1,203.35	80.35%	\$966.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27538	TREAT KNEE FRACTURE(S)		\$400.80	\$509.98	\$472.82	\$500.64	80.06%	\$400.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27540	TREAT KNEE FRACTURE		\$669.19	\$831.20	\$831.20	\$831.20	80.51%	\$669.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27550	TREAT KNEE DISLOCATION		\$395.03	\$536.31	\$490.39	\$490.37	80.56%	\$395.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27552	TREAT KNEE DISLOCATION		\$524.26	\$655.54	\$655.54	\$655.54	79.97%	\$524.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27556	TREAT KNEE DISLOCATION		\$714.24	\$886.71	\$886.71	\$886.71	80.55%	\$714.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27557	TREAT KNEE DISLOCATION		\$848.00	\$1,053.11	\$1,053.11	\$1,053.11	80.52%	\$848.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27558	TREAT KNEE DISLOCATION		\$964.00	\$1,195.64	\$1,195.64	\$1,195.64	80.63%	\$964.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27560	TREAT KNEECAP DISLOCATION		\$289.74	\$396.91	\$360.80	\$362.70	79.89%	\$289.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27562	TREAT KNEECAP DISLOCATION		\$408.80	\$511.07	\$511.07	\$511.07	79.99%	\$408.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27566	TREAT KNEECAP DISLOCATION		\$730.40	\$909.68	\$909.68	\$909.68	80.29%	\$730.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27570	FIXATION OF KNEE JOINT		\$127.14	\$159.28	\$159.28	\$159.28	79.82%	\$127.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27580	FUSION OF KNEE		\$1,202.94	\$1,495.40	\$1,495.40	\$1,495.40	80.44%	\$1,202.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27590	AMPUTATE LEG AT THIGH		\$625.58	\$776.84	\$776.84	\$776.84	80.53%	\$625.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27592	AMPUTATE LEG AT THIGH		\$537.44	\$667.33	\$667.33	\$667.33	80.54%	\$537.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27594	AMPUTATION FOLLOW-UP SURGERY		\$408.00	\$509.85	\$509.85	\$509.85	80.02%	\$408.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27596	AMPUTATION FOLLOW-UP SURGERY		\$574.66	\$710.81	\$710.81	\$710.81	80.85%	\$574.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27598	AMPUTATE LOWER LEG AT KNEE		\$559.44	\$691.98	\$691.98	\$691.98	80.85%	\$559.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27600	DECOMPRESSION OF LOWER LEG		\$327.05	\$404.36	\$404.36	\$404.36	80.88%	\$327.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27601	DECOMPRESSION OF LOWER LEG		\$362.34	\$451.95	\$451.95	\$451.95	80.17%	\$362.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27602	DECOMPRESSION OF LOWER LEG		\$383.10	\$474.83	\$474.83	\$474.83	80.68%	\$383.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27603	DRAIN LOWER LEG LESION		\$322.00	\$540.24	\$399.33	\$395.23	81.47%	\$322.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27605	INCISION OF ACHILLES TENDON		\$189.30	\$340.11	\$186.93	\$233.90	80.93%	\$189.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27606	INCISION OF ACHILLES TENDON		\$221.37	\$274.32	\$274.32	\$274.32	80.70%	\$221.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27607	TREAT LOWER LEG BONE LESION		\$490.52	\$612.04	\$612.04	\$612.04	80.14%	\$490.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27610	EXPLORE/TREAT ANKLE JOINT		\$530.11	\$660.37	\$660.37	\$660.37	80.27%	\$530.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27612	EXPLORATION OF ANKLE JOINT		\$466.02	\$587.24	\$587.24	\$587.24	79.36%	\$466.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27613	BIOPSY LOWER LEG SOFT TISSUE		\$132.00	\$262.76	\$165.67	\$164.66	80.17%	\$132.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27614	BIOPSY LOWER LEG SOFT TISSUE		\$342.34	\$608.44	\$426.87	\$424.54	80.64%	\$342.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27616	RESECT LEG/ANKLE TUM 5 CM/>		\$1,026.66	\$1,266.51	\$1,266.51	\$1,266.51	81.06%	\$1,026.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27618	EXC LEG/ANKLE TUM < 3 CM		\$330.40	\$503.26	\$315.03	\$407.00	81.18%	\$330.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27619	EXC LEG/ANKLE TUM DEEP <5 CM		\$383.86	\$481.59	\$481.59	\$481.59	79.71%	\$383.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27620	EXPLORE/TREAT ANKLE JOINT		\$366.54	\$461.82	\$461.82	\$461.82	79.37%	\$366.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27625	REMOVE ANKLE JOINT LINING		\$469.83	\$587.08	\$587.08	\$587.08	80.03%	\$469.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27626	REMOVE ANKLE JOINT LINING		\$500.94	\$634.01	\$634.01	\$634.01	79.01%	\$500.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27630	REMOVAL OF TENDON LESION		\$302.70	\$557.20	\$368.62	\$377.49	80.19%	\$302.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27632	EXC LEG/ANKLE LES SC 3 CM/>		\$335.28	\$416.18	\$416.18	\$416.18	80.56%	\$335.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27634	EXC LEG/ANKLE TUM DEP 5 CM/>		\$552.00	\$682.88	\$682.88	\$682.88	80.83%	\$552.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27635	REMOVE LOWER LEG BONE LESION		\$477.24	\$594.55	\$594.55	\$594.55	80.27%	\$477.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27637	REMOVE/GRAFT LEG BONE LESION		\$608.80	\$764.86	\$764.86	\$764.86	79.60%	\$608.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27638	REMOVE/GRAFT LEG BONE LESION		\$612.86	\$757.56	\$757.56	\$757.56	80.90%	\$612.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27640	PARTIAL REMOVAL OF TIBIA		\$680.46	\$846.87	\$846.87	\$846.87	80.35%	\$680.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27641	PARTIAL REMOVAL OF FIBULA		\$534.58	\$665.92	\$665.92	\$665.92	80.28%	\$534.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27645	RESECT TIBIA TUMOR		\$1,429.86	\$1,775.76	\$1,775.76	\$1,775.76	80.52%	\$1,429.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27646	RESECT FIBULA TUMOR		\$1,244.00	\$1,545.86	\$1,545.86	\$1,545.86	80.47%	\$1,244.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27647	RESECT TALUS/CALCANEUS TUM		\$803.20	\$1,001.46	\$1,001.46	\$1,001.46	80.20%	\$803.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27648	INJECTION FOR ANKLE X-RAY		\$182.00	\$219.39	\$51.14	\$219.39	82.96%	\$182.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27650	REPAIR ACHILLES TENDON		\$541.99	\$674.38	\$674.38	\$674.38	80.37%	\$541.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27652	REPAIR/GRAFT ACHILLES TENDON		\$542.80	\$685.65	\$685.65	\$685.65	79.17%	\$542.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27654	REPAIR OF ACHILLES TENDON		\$586.87	\$732.69	\$732.69	\$732.69	80.10%	\$586.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27658	REPAIR OF LEG TENDON EACH		\$304.98	\$380.82	\$380.82	\$380.82	80.09%	\$304.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27659	REPAIR OF LEG TENDON EACH		\$386.67	\$485.14	\$485.14	\$485.14	79.70%	\$386.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27664	REPAIR OF LEG TENDON EACH		\$300.80	\$374.32	\$374.32	\$374.32	80.36%	\$300.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27675	REPAIR LOWER LEG TENDONS		\$409.32	\$508.69	\$508.69	\$508.69	80.46%	\$409.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27676	REPAIR LOWER LEG TENDONS		\$498.18	\$624.40	\$624.40	\$624.40	79.79%	\$498.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27680	RELEASE OF LOWER LEG TENDON		\$344.73	\$433.23	\$433.23	\$433.23	79.57%	\$344.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27681	RELEASE OF LOWER LEG TENDONS		\$416.00	\$521.91	\$521.91	\$521.91	79.71%	\$416.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27685	REVISION OF LOWER LEG TENDON		\$385.18	\$678.06	\$479.67	\$477.96	80.59%	\$385.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27686	REVISE LOWER LEG TENDONS		\$433.06	\$545.80	\$545.80	\$545.80	79.34%	\$433.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27687	REVISION OF CALF TENDON		\$373.92	\$467.32	\$467.32	\$467.32	80.01%	\$373.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27690	REVISE LOWER LEG TENDON		\$524.87	\$654.23	\$654.23	\$654.23	80.23%	\$524.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27691	REVISE LOWER LEG TENDON		\$610.75	\$760.49	\$760.49	\$760.49	80.31%	\$610.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27692	REVISE ADDITIONAL LEG TENDON		\$80.16	\$100.92	\$100.92	\$100.92	79.43%	\$80.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27695	REPAIR OF ANKLE LIGAMENT		\$399.57	\$500.40	\$500.40	\$500.40	79.85%	\$399.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27696	REPAIR OF ANKLE LIGAMENTS		\$450.22	\$561.01	\$561.01	\$561.01	80.25%	\$450.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27698	REPAIR OF ANKLE LIGAMENT		\$524.87	\$651.24	\$651.24	\$651.24	80.59%	\$524.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27702	RECONSTRUCT ANKLE JOINT		\$784.65	\$976.44	\$976.44	\$976.44	80.36%	\$784.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27703	RECONSTRUCTION ANKLE JOINT		\$905.37	\$1,124.41	\$1,124.41	\$1,124.41	80.52%	\$905.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27705	INCISION OF TIBIA		\$618.26	\$764.51	\$764.51	\$764.51	80.87%	\$618.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27707	INCISION OF FIBULA		\$337.06	\$420.86	\$420.86	\$420.86	80.09%	\$337.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27709	INCISION OF TIBIA & FIBULA		\$923.28	\$1,159.03	\$1,159.03	\$1,159.03	79.66%	\$923.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27712	REALIGNMENT OF LOWER LEG		\$898.94	\$1,119.48	\$1,119.48	\$1,119.48	80.30%	\$898.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27715	REVISION OF LOWER LEG		\$875.20	\$1,088.31	\$1,088.31	\$1,088.31	80.42%	\$875.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27720	REPAIR OF TIBIA		\$715.37	\$889.50	\$889.50	\$889.50	80.42%	\$715.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27724	REPAIR/GRAFT OF TIBIA		\$1,018.51	\$1,264.29	\$1,264.29	\$1,264.29	80.56%	\$1,018.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27725	REPAIR OF LOWER LEG		\$991.20	\$1,234.99	\$1,234.99	\$1,234.99	80.26%	\$991.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27726	REPAIR FIBULA NONUNION		\$781.42	\$969.15	\$969.15	\$969.15	80.63%	\$781.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27730	REPAIR OF TIBIA EPIPHYSIS		\$486.40	\$606.73	\$606.73	\$606.73	80.17%	\$486.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27734	REPAIR LOWER LEG EPIPHYSES		\$542.80	\$676.29	\$676.29	\$676.29	80.26%	\$542.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27742	REPAIR OF LEG EPIPHYSES		\$639.20	\$796.15	\$796.15	\$796.15	80.29%	\$639.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27745	REINFORCE TIBIA		\$620.20	\$761.61	\$761.61	\$761.61	81.43%	\$620.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27750	TREATMENT OF TIBIA FRACTURE		\$282.76	\$371.27	\$343.93	\$355.00	79.65%	\$282.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27752	TREATMENT OF TIBIA FRACTURE		\$415.84	\$561.01	\$510.18	\$519.12	80.10%	\$415.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27756	TREATMENT OF TIBIA FRACTURE		\$477.94	\$596.67	\$596.67	\$596.67	80.10%	\$477.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27758	TREATMENT OF TIBIA FRACTURE		\$734.54	\$914.31	\$914.31	\$914.31	80.34%	\$734.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27759	TREATMENT OF TIBIA FRACTURE		\$814.08	\$1,012.35	\$1,012.35	\$1,012.35	80.42%	\$814.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27760	CLTX MEDIAL ANKLE FX		\$270.13	\$356.49	\$328.10	\$340.69	79.29%	\$270.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27762	CLTX MED ANKLE FX W/MNPJ		\$366.10	\$515.04	\$462.11	\$462.85	79.10%	\$366.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27766	OPTX MEDIAL ANKLE FX		\$501.70	\$622.63	\$622.63	\$622.63	80.58%	\$501.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27767	CLTX POST ANKLE FX		\$247.70	\$310.35	\$310.00	\$309.02	80.16%	\$247.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27768	CLTX POST ANKLE FX W/MNPJ		\$375.60	\$470.69	\$470.69	\$470.69	79.80%	\$375.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27769	OPTX POST ANKLE FX		\$597.25	\$742.81	\$742.81	\$742.81	80.40%	\$597.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27780	TREATMENT OF FIBULA FRACTURE		\$251.42	\$331.35	\$304.36	\$315.43	79.71%	\$251.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27781	TREATMENT OF FIBULA FRACTURE		\$341.04	\$464.31	\$425.75	\$427.14	79.84%	\$341.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27784	TREATMENT OF FIBULA FRACTURE		\$584.88	\$734.02	\$734.02	\$734.02	79.68%	\$584.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27786	TREATMENT OF ANKLE FRACTURE		\$254.70	\$334.92	\$305.83	\$319.48	79.72%	\$254.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27788	TREATMENT OF ANKLE FRACTURE		\$328.57	\$449.94	\$405.07	\$410.98	79.95%	\$328.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27792	TREATMENT OF ANKLE FRACTURE		\$532.00	\$662.42	\$662.42	\$662.42	80.31%	\$532.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27808	TREATMENT OF ANKLE FRACTURE		\$268.22	\$359.92	\$326.62	\$337.61	79.45%	\$268.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27810	TREATMENT OF ANKLE FRACTURE		\$359.80	\$501.12	\$448.89	\$450.93	79.79%	\$359.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27814	TREATMENT OF ANKLE FRACTURE		\$628.53	\$781.59	\$781.59	\$781.59	80.42%	\$628.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27816	TREATMENT OF ANKLE FRACTURE		\$256.50	\$354.80	\$313.79	\$323.34	79.33%	\$256.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27818	TREATMENT OF ANKLE FRACTURE		\$371.37	\$519.32	\$460.43	\$465.52	79.78%	\$371.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27822	TREATMENT OF ANKLE FRACTURE		\$721.83	\$895.28	\$895.28	\$895.28	80.63%	\$721.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27823	TREATMENT OF ANKLE FRACTURE		\$810.36	\$1,006.07	\$1,006.07	\$1,006.07	80.55%	\$810.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	27824	TREAT LOWER LEG FRACTURE		\$262.06	\$335.71	\$323.79	\$326.24	80.33%	\$262.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27825	TREAT LOWER LEG FRACTURE		\$409.05	\$569.62	\$510.38	\$510.95	80.06%	\$409.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27826	TREAT LOWER LEG FRACTURE		\$705.34	\$875.47	\$875.47	\$875.47	80.57%	\$705.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27827	TREAT LOWER LEG FRACTURE		\$922.19	\$1,143.93	\$1,143.93	\$1,143.93	80.62%	\$922.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27828	TREAT LOWER LEG FRACTURE		\$1,087.94	\$1,348.98	\$1,348.98	\$1,348.98	80.65%	\$1,087.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27829	TREAT LOWER LEG JOINT		\$585.74	\$727.39	\$727.39	\$727.39	80.53%	\$585.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27831	TREAT LOWER LEG DISLOCATION		\$342.80	\$428.95	\$428.95	\$428.95	79.92%	\$342.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27832	TREAT LOWER LEG DISLOCATION		\$624.00	\$777.96	\$777.96	\$777.96	80.21%	\$624.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27840	TREAT ANKLE DISLOCATION		\$324.14	\$406.18	\$406.18	\$406.18	79.80%	\$324.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27842	TREAT ANKLE DISLOCATION		\$407.71	\$510.63	\$510.63	\$510.63	79.85%	\$407.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27846	TREAT ANKLE DISLOCATION		\$590.40	\$743.57	\$743.57	\$743.57	79.40%	\$590.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27848	TREAT ANKLE DISLOCATION		\$643.06	\$804.59	\$804.59	\$804.59	79.92%	\$643.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27860	FIXATION OF ANKLE JOINT		\$135.00	\$167.44	\$167.44	\$167.44	80.62%	\$135.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27870	FUSION OF ANKLE JOINT OPEN		\$823.88	\$1,023.38	\$1,023.38	\$1,023.38	80.51%	\$823.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27871	FUSION OF TIBIOFIBULAR JOINT		\$568.54	\$707.33	\$707.33	\$707.33	80.38%	\$568.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27880	AMPUTATION OF LOWER LEG		\$718.21	\$890.23	\$890.23	\$890.23	80.68%	\$718.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27881	AMPUTATION OF LOWER LEG		\$686.40	\$840.08	\$840.08	\$840.08	81.71%	\$686.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27882	AMPUTATION OF LOWER LEG		\$472.84	\$587.57	\$587.57	\$587.57	80.47%	\$472.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27884	AMPUTATION FOLLOW-UP SURGERY		\$466.86	\$581.08	\$581.08	\$581.08	80.34%	\$466.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27886	AMPUTATION FOLLOW-UP SURGERY		\$522.30	\$649.92	\$649.92	\$649.92	80.36%	\$522.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27889	AMPUTATION OF FOOT AT ANKLE		\$509.60	\$638.57	\$638.57	\$638.57	79.80%	\$509.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27892	DECOMPRESSION OF LEG		\$436.64	\$544.26	\$544.26	\$544.26	80.23%	\$436.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	27894	DECOMPRESSION OF LEG		\$659.80	\$819.60	\$819.60	\$819.60	80.50%	\$659.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28001	DRAINAGE OF BURSA OF FOOT		\$98.94	\$175.54	\$95.97	\$122.44	80.81%	\$98.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28002	TREATMENT OF FOOT INFECTION		\$118.30	\$251.92	\$140.81	\$146.01	81.02%	\$118.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28003	TREATMENT OF FOOT INFECTION		\$214.36	\$384.24	\$258.05	\$263.54	81.34%	\$214.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28005	TREAT FOOT BONE LESION		\$466.64	\$582.95	\$582.95	\$582.95	80.05%	\$466.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28008	INCISION OF FOOT FASCIA		\$241.51	\$439.75	\$302.35	\$299.58	80.62%	\$241.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28010	INCISION OF TOE TENDON		\$183.14	\$242.19	\$215.20	\$230.07	79.60%	\$183.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28011	INCISION OF TOE TENDONS		\$240.64	\$325.40	\$287.54	\$302.44	79.57%	\$240.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	28020	EXPLORATION OF FOOT JOINT		\$303.27	\$558.24	\$375.62	\$372.08	81.51%	\$303.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28022	EXPLORATION OF FOOT JOINT		\$293.55	\$501.54	\$336.80	\$365.38	80.34%	\$293.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28024	EXPLORATION OF TOE JOINT		\$283.80	\$476.29	\$317.50	\$355.43	79.85%	\$283.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28035	DECOMPRESSION OF TIBIA NERVE		\$311.53	\$543.62	\$368.36	\$386.11	80.68%	\$311.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28039	EXC FOOT/TOE TUM SC 1.5 CM/>		\$282.70	\$489.58	\$345.87	\$348.03	81.23%	\$282.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28041	EXC FOOT/TOE TUM DEP 1.5CM/>		\$368.23	\$460.68	\$460.68	\$460.68	79.93%	\$368.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28043	EXC FOOT/TOE TUM SC < 1.5 CM		\$216.78	\$394.58	\$268.39	\$269.00	80.59%	\$216.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28045	EXC FOOT/TOE TUM DEEP <1.5CM		\$290.04	\$493.37	\$355.97	\$359.87	80.60%	\$290.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28047	RESECT FOOT/TOE TUMOR 3 CM/>		\$834.60	\$1,044.51	\$1,044.51	\$1,044.51	79.90%	\$834.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28052	BIOPSY OF FOOT JOINT LINING		\$208.80	\$401.27	\$263.16	\$260.56	80.13%	\$208.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28054	BIOPSY OF TOE JOINT LINING		\$192.00	\$377.84	\$241.14	\$238.79	80.41%	\$192.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28055	NEURECTOMY FOOT		\$313.84	\$398.17	\$398.17	\$398.17	78.82%	\$313.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28060	PARTIAL REMOVAL FOOT FASCIA		\$300.21	\$533.30	\$370.31	\$374.40	80.18%	\$300.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28062	REMOVAL OF FOOT FASCIA		\$330.16	\$592.84	\$413.72	\$411.77	80.18%	\$330.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28070	REMOVAL OF FOOT JOINT LINING		\$281.34	\$521.93	\$351.93	\$350.11	80.36%	\$281.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28080	REMOVAL OF FOOT LESION		\$311.66	\$551.11	\$391.63	\$388.57	80.21%	\$311.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28086	EXCISE FOOT TENDON SHEATH		\$290.95	\$539.88	\$360.06	\$356.23	81.68%	\$290.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28090	REMOVAL OF FOOT LESION		\$265.78	\$480.37	\$317.73	\$331.16	80.26%	\$265.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28092	REMOVAL OF TOE LESIONS		\$223.20	\$436.56	\$281.63	\$278.47	80.15%	\$223.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28100	REMOVAL OF ANKLE/HEEL LESION		\$344.00	\$630.05	\$429.20	\$425.98	80.76%	\$344.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28102	REMOVE/GRAFT FOOT LESION		\$504.80	\$629.59	\$629.59	\$629.59	80.18%	\$504.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28103	REMOVE/GRAFT FOOT LESION		\$316.00	\$395.85	\$395.85	\$395.85	79.83%	\$316.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28104	REMOVAL OF FOOT LESION		\$289.55	\$540.57	\$364.26	\$361.24	80.16%	\$289.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28106	REMOVE/GRAFT FOOT LESION		\$346.40	\$435.04	\$435.04	\$435.04	79.62%	\$346.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28107	REMOVE/GRAFT FOOT LESION		\$282.94	\$521.17	\$354.67	\$353.83	79.97%	\$282.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28108	REMOVAL OF TOE LESIONS		\$236.37	\$447.27	\$297.25	\$294.21	80.34%	\$236.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28110	PART REMOVAL OF METATARSAL		\$247.40	\$477.59	\$302.68	\$310.33	79.72%	\$247.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28111	PART REMOVAL OF METATARSAL		\$261.36	\$487.86	\$326.27	\$323.61	80.76%	\$261.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28112	PART REMOVAL OF METATARSAL		\$257.30	\$496.50	\$321.94	\$319.44	80.55%	\$257.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28113	PART REMOVAL OF METATARSAL		\$355.65	\$601.92	\$439.63	\$442.47	80.38%	\$355.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	28114	REMOVAL OF METATARSAL HEADS		\$686.40	\$1,093.52	\$856.92	\$852.92	80.48%	\$686.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28116	REVISION OF FOOT		\$482.96	\$788.05	\$594.57	\$590.66	81.77%	\$482.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28118	REMOVAL OF HEEL BONE		\$344.91	\$622.59	\$434.01	\$430.91	80.04%	\$344.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28119	REMOVAL OF HEEL SPUR		\$297.96	\$541.55	\$374.71	\$372.50	79.99%	\$297.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28120	PART REMOVAL OF ANKLE/HEEL		\$406.99	\$688.12	\$507.95	\$504.86	80.61%	\$406.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28122	PARTIAL REMOVAL OF FOOT BONE		\$361.66	\$608.30	\$450.57	\$451.26	80.14%	\$361.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28124	PARTIAL REMOVAL OF TOE		\$278.14	\$491.77	\$344.55	\$347.96	79.93%	\$278.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28126	PARTIAL REMOVAL OF TOE		\$221.03	\$403.67	\$258.21	\$276.00	80.08%	\$221.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28130	REMOVAL OF ANKLE BONE		\$496.40	\$632.64	\$632.64	\$632.64	78.47%	\$496.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28140	REMOVAL OF METATARSAL		\$347.40	\$580.29	\$432.37	\$430.15	80.76%	\$347.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28150	REMOVAL OF TOE		\$228.40	\$430.75	\$287.39	\$284.36	80.32%	\$228.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28153	PARTIAL REMOVAL OF TOE		\$216.69	\$417.55	\$272.44	\$269.33	80.46%	\$216.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28160	PARTIAL REMOVAL OF TOE		\$218.54	\$421.14	\$275.32	\$272.22	80.28%	\$218.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28175	RESECT PHALANX OF TOE TUMOR		\$381.60	\$478.25	\$478.25	\$478.25	79.79%	\$381.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28190	REMOVAL OF FOOT FOREIGN BODY		\$126.28	\$248.56	\$135.69	\$156.23	80.83%	\$126.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28192	REMOVAL OF FOOT FOREIGN BODY		\$277.75	\$471.77	\$318.24	\$345.60	80.37%	\$277.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28193	REMOVAL OF FOOT FOREIGN BODY		\$299.31	\$534.41	\$374.22	\$371.76	80.51%	\$299.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28200	REPAIR OF FOOT TENDON		\$272.14	\$509.01	\$336.20	\$338.02	80.51%	\$272.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28202	REPAIR/GRAFT OF FOOT TENDON		\$351.60	\$612.35	\$437.79	\$434.85	80.85%	\$351.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28208	REPAIR OF FOOT TENDON		\$265.13	\$499.89	\$330.94	\$328.02	80.83%	\$265.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28220	RELEASE OF FOOT TENDON		\$249.80	\$464.22	\$314.20	\$311.57	80.18%	\$249.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28222	RELEASE OF FOOT TENDONS		\$298.17	\$552.99	\$379.84	\$378.46	78.79%	\$298.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28225	RELEASE OF FOOT TENDON		\$216.94	\$426.32	\$273.14	\$269.84	80.40%	\$216.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28226	RELEASE OF FOOT TENDONS		\$331.20	\$638.37	\$414.04	\$409.54	80.87%	\$331.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28230	INCISION OF FOOT TENDON(S)		\$258.88	\$444.93	\$292.81	\$320.75	80.71%	\$258.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28232	INCISION OF TOE TENDON		\$219.66	\$389.12	\$248.91	\$273.55	80.30%	\$219.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28234	INCISION OF FOOT TENDON		\$253.60	\$423.83	\$279.41	\$316.38	80.16%	\$253.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28238	REVISION OF FOOT TENDON		\$407.22	\$688.22	\$499.65	\$504.01	80.80%	\$407.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28240	RELEASE OF BIG TOE		\$240.80	\$456.17	\$301.94	\$299.06	80.52%	\$240.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28250	REVISION OF FOOT FASCIA		\$336.80	\$605.09	\$422.83	\$419.63	80.26%	\$336.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	28260	RELEASE OF MIDFOOT JOINT		\$436.26	\$748.32	\$552.73	\$550.17	79.30%	\$436.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28261	REVISION OF FOOT TENDON		\$767.40	\$1,096.84	\$857.78	\$848.53	90.44%	\$767.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28262	REVISION OF FOOT AND ANKLE		\$955.46	\$1,399.99	\$1,122.03	\$1,164.64	82.04%	\$955.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28270	RELEASE OF FOOT CONTRACTURE		\$280.24	\$501.03	\$344.00	\$349.07	80.28%	\$280.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28272	RELEASE OF TOE JOINT EACH		\$260.80	\$394.11	\$258.46	\$324.94	80.26%	\$260.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28280	FUSION OF TOES		\$284.80	\$519.26	\$353.82	\$350.96	81.15%	\$284.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28285	REPAIR OF HAMMERTOES		\$321.42	\$556.03	\$398.30	\$401.98	79.96%	\$321.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28286	REPAIR OF HAMMERTOES		\$242.40	\$456.14	\$306.12	\$303.82	79.78%	\$242.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28288	PARTIAL REMOVAL OF FOOT BONE		\$357.10	\$622.21	\$449.05	\$444.89	80.27%	\$357.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28289	CORRJ HALUX RIGDUS W/O IMPLT		\$377.56	\$708.52	\$473.67	\$469.32	80.45%	\$377.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28291	CORRJ HALUX RIGDUS W/IMPLT		\$412.38	\$706.95	\$491.39	\$506.89	81.36%	\$412.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28292	CORRECTION HALLUX VALGUS		\$397.94	\$720.08	\$499.25	\$498.39	79.84%	\$397.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28295	CORRECTION HALLUX VALGUS		\$544.04	\$1,079.94	\$616.90	\$658.14	82.66%	\$544.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28296	CORRECTION HALLUX VALGUS		\$431.76	\$911.42	\$526.20	\$535.29	80.66%	\$431.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28297	CORRECTION HALLUX VALGUS		\$504.52	\$1,052.62	\$615.17	\$621.59	81.17%	\$504.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28298	CORRECTION HALLUX VALGUS		\$418.02	\$860.42	\$520.42	\$520.60	80.30%	\$418.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28299	CORRECTION HALLUX VALGUS		\$500.76	\$1,042.48	\$609.24	\$623.66	80.29%	\$500.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28300	INCISION OF HEEL BONE		\$532.93	\$664.21	\$664.21	\$664.21	80.24%	\$532.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28304	INCISION OF MIDFOOT BONES		\$510.80	\$848.66	\$626.78	\$632.79	80.72%	\$510.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28306	INCISION OF METATARSAL		\$332.31	\$628.47	\$418.16	\$414.66	80.14%	\$332.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28307	INCISION OF METATARSAL		\$427.46	\$809.51	\$533.65	\$528.62	80.86%	\$427.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28308	INCISION OF METATARSAL		\$324.08	\$589.29	\$399.66	\$404.44	80.13%	\$324.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28309	INCISION OF METATARSALS		\$734.00	\$920.48	\$920.48	\$920.48	79.74%	\$734.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28310	REVISION OF BIG TOE		\$295.94	\$562.82	\$373.54	\$370.65	79.84%	\$295.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28313	REPAIR DEFORMITY OF TOE		\$301.51	\$543.99	\$371.89	\$374.63	80.48%	\$301.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28315	REMOVAL OF SESAMOID BONE		\$267.94	\$491.67	\$334.63	\$332.16	80.67%	\$267.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28320	REPAIR OF FOOT BONES		\$500.86	\$629.97	\$629.97	\$629.97	79.51%	\$500.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28322	REPAIR OF METATARSALS		\$474.40	\$807.74	\$591.82	\$588.47	80.62%	\$474.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28344	REPAIR EXTRA TOE(S)		\$228.54	\$431.73	\$287.31	\$285.06	80.17%	\$228.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28400	TREATMENT OF HEEL FRACTURE		\$201.66	\$263.73	\$244.45	\$253.70	79.49%	\$201.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	28405	TREATMENT OF HEEL FRACTURE		\$339.80	\$476.25	\$425.78	\$425.94	79.78%	\$339.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28406	TREATMENT OF HEEL FRACTURE		\$469.40	\$613.40	\$613.40	\$613.40	76.52%	\$469.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28415	TREAT HEEL FRACTURE		\$922.49	\$1,142.79	\$1,142.79	\$1,142.79	80.72%	\$922.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28420	TREAT/GRAFT HEEL FRACTURE		\$1,064.00	\$1,320.63	\$1,320.63	\$1,320.63	80.57%	\$1,064.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28430	TREATMENT OF ANKLE FRACTURE		\$189.69	\$255.45	\$223.56	\$238.07	79.68%	\$189.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28435	TREATMENT OF ANKLE FRACTURE		\$276.32	\$392.65	\$346.73	\$346.26	79.80%	\$276.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28436	TREATMENT OF ANKLE FRACTURE		\$416.64	\$519.10	\$519.10	\$519.10	80.26%	\$416.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28445	TREAT ANKLE FRACTURE		\$848.86	\$1,067.15	\$1,067.15	\$1,067.15	79.54%	\$848.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28446	OSTEOCHONDRAL TALUS AUTOGRFT		\$998.66	\$1,242.15	\$1,242.15	\$1,242.15	80.40%	\$998.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28450	TREAT MIDFOOT FRACTURE EACH		\$170.32	\$224.87	\$203.14	\$215.00	79.22%	\$170.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28455	TREAT MIDFOOT FRACTURE EACH		\$219.20	\$268.07	\$239.33	\$238.05	92.08%	\$219.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28465	TREAT MIDFOOT FRACTURE EACH		\$523.58	\$659.85	\$659.85	\$659.85	79.35%	\$523.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28470	TREAT METATARSAL FRACTURE		\$179.38	\$232.08	\$218.41	\$225.77	79.45%	\$179.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28475	TREAT METATARSAL FRACTURE		\$192.00	\$274.52	\$240.87	\$243.14	78.97%	\$192.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28476	TREAT METATARSAL FRACTURE		\$327.17	\$405.83	\$405.83	\$405.83	80.62%	\$327.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28485	TREAT METATARSAL FRACTURE		\$464.90	\$582.27	\$582.27	\$582.27	79.84%	\$464.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28490	TREAT BIG TOE FRACTURE		\$110.68	\$151.27	\$132.69	\$139.42	79.39%	\$110.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28495	TREAT BIG TOE FRACTURE		\$124.80	\$190.94	\$157.99	\$158.41	78.78%	\$124.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28496	TREAT BIG TOE FRACTURE		\$207.40	\$527.76	\$288.01	\$286.00	72.52%	\$207.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28505	TREAT BIG TOE FRACTURE		\$406.30	\$670.00	\$509.46	\$505.10	80.44%	\$406.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28510	TREATMENT OF TOE FRACTURE		\$101.74	\$128.99	\$128.64	\$128.57	79.13%	\$101.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28515	TREATMENT OF TOE FRACTURE		\$128.00	\$175.15	\$152.36	\$162.05	78.99%	\$128.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28525	TREAT TOE FRACTURE		\$334.14	\$588.23	\$420.68	\$417.25	80.08%	\$334.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28530	TREAT SESAMOID BONE FRACTURE		\$93.06	\$124.32	\$108.20	\$118.76	78.36%	\$93.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28555	REPAIR FOOT DISLOCATION		\$545.18	\$886.28	\$678.07	\$673.52	80.94%	\$545.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28570	TREAT FOOT DISLOCATION		\$167.20	\$252.56	\$210.85	\$210.24	79.53%	\$167.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28575	TREAT FOOT DISLOCATION		\$286.40	\$401.56	\$358.80	\$358.73	79.84%	\$286.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28585	REPAIR FOOT DISLOCATION		\$571.11	\$922.30	\$723.55	\$722.18	79.08%	\$571.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28600	TREAT FOOT DISLOCATION		\$170.80	\$198.02	\$169.28	\$182.92	93.37%	\$170.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28605	TREAT FOOT DISLOCATION		\$257.74	\$364.53	\$324.22	\$323.78	79.60%	\$257.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	28606	TREAT FOOT DISLOCATION		\$318.86	\$406.30	\$406.30	\$406.30	78.48%	\$318.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28615	REPAIR FOOT DISLOCATION		\$682.38	\$851.86	\$851.86	\$851.86	80.10%	\$682.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28630	TREAT TOE DISLOCATION		\$90.40	\$161.14	\$113.47	\$113.64	79.55%	\$90.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28645	REPAIR TOE DISLOCATION		\$397.12	\$670.80	\$500.10	\$496.96	79.91%	\$397.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28660	TREAT TOE DISLOCATION		\$76.63	\$131.58	\$97.23	\$96.99	79.01%	\$76.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28666	TREAT TOE DISLOCATION		\$145.60	\$180.21	\$180.21	\$180.21	80.79%	\$145.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28675	REPAIR OF TOE DISLOCATION		\$340.20	\$595.49	\$427.24	\$423.30	80.37%	\$340.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28705	FUSION OF FOOT BONES		\$991.20	\$1,233.33	\$1,233.33	\$1,233.33	80.37%	\$991.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28715	FUSION OF FOOT BONES		\$769.94	\$957.71	\$957.71	\$957.71	80.39%	\$769.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28725	FUSION OF FOOT BONES		\$637.26	\$795.17	\$795.17	\$795.17	80.14%	\$637.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28730	FUSION OF FOOT BONES		\$596.87	\$740.62	\$740.62	\$740.62	80.59%	\$596.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28735	FUSION OF FOOT BONES		\$637.16	\$789.78	\$789.78	\$789.78	80.68%	\$637.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28740	FUSION OF FOOT BONES		\$507.45	\$847.22	\$630.24	\$629.09	80.66%	\$507.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28750	FUSION OF BIG TOE JOINT		\$485.27	\$800.05	\$589.39	\$600.57	80.80%	\$485.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28755	FUSION OF BIG TOE JOINT		\$274.10	\$519.79	\$344.18	\$340.73	80.45%	\$274.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28760	FUSION OF BIG TOE JOINT		\$461.60	\$791.26	\$585.16	\$583.46	79.11%	\$461.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28800	AMPUTATION OF MIDFOOT		\$429.42	\$536.01	\$536.01	\$536.01	80.11%	\$429.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28805	AMPUTATION THRU METATARSAL		\$571.86	\$711.04	\$711.04	\$711.04	80.43%	\$571.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28810	AMPUTATION TOE & METATARSAL		\$343.55	\$429.17	\$429.17	\$429.17	80.05%	\$343.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28820	AMPUTATION OF TOE		\$146.54	\$303.27	\$177.43	\$180.73	81.08%	\$146.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	28825	PARTIAL AMPUTATION OF TOE		\$142.08	\$298.59	\$173.10	\$176.11	80.68%	\$142.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29010	APPLICATION OF BODY CAST		\$130.70	\$292.40	\$163.41	\$166.32	78.58%	\$130.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29065	APPLICATION OF LONG ARM CAST		\$80.04	\$101.87	\$69.62	\$100.88	79.34%	\$80.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29075	APPLICATION OF FOREARM CAST		\$71.98	\$92.01	\$63.97	\$90.31	79.70%	\$71.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29085	APPLY HAND/WRIST CAST		\$79.77	\$100.90	\$69.00	\$100.20	79.61%	\$79.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29086	APPLY FINGER CAST		\$64.22	\$81.27	\$50.77	\$81.27	79.02%	\$64.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29105	APPLY LONG ARM SPLINT		\$40.82	\$86.63	\$41.41	\$51.24	79.67%	\$40.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29125	APPLY FOREARM SPLINT		\$38.75	\$70.43	\$41.34	\$49.06	78.99%	\$38.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29126	APPLY FOREARM SPLINT		\$55.38	\$82.35	\$50.46	\$70.39	78.68%	\$55.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29130	APPLICATION OF FINGER SPLINT		\$27.22	\$43.44	\$29.07	\$34.20	79.60%	\$27.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	29131	APPLICATION OF FINGER SPLINT		\$41.20	\$56.33	\$34.95	\$52.22	78.89%	\$41.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29240	STRAPPING OF SHOULDER		\$19.88	\$30.46	\$17.84	\$24.22	82.08%	\$19.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29260	STRAPPING OF ELBOW OR WRIST		\$19.16	\$29.69	\$18.82	\$23.42	81.82%	\$19.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29280	STRAPPING OF HAND OR FINGER		\$18.05	\$30.59	\$20.07	\$22.46	80.35%	\$18.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29305	APPLICATION OF HIP CAST		\$162.63	\$262.72	\$161.42	\$206.04	78.93%	\$162.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29325	APPLICATION OF HIP CASTS		\$144.32	\$289.88	\$180.52	\$183.02	78.85%	\$144.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29345	APPLICATION OF LONG LEG CAST		\$111.54	\$140.71	\$100.40	\$139.42	80.00%	\$111.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29355	APPLICATION OF LONG LEG CAST		\$117.97	\$147.23	\$107.62	\$147.23	80.13%	\$117.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29358	APPLY LONG LEG CAST BRACE		\$83.74	\$170.16	\$104.61	\$106.20	78.85%	\$83.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29365	APPLICATION OF LONG LEG CAST		\$103.20	\$130.32	\$89.31	\$130.32	79.19%	\$103.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29405	APPLY SHORT LEG CAST		\$64.86	\$84.05	\$59.87	\$81.95	79.15%	\$64.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29425	APPLY SHORT LEG CAST		\$61.99	\$78.67	\$55.18	\$78.18	79.29%	\$61.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29435	APPLY SHORT LEG CAST		\$96.00	\$129.62	\$87.91	\$129.62	74.06%	\$96.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29445	APPLY RIGID LEG CAST		\$89.88	\$131.83	\$99.23	\$112.56	79.85%	\$89.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29450	APPLICATION OF LEG CAST		\$104.78	\$149.73	\$113.28	\$131.53	79.66%	\$104.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29505	APPLICATION LONG LEG SPLINT		\$46.18	\$94.46	\$53.45	\$58.89	78.41%	\$46.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29515	APPLICATION LOWER LEG SPLINT		\$45.78	\$75.54	\$50.66	\$58.08	78.82%	\$45.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29520	STRAPPING OF HIP		\$29.06	\$35.72	\$18.19	\$35.72	81.36%	\$29.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29530	STRAPPING OF KNEE		\$22.01	\$30.11	\$17.84	\$26.80	82.12%	\$22.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29540	STRAPPING OF ANKLE AND/OR FT		\$22.76	\$28.63	\$17.07	\$28.14	80.89%	\$22.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29550	STRAPPING OF TOES		\$14.87	\$19.81	\$11.04	\$18.66	79.71%	\$14.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29580	APPLICATION OF PASTE BOOT		\$48.86	\$65.95	\$25.99	\$61.20	79.84%	\$48.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29581	APPLY MULTLAY COMPRS LWR LEG		\$67.68	\$91.56	\$26.72	\$82.41	82.12%	\$67.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29584	APPL MULTLAY COMPRS ARM/HAND		\$69.34	\$83.52	\$15.52	\$83.52	83.02%	\$69.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29700	REMOVAL/REVISION OF CAST		\$47.65	\$66.74	\$33.10	\$61.31	77.72%	\$47.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29705	REMOVAL/REVISION OF CAST		\$43.90	\$65.26	\$44.58	\$55.39	79.26%	\$43.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29730	WINDOWING OF CAST		\$36.00	\$67.30	\$44.87	\$45.83	78.55%	\$36.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29740	WEDGING OF CAST		\$81.20	\$102.45	\$68.80	\$102.45	79.26%	\$81.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29804	JAW ARTHROSCOPY/SURGERY		\$490.00	\$606.17	\$606.17	\$606.17	80.84%	\$490.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29805	SHO ARTHRS DX +- SYNOVIAL BX		\$388.09	\$481.93	\$481.93	\$481.93	80.53%	\$388.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	29806	SHO ARTHRS SRG CAPSULORRAPHY		\$864.57	\$1,076.96	\$1,076.96	\$1,076.96	80.28%	\$864.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29807	SHO ARTHRS SRG RPR SLAP LES		\$846.34	\$1,052.05	\$1,052.05	\$1,052.05	80.45%	\$846.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29819	SHO ARTHRS SRG RMVL LOOSE/FB		\$484.00	\$603.12	\$603.12	\$603.12	80.25%	\$484.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29820	SHO ARTHRS SRG PRTL SYNVTCT		\$439.92	\$547.63	\$547.63	\$547.63	80.33%	\$439.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29821	SHO ARTHRS SRG COMPL SYNVTCT		\$489.60	\$608.43	\$608.43	\$608.43	80.47%	\$489.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29822	SHO ARTHRS SRG LMTD DBRDMT		\$446.94	\$557.29	\$557.29	\$557.29	80.20%	\$446.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29823	SHO ARTHRS SRG XTNSV DBRDMT		\$488.66	\$608.57	\$608.57	\$608.57	80.30%	\$488.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29824	SHO ARTHRS SRG DSTL CLAVICLC		\$558.37	\$694.95	\$694.95	\$694.95	80.35%	\$558.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29825	SHO ARTHRS SRG LSS&RESCJ ADS		\$483.98	\$601.87	\$601.87	\$601.87	80.41%	\$483.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29826	SHO ARTHRS SRG DECOMPRESSION		\$137.82	\$169.91	\$169.91	\$169.91	81.12%	\$137.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29827	SHO ARTHRS SRG RT8TR CUF RPR		\$872.65	\$1,084.32	\$1,084.32	\$1,084.32	80.48%	\$872.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29828	SHO ARTHRS SRG BICP TENODSIS		\$749.17	\$932.09	\$932.09	\$932.09	80.38%	\$749.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29830	ELBOW ARTHROSCOPY		\$376.40	\$471.34	\$471.34	\$471.34	79.86%	\$376.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29834	ELBOW ARTHROSCOPY/SURGERY		\$407.40	\$506.41	\$506.41	\$506.41	80.45%	\$407.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29835	ELBOW ARTHROSCOPY/SURGERY		\$421.06	\$525.26	\$525.26	\$525.26	80.16%	\$421.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29836	ELBOW ARTHROSCOPY/SURGERY		\$483.60	\$600.70	\$600.70	\$600.70	80.51%	\$483.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29837	ELBOW ARTHROSCOPY/SURGERY		\$435.86	\$540.02	\$540.02	\$540.02	80.71%	\$435.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29838	ELBOW ARTHROSCOPY/SURGERY		\$490.60	\$612.02	\$612.02	\$612.02	80.16%	\$490.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29840	WRIST ARTHROSCOPY		\$375.20	\$466.26	\$466.26	\$466.26	80.47%	\$375.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29844	WRIST ARTHROSCOPY/SURGERY		\$414.17	\$514.76	\$514.76	\$514.76	80.46%	\$414.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29845	WRIST ARTHROSCOPY/SURGERY		\$484.80	\$603.92	\$603.92	\$603.92	80.28%	\$484.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29846	WRIST ARTHROSCOPY/SURGERY		\$432.85	\$538.62	\$538.62	\$538.62	80.36%	\$432.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29847	WRIST ARTHROSCOPY/SURGERY		\$449.34	\$560.11	\$560.11	\$560.11	80.22%	\$449.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29848	WRIST ENDOSCOPY/SURGERY		\$424.69	\$530.79	\$530.79	\$530.79	80.01%	\$424.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29850	KNEE ARTHROSCOPY/SURGERY		\$514.40	\$641.78	\$641.78	\$641.78	80.15%	\$514.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29851	KNEE ARTHROSCOPY/SURGERY		\$760.00	\$945.96	\$945.96	\$945.96	80.34%	\$760.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29855	TIBIAL ARTHROSCOPY/SURGERY		\$641.20	\$797.03	\$797.03	\$797.03	80.45%	\$641.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29861	HIP ARTHRO W/FB REMOVAL		\$583.34	\$729.05	\$729.05	\$729.05	80.01%	\$583.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29862	HIP ARTHRO W/DEBRIDEMENT		\$666.82	\$833.40	\$833.40	\$833.40	80.01%	\$666.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29863	HIP ARTHRO W/SYNOVECTOMY		\$665.60	\$832.77	\$832.77	\$832.77	79.93%	\$665.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	29866	AUTGRFT IMPLNT KNEE W/SCOPE		\$860.80	\$1,072.40	\$1,072.40	\$1,072.40	80.27%	\$860.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29867	ALLGRFT IMPLNT KNEE W/SCOPE		\$1,042.66	\$1,297.64	\$1,297.64	\$1,297.64	80.35%	\$1,042.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29868	MENISCAL TRNSPL KNEE W/SCPE		\$1,354.40	\$1,682.95	\$1,682.95	\$1,682.95	80.48%	\$1,354.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29870	KNEE ARTHROSCOPY DX		\$336.64	\$573.35	\$424.03	\$420.47	80.06%	\$336.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29871	KNEE ARTHROSCOPY/DRAINAGE		\$425.98	\$530.84	\$530.84	\$530.84	80.25%	\$425.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29873	KNEE ARTHROSCOPY/SURGERY		\$445.51	\$557.42	\$557.42	\$557.42	79.92%	\$445.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29874	KNEE ARTHROSCOPY/SURGERY		\$441.83	\$553.17	\$553.17	\$553.17	79.87%	\$441.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29875	KNEE ARTHROSCOPY/SURGERY		\$410.18	\$511.59	\$511.59	\$511.59	80.18%	\$410.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29876	KNEE ARTHROSCOPY/SURGERY		\$536.66	\$669.17	\$669.17	\$669.17	80.20%	\$536.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29877	KNEE ARTHROSCOPY/SURGERY		\$511.57	\$637.21	\$637.21	\$637.21	80.28%	\$511.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29879	KNEE ARTHROSCOPY/SURGERY		\$543.91	\$678.16	\$678.16	\$678.16	80.20%	\$543.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29880	KNEE ARTHROSCOPY/SURGERY		\$463.81	\$577.88	\$577.88	\$577.88	80.26%	\$463.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29881	KNEE ARTHROSCOPY/SURGERY		\$446.94	\$557.29	\$557.29	\$557.29	80.20%	\$446.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29882	KNEE ARTHROSCOPY/SURGERY		\$566.26	\$704.21	\$704.21	\$704.21	80.41%	\$566.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29883	KNEE ARTHROSCOPY/SURGERY		\$691.41	\$860.16	\$860.16	\$860.16	80.38%	\$691.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29884	KNEE ARTHROSCOPY/SURGERY		\$510.23	\$636.18	\$636.18	\$636.18	80.20%	\$510.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29885	KNEE ARTHROSCOPY/SURGERY		\$621.60	\$775.02	\$775.02	\$775.02	80.20%	\$621.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29886	KNEE ARTHROSCOPY/SURGERY		\$524.54	\$654.20	\$654.20	\$654.20	80.18%	\$524.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29887	KNEE ARTHROSCOPY/SURGERY		\$619.20	\$772.37	\$772.37	\$772.37	80.17%	\$619.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29888	KNEE ARTHROSCOPY/SURGERY		\$796.29	\$988.96	\$988.96	\$988.96	80.52%	\$796.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29889	KNEE ARTHROSCOPY/SURGERY		\$999.78	\$1,245.15	\$1,245.15	\$1,245.15	80.29%	\$999.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29891	ANKLE ARTHROSCOPY/SURGERY		\$550.22	\$690.09	\$690.09	\$690.09	79.73%	\$550.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29892	ANKLE ARTHROSCOPY/SURGERY		\$526.01	\$655.57	\$655.57	\$655.57	80.24%	\$526.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29893	SCOPE PLANTAR FASCIOTOMY		\$365.75	\$688.21	\$452.31	\$455.53	80.29%	\$365.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29894	ANKLE ARTHROSCOPY/SURGERY		\$407.38	\$516.25	\$516.25	\$516.25	78.91%	\$407.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29895	ANKLE ARTHROSCOPY/SURGERY		\$380.54	\$473.42	\$473.42	\$473.42	80.38%	\$380.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29897	ANKLE ARTHROSCOPY/SURGERY		\$409.15	\$506.71	\$506.71	\$506.71	80.75%	\$409.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29898	ANKLE ARTHROSCOPY/SURGERY		\$460.21	\$572.43	\$572.43	\$572.43	80.40%	\$460.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29899	ANKLE ARTHROSCOPY/SURGERY		\$820.26	\$1,019.00	\$1,019.00	\$1,019.00	80.50%	\$820.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29900	MCP JOINT ARTHROSCOPY DX		\$419.20	\$524.26	\$524.26	\$524.26	79.96%	\$419.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Musculoskeletal System	29905	SUBTALAR ARTHRO W/EXC		\$418.40	\$524.76	\$524.76	\$524.76	79.73%	\$418.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29906	SUBTALAR ARTHRO W/DEB		\$527.83	\$667.93	\$667.93	\$667.93	79.02%	\$527.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29907	SUBTALAR ARTHRO W/FUSION		\$719.04	\$895.60	\$895.60	\$895.60	80.29%	\$719.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29914	HIP ARTHRO W/FEMOROPLASTY		\$811.44	\$1,007.66	\$1,007.66	\$1,007.66	80.53%	\$811.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29915	HIP ARTHRO ACETABULOPLASTY		\$829.91	\$1,032.63	\$1,032.63	\$1,032.63	80.37%	\$829.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Musculoskeletal System	29916	HIP ARTHRO W/LABRAL REPAIR		\$830.78	\$1,028.30	\$1,028.30	\$1,028.30	80.79%	\$830.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10004	FNA BX W/O IMG GDN EA ADDL		\$38.00	\$52.85	\$43.04	\$48.15	78.93%	\$38.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10005	FNA BX W/US GDN 1ST LES		\$79.37	\$137.87	\$72.32	\$79.15	100.27%	\$75.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10006	FNA BX W/US GDN EA ADDL		\$40.71	\$60.84	\$49.63	\$50.50	80.61%	\$40.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10007	FNA BX W/FLUOR GDN 1ST LES		\$89.00	\$314.96	\$88.52	\$89.59	99.34%	\$85.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10009	FNA BX W/CT GDN 1ST LES		\$109.25	\$443.27	\$107.13	\$105.33	103.72%	\$100.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	10021	FNA BX W/O IMG GDN 1ST LES		\$71.44	\$103.96	\$54.54	\$79.49	89.87%	\$71.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38100	REMOVAL OF SPLEEN TOTAL		\$921.46	\$1,142.89	\$1,142.89	\$1,142.89	80.63%	\$921.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38101	REMOVAL OF SPLEEN PARTIAL		\$931.20	\$1,155.83	\$1,155.83	\$1,155.83	80.57%	\$931.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38102	REMOVAL OF SPLEEN TOTAL		\$233.25	\$257.53	\$257.53	\$257.53	90.57%	\$233.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38115	REPAIR OF RUPTURED SPLEEN		\$1,032.00	\$1,280.95	\$1,280.95	\$1,280.95	80.57%	\$1,032.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38120	LAPAROSCOPY SPLENECTOMY		\$850.63	\$1,058.20	\$1,058.20	\$1,058.20	80.38%	\$850.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38205	HARVEST ALLOGENEIC STEM CELL		\$68.13	\$84.28	\$84.28	\$84.28	80.84%	\$68.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38206	HARVEST AUTO STEM CELLS		\$67.52	\$82.53	\$82.53	\$82.53	81.82%	\$67.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38220	DX BONE MARROW ASPIRATIONS		\$72.40	\$162.89	\$67.20	\$72.61	99.71%	\$68.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38221	DX BONE MARROW BIOPSIES		\$70.85	\$168.38	\$70.24	\$70.71	100.20%	\$67.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38222	DX BONE MARROW BX & ASPIR		\$94.95	\$181.31	\$74.76	\$94.14	100.86%	\$89.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38240	TRANSPLT ALLO HCT/DONOR		\$243.23	\$243.02	\$243.02	\$243.02	100.09%	\$230.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38241	TRANSPLT AUTOL HCT/DONOR		\$179.53	\$179.43	\$179.43	\$179.43	100.06%	\$170.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38300	DRAINAGE LYMPH NODE LESION		\$209.07	\$349.13	\$214.88	\$257.35	81.24%	\$209.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38308	INCISION OF LYMPH CHANNELS		\$378.40	\$475.35	\$475.35	\$475.35	79.61%	\$378.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38381	THORACIC DUCT PROCEDURE		\$639.40	\$795.82	\$795.82	\$795.82	80.34%	\$639.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38500	BIOPSY/REMOVAL LYMPH NODES		\$212.09	\$343.33	\$257.45	\$262.02	80.94%	\$212.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38505	NEEDLE BIOPSY LYMPH NODES		\$74.49	\$179.03	\$85.10	\$90.25	82.53%	\$74.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38510	BIOPSY/REMOVAL LYMPH NODES		\$376.81	\$537.87	\$421.15	\$421.54	89.39%	\$376.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	38520	BIOPSY/REMOVAL LYMPH NODES		\$380.80	\$472.92	\$472.92	\$472.92	80.52%	\$380.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38525	BIOPSY/REMOVAL LYMPH NODES		\$357.70	\$445.85	\$445.85	\$445.85	80.23%	\$357.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38531	OPEN BX/EXC INGUINOFEM NODES		\$407.65	\$451.62	\$451.62	\$451.62	90.26%	\$407.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38542	EXPLORE DEEP NODE(S) NECK		\$427.81	\$531.80	\$531.80	\$531.80	80.45%	\$427.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38550	REMOVAL NECK/ARMPIT LESION		\$425.60	\$530.53	\$530.53	\$530.53	80.22%	\$425.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38555	REMOVAL NECK/ARMPIT LESION		\$828.80	\$1,029.93	\$1,029.93	\$1,029.93	80.47%	\$828.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38562	REMOVAL PELVIC LYMPH NODES		\$572.80	\$714.44	\$714.44	\$714.44	80.17%	\$572.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38564	REMOVAL ABDOMEN LYMPH NODES		\$657.79	\$702.64	\$702.64	\$702.64	93.62%	\$657.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38570	LAPAROSCOPY LYMPH NODE BIOP		\$481.04	\$520.43	\$520.43	\$520.43	92.43%	\$481.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38571	LAPAROSCOPY LYMPHADENECTOMY		\$625.73	\$663.26	\$663.26	\$663.26	94.34%	\$625.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38572	LAPAROSCOPY LYMPHADENECTOMY		\$730.80	\$901.72	\$901.72	\$901.72	81.05%	\$730.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38573	LAPS PELVIC LYMPHADEC		\$948.40	\$1,182.42	\$1,182.42	\$1,182.42	80.21%	\$948.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38700	REMOVAL OF LYMPH NODES NECK		\$660.46	\$817.15	\$817.15	\$817.15	80.82%	\$660.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38720	REMOVAL OF LYMPH NODES NECK		\$1,089.00	\$1,354.55	\$1,354.55	\$1,354.55	80.40%	\$1,089.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38724	REMOVAL OF LYMPH NODES NECK		\$1,182.12	\$1,464.32	\$1,464.32	\$1,464.32	80.73%	\$1,182.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38745	REMOVE ARMPIT LYMPH NODES		\$711.14	\$886.12	\$886.12	\$886.12	80.25%	\$711.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38746	REMOVE THORACIC LYMPH NODES		\$208.14	\$206.71	\$206.71	\$206.71	100.69%	\$196.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38747	REMOVE ABDOMINAL LYMPH NODES		\$237.83	\$261.35	\$261.35	\$261.35	91.00%	\$237.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38760	REMOVE GROIN LYMPH NODES		\$675.73	\$840.56	\$840.56	\$840.56	80.39%	\$675.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38770	REMOVE PELVIS LYMPH NODES		\$648.00	\$810.47	\$810.47	\$810.47	79.95%	\$648.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38780	REMOVE ABDOMEN LYMPH NODES		\$992.59	\$1,054.02	\$1,054.02	\$1,054.02	94.17%	\$992.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38790	INJECT FOR LYMPHATIC X-RAY		\$80.54	\$82.09	\$82.09	\$82.09	98.11%	\$77.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38792	RA TRACER ID OF SENTINL NODE		\$34.87	\$85.00	\$31.72	\$34.39	101.40%	\$32.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	38900	IO MAP OF SENT LYMPH NODE		\$116.07	\$135.18	\$135.18	\$135.18	85.86%	\$116.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39000	EXPLORATION OF CHEST		\$474.90	\$506.91	\$506.91	\$506.91	93.69%	\$474.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39010	EXPLORATION OF CHEST		\$625.87	\$778.98	\$778.98	\$778.98	80.34%	\$625.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39220	RESECT MEDIASTINAL TUMOR		\$901.23	\$1,118.68	\$1,118.68	\$1,118.68	80.56%	\$901.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39401	MEDIASTINOSCPY W/MEDSTNL BX		\$265.33	\$301.47	\$301.47	\$301.47	88.01%	\$265.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39402	MEDIASTINOSCPY W/LMPH NOD BX		\$346.27	\$392.66	\$392.66	\$392.66	88.18%	\$346.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39501	REPAIR DIAPHRAGM LACERATION		\$680.10	\$849.43	\$849.43	\$849.43	80.07%	\$680.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	39503	REPAIR OF DIAPHRAGM HERNIA		\$4,543.30	\$5,627.96	\$5,627.96	\$5,627.96	80.73%	\$4,543.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39540	REPAIR OF DIAPHRAGM HERNIA		\$716.50	\$861.06	\$861.06	\$861.06	83.21%	\$716.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39545	REVISION OF DIAPHRAGM		\$713.07	\$885.77	\$885.77	\$885.77	80.50%	\$713.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	39560	RESECT DIAPHRAGM SIMPLE		\$669.23	\$801.54	\$801.54	\$801.54	83.49%	\$669.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50080	REMOVAL OF KIDNEY STONE		\$699.55	\$698.70	\$698.70	\$698.70	100.12%	\$663.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50081	REMOVAL OF KIDNEY STONE		\$899.97	\$1,121.62	\$1,121.62	\$1,121.62	80.24%	\$899.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50200	RENAL BIOPSY PERQ		\$126.41	\$527.42	\$125.02	\$121.65	103.91%	\$115.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50205	RENAL BIOPSY OPEN		\$607.20	\$755.57	\$755.57	\$755.57	80.36%	\$607.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50220	REMOVE KIDNEY OPEN		\$843.76	\$1,051.18	\$1,051.18	\$1,051.18	80.27%	\$843.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50230	REMOVAL KIDNEY OPEN RADICAL		\$1,021.30	\$1,272.93	\$1,272.93	\$1,272.93	80.23%	\$1,021.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50240	PARTIAL REMOVAL OF KIDNEY		\$1,060.73	\$1,326.01	\$1,326.01	\$1,326.01	79.99%	\$1,060.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50327	PREP RENAL GRAFT/VENOUS		\$171.09	\$211.74	\$211.74	\$211.74	80.80%	\$171.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50328	PREP RENAL GRAFT/ARTERIAL		\$149.52	\$185.70	\$185.70	\$185.70	80.52%	\$149.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50360	TRANSPLANTATION OF KIDNEY		\$1,949.94	\$2,428.64	\$2,428.64	\$2,428.64	80.29%	\$1,949.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50365	TRANSPLANTATION OF KIDNEY		\$2,328.00	\$2,905.63	\$2,905.63	\$2,905.63	80.12%	\$2,328.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50370	REMOVE TRANSPLANTED KIDNEY		\$979.60	\$1,222.49	\$1,222.49	\$1,222.49	80.13%	\$979.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50380	REIMPLANTATION OF KIDNEY		\$1,717.95	\$2,053.33	\$2,053.33	\$2,053.33	83.67%	\$1,717.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50382	CHANGE URETER STENT PERCUT		\$249.16	\$1,020.55	\$244.50	\$237.64	104.85%	\$225.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50384	REMOVE URETER STENT PERCUT		\$224.67	\$874.45	\$220.74	\$215.05	104.47%	\$204.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50386	REMOVE STENT VIA TRANSURETH		\$161.00	\$775.70	\$160.55	\$156.88	102.63%	\$149.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50387	CHANGE NEPHROURETERAL CATH		\$82.27	\$565.62	\$80.85	\$78.24	105.16%	\$74.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50389	REMOVE RENAL TUBE W/FLUORO		\$52.90	\$425.78	\$52.13	\$50.57	104.62%	\$48.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50390	DRAINAGE OF KIDNEY LESION		\$91.64	\$92.30	\$92.30	\$92.30	99.28%	\$87.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50400	REVISION OF KIDNEY/URETER		\$923.20	\$1,152.61	\$1,152.61	\$1,152.61	80.10%	\$923.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50405	REVISION OF KIDNEY/URETER		\$1,114.35	\$1,389.68	\$1,389.68	\$1,389.68	80.19%	\$1,114.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50430	NJX PX NFROSGRM &/URTRGRM		\$139.73	\$649.84	\$151.06	\$147.91	94.47%	\$139.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50431	NJX PX NFROSGRM &/URTRGRM		\$56.68	\$331.49	\$65.80	\$68.21	83.09%	\$56.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50432	PLMT NEPHROSTOMY CATHETER		\$184.40	\$927.93	\$199.91	\$195.07	94.53%	\$184.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50433	PLMT NEPHROURETERAL CATHETER		\$227.91	\$1,155.05	\$247.91	\$241.60	94.33%	\$227.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50434	CONVERT NEPHROSTOMY CATHETER		\$174.85	\$927.96	\$186.26	\$181.50	96.33%	\$172.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	50435	EXCHANGE NEPHROSTOMY CATH		\$88.07	\$612.75	\$98.20	\$104.94	83.92%	\$88.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50436	DILAT XST TRC NDURLGC PX		\$148.41	\$147.18	\$147.18	\$147.18	100.84%	\$139.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50437	DILAT XST TRC NEW ACCESS RCS		\$222.72	\$243.32	\$243.32	\$243.32	91.53%	\$222.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50500	REPAIR OF KIDNEY WOUND		\$1,002.40	\$1,283.21	\$1,283.21	\$1,283.21	78.12%	\$1,002.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50541	LAPARO ABLATE RENAL CYST		\$734.40	\$915.43	\$915.43	\$915.43	80.22%	\$734.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50542	LAPARO ABLATE RENAL MASS		\$933.60	\$1,158.20	\$1,158.20	\$1,158.20	80.61%	\$933.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50543	LAPARO PARTIAL NEPHRECTOMY		\$1,190.21	\$1,485.25	\$1,485.25	\$1,485.25	80.14%	\$1,190.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50544	LAPAROSCOPY PYELOPLASTY		\$990.42	\$1,233.81	\$1,233.81	\$1,233.81	80.27%	\$990.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50545	LAPARO RADICAL NEPHRECTOMY		\$1,126.20	\$1,327.46	\$1,327.46	\$1,327.46	84.84%	\$1,126.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50546	LAPAROSCOPIC NEPHRECTOMY		\$962.50	\$1,200.55	\$1,200.55	\$1,200.55	80.17%	\$962.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50547	LAPARO REMOVAL DONOR KIDNEY		\$1,300.13	\$1,621.75	\$1,621.75	\$1,621.75	80.17%	\$1,300.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50548	LAPARO REMOVE W/URETER		\$1,069.60	\$1,334.08	\$1,334.08	\$1,334.08	80.18%	\$1,069.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50555	KIDNEY ENDOSCOPY & BIOPSY		\$270.40	\$417.18	\$336.56	\$337.82	80.04%	\$270.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50561	KIDNEY ENDOSCOPY & TREATMENT		\$312.00	\$481.76	\$389.23	\$390.23	79.95%	\$312.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50575	KIDNEY ENDOSCOPY		\$704.49	\$701.33	\$701.33	\$701.33	100.45%	\$666.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50580	KIDNEY ENDOSCOPY & TREATMENT		\$479.20	\$597.03	\$597.03	\$597.03	80.26%	\$479.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50590	FRAGMENTING OF KIDNEY STONE		\$576.50	\$756.51	\$577.40	\$575.08	100.25%	\$546.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50592	PERC RF ABLATE RENAL TUMOR		\$342.00	\$2,878.67	\$337.07	\$324.55	105.38%	\$308.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50593	PERC CRYO ABLATE RENAL TUM		\$455.63	\$3,849.14	\$449.12	\$432.29	105.40%	\$410.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50605	INSERT URETERAL SUPPORT		\$806.90	\$1,005.00	\$1,005.00	\$1,005.00	80.29%	\$806.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50684	INJECTION FOR URETER X-RAY		\$41.20	\$132.08	\$51.46	\$50.66	81.33%	\$41.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50688	CHANGE OF URETER TUBE/STENT		\$62.63	\$78.19	\$78.19	\$78.19	80.10%	\$62.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50690	INJECTION FOR URETER X-RAY		\$68.69	\$121.79	\$69.92	\$84.17	81.61%	\$68.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50693	PLMT URETERAL STENT PRQ		\$182.87	\$1,017.02	\$198.92	\$193.47	94.52%	\$182.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50694	PLMT URETERAL STENT PRQ		\$236.32	\$1,138.62	\$259.52	\$253.23	93.32%	\$236.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50695	PLMT URETERAL STENT PRQ		\$299.32	\$1,366.36	\$332.69	\$324.56	92.22%	\$299.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50705	URETERAL EMBOLIZATION/OCCL		\$169.12	\$1,872.91	\$171.49	\$165.51	102.18%	\$157.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50706	BALLOON DILATE URTRL STRIX		\$156.91	\$855.32	\$175.32	\$170.68	91.93%	\$156.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50715	RELEASE OF URETER		\$969.95	\$1,208.57	\$1,208.57	\$1,208.57	80.26%	\$969.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50727	REVISE URETER		\$443.23	\$519.12	\$519.12	\$519.12	85.38%	\$443.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	50760	FUSION OF URETERS		\$992.59	\$1,127.81	\$1,127.81	\$1,127.81	88.01%	\$992.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50780	REIMPLANT URETER IN BLADDER		\$888.51	\$1,111.02	\$1,111.02	\$1,111.02	79.97%	\$888.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50782	REIMPLANT URETER IN BLADDER		\$920.44	\$1,073.17	\$1,073.17	\$1,073.17	85.77%	\$920.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50783	REIMPLANT URETER IN BLADDER		\$946.78	\$1,124.54	\$1,124.54	\$1,124.54	84.19%	\$946.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50785	REIMPLANT URETER IN BLADDER		\$971.20	\$1,209.00	\$1,209.00	\$1,209.00	80.33%	\$971.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50820	CONSTRUCT BOWEL BLADDER		\$1,050.13	\$1,308.77	\$1,308.77	\$1,308.77	80.24%	\$1,050.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50845	APPENDICO-VESICOSTOMY		\$1,039.16	\$1,255.70	\$1,255.70	\$1,255.70	82.76%	\$1,039.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50947	LAPARO NEW URETER/BLADDER		\$1,214.41	\$1,377.94	\$1,377.94	\$1,377.94	88.13%	\$1,214.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50948	LAPARO NEW URETER/BLADDER		\$1,110.19	\$1,263.68	\$1,263.68	\$1,263.68	87.85%	\$1,110.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	50951	ENDOSCOPY OF URETER		\$242.80	\$383.34	\$303.07	\$303.56	79.98%	\$242.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51040	INCISE & DRAIN BLADDER		\$295.95	\$297.59	\$297.59	\$297.59	99.45%	\$282.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51045	INCISE BLADDER/DRAIN URETER		\$405.60	\$503.67	\$503.67	\$503.67	80.53%	\$405.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51050	REMOVAL OF BLADDER STONE		\$419.94	\$477.72	\$477.72	\$477.72	87.90%	\$419.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51101	DRAIN BLADDER BY TROCAR/CATH		\$129.76	\$159.43	\$50.42	\$159.43	81.39%	\$129.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51102	DRAIN BL W/CATH INSERTION		\$172.22	\$244.59	\$141.54	\$168.83	102.01%	\$160.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51500	REMOVAL OF BLADDER CYST		\$534.47	\$642.50	\$642.50	\$642.50	83.19%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51525	REMOVAL OF BLADDER LESION		\$763.53	\$859.16	\$859.16	\$859.16	88.87%	\$763.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51535	REPAIR OF URETER LESION		\$626.80	\$782.47	\$782.47	\$782.47	80.11%	\$626.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51550	PARTIAL REMOVAL OF BLADDER		\$771.20	\$963.87	\$963.87	\$963.87	80.01%	\$771.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51565	REVISE BLADDER & URETER(S)		\$1,030.40	\$1,285.07	\$1,285.07	\$1,285.07	80.18%	\$1,030.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51570	REMOVAL OF BLADDER		\$1,176.00	\$1,465.15	\$1,465.15	\$1,465.15	80.26%	\$1,176.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51590	REMOVE BLADDER/REVISE TRACT		\$1,717.95	\$1,915.46	\$1,915.46	\$1,915.46	89.69%	\$1,717.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51595	REMOVE BLADDER/REVISE TRACT		\$1,870.66	\$2,168.26	\$2,168.26	\$2,168.26	86.27%	\$1,870.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51596	REMOVE BLADDER/CREATE POUCH		\$2,290.61	\$2,337.16	\$2,337.16	\$2,337.16	98.01%	\$2,220.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51600	INJECTION FOR BLADDER X-RAY		\$43.60	\$218.48	\$42.87	\$52.72	82.70%	\$43.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51610	INJECTION FOR BLADDER X-RAY		\$57.22	\$132.82	\$64.47	\$70.34	81.35%	\$57.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51700	IRRIGATION OF BLADDER		\$59.70	\$79.12	\$29.70	\$74.24	80.41%	\$59.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51701	INSERT BLADDER CATHETER		\$45.47	\$45.69	\$25.36	\$45.21	100.58%	\$42.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51702	INSERT TEMP BLADDER CATH		\$52.72	\$64.35	\$25.09	\$52.85	99.76%	\$50.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51703	INSERT BLADDER CATH COMPLEX		\$101.16	\$153.83	\$75.66	\$103.91	97.35%	\$98.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	51705	CHANGE OF BLADDER TUBE		\$72.82	\$100.53	\$51.80	\$90.71	80.28%	\$72.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51710	CHANGE OF BLADDER TUBE		\$96.71	\$140.06	\$80.47	\$119.94	80.63%	\$96.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51715	ENDOSCOPIC INJECTION/IMPLANT		\$234.13	\$379.65	\$198.08	\$287.69	81.38%	\$234.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51720	TREATMENT OF BLADDER LESION		\$64.62	\$91.11	\$43.09	\$80.91	79.86%	\$64.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51725	SIMPLE CYSTOMETROGRAM		\$192.13	\$235.79	\$235.79	\$235.79	81.48%	\$192.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51726	COMPLEX CYSTOMETROGRAM		\$253.94	\$311.98	\$311.98	\$311.98	81.40%	\$253.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51727	CYSTOMETROGRAM W/UP		\$308.06	\$379.83	\$379.83	\$379.83	81.11%	\$308.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51728	CYSTOMETROGRAM W/VP		\$307.39	\$377.67	\$377.67	\$377.67	81.39%	\$307.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51729	CYSTOMETROGRAM W/VP&UP		\$324.65	\$397.50	\$397.50	\$397.50	81.67%	\$324.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51736	URINE FLOW MEASUREMENT		\$11.43	\$13.97	\$13.97	\$13.97	81.84%	\$11.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51741	ELECTRO-UROFLOWMETRY FIRST		\$14.43	\$14.59	\$14.59	\$14.59	98.89%	\$13.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51784	ANAL/URINARY MUSCLE STUDY		\$66.13	\$65.92	\$65.92	\$65.92	100.31%	\$62.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51785	ANAL/URINARY MUSCLE STUDY		\$368.00	\$453.75	\$453.75	\$453.75	81.10%	\$368.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51792	URINARY REFLEX STUDY		\$229.60	\$285.20	\$285.20	\$285.20	80.51%	\$229.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51797	INTRAABDOMINAL PRESSURE TEST		\$163.01	\$196.94	\$196.94	\$196.94	82.77%	\$163.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51798	US URINE CAPACITY MEASURE		\$11.30	\$11.84	\$11.84	\$11.84	95.42%	\$11.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51800	REVISION OF BLADDER/URETHRA		\$831.20	\$1,037.50	\$1,037.50	\$1,037.50	80.12%	\$831.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51860	REPAIR OF BLADDER WOUND		\$601.16	\$749.74	\$749.74	\$749.74	80.18%	\$601.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51865	REPAIR OF BLADDER WOUND		\$720.06	\$897.64	\$897.64	\$897.64	80.22%	\$720.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51880	REPAIR OF BLADDER OPENING		\$374.80	\$470.89	\$470.89	\$470.89	79.59%	\$374.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51900	REPAIR BLADDER/VAGINA LESION		\$839.90	\$827.39	\$827.39	\$827.39	101.51%	\$786.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51960	REVISION OF BLADDER & BOWEL		\$1,145.31	\$1,381.01	\$1,381.01	\$1,381.01	82.93%	\$1,145.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51980	CONSTRUCT BLADDER OPENING		\$610.82	\$717.66	\$717.66	\$717.66	85.11%	\$610.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	51990	LAPARO URETHRAL SUSPENSION		\$597.60	\$746.20	\$746.20	\$746.20	80.09%	\$597.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52000	CYSTOSCOPY		\$136.19	\$248.30	\$79.70	\$167.35	81.38%	\$136.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52001	CYSTOSCOPY REMOVAL OF CLOTS		\$238.63	\$447.74	\$283.70	\$295.33	80.80%	\$238.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52005	CYSTOSCOPY & URETER CATHETER		\$105.42	\$313.24	\$132.72	\$129.85	81.18%	\$105.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52007	CYSTOSCOPY AND BIOPSY		\$132.00	\$464.69	\$165.00	\$161.19	81.89%	\$132.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52204	CYSTOSCOPY W/BIOPSY(S)		\$145.67	\$390.15	\$140.58	\$178.78	81.48%	\$145.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52214	CYSTOSCOPY AND TREATMENT		\$138.58	\$773.60	\$172.11	\$169.14	81.93%	\$138.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	52224	CYSTOSCOPY AND TREATMENT		\$252.74	\$807.30	\$199.16	\$308.58	81.91%	\$252.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52234	CYSTOSCOPY AND TREATMENT		\$220.66	\$242.99	\$242.99	\$242.99	90.81%	\$220.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52235	CYSTOSCOPY AND TREATMENT		\$285.73	\$285.10	\$285.10	\$285.10	100.22%	\$270.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52240	CYSTOSCOPY AND TREATMENT		\$387.54	\$386.69	\$386.69	\$386.69	100.22%	\$367.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52260	CYSTOSCOPY AND TREATMENT		\$167.43	\$208.40	\$208.40	\$208.40	80.34%	\$167.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52265	CYSTOSCOPY AND TREATMENT		\$152.71	\$384.11	\$161.19	\$158.30	96.47%	\$150.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52276	CYSTOSCOPY AND TREATMENT		\$209.35	\$261.06	\$261.06	\$261.06	80.19%	\$209.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52281	CYSTOSCOPY AND TREATMENT		\$157.08	\$336.48	\$151.06	\$193.62	81.13%	\$157.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52287	CYSTOSCOPY CHEMODENERVATION		\$257.09	\$399.42	\$167.03	\$252.40	101.86%	\$239.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52300	CYSTOSCOPY AND TREATMENT		\$222.27	\$276.42	\$276.42	\$276.42	80.41%	\$222.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52301	CYSTOSCOPY AND TREATMENT		\$287.06	\$286.41	\$286.41	\$286.41	100.23%	\$272.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52310	CYSTOSCOPY AND TREATMENT		\$210.06	\$328.95	\$150.19	\$259.76	80.87%	\$210.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52315	CYSTOSCOPY AND TREATMENT		\$317.80	\$480.92	\$270.96	\$392.70	80.93%	\$317.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52317	REMOVE BLADDER STONE		\$305.41	\$910.27	\$341.38	\$336.03	90.89%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52318	REMOVE BLADDER STONE		\$458.12	\$466.29	\$466.29	\$466.29	98.25%	\$442.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52320	CYSTOSCOPY AND TREATMENT		\$194.93	\$242.89	\$242.89	\$242.89	80.26%	\$194.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52327	CYSTOSCOPY INJECT MATERIAL		\$214.54	\$254.67	\$254.67	\$254.67	84.24%	\$214.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52330	CYSTOSCOPY AND TREATMENT		\$208.44	\$620.21	\$259.88	\$256.11	81.39%	\$208.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52332	CYSTOSCOPY AND TREATMENT		\$126.79	\$413.41	\$154.38	\$155.46	81.56%	\$126.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52341	CYSTO W/URETER STRICTURE TX		\$280.21	\$280.75	\$280.75	\$280.75	99.81%	\$266.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52342	CYSTO W/UP STRICTURE TX		\$303.12	\$305.49	\$305.49	\$305.49	99.22%	\$290.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52344	CYSTO/URETERO STRICTURE TX		\$358.88	\$364.61	\$364.61	\$364.61	98.43%	\$346.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52345	CYSTO/URETERO W/UP STRICTURE		\$382.53	\$389.00	\$389.00	\$389.00	98.34%	\$369.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52346	CYSTOURETERO W/RENAL STRICT		\$430.63	\$439.75	\$439.75	\$439.75	97.93%	\$417.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52351	CYSTOURETERO & OR PYELOSCOPE		\$285.95	\$299.06	\$299.06	\$299.06	95.62%	\$284.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52352	CYSTOURETERO W/STONE REMOVE		\$353.89	\$349.31	\$349.31	\$349.31	101.31%	\$331.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52353	CYSTOURETERO W/LITHOTRIPSY		\$387.54	\$386.34	\$386.34	\$386.34	100.31%	\$367.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52354	CYSTOURETERO W/BIOPSY		\$358.88	\$411.08	\$411.08	\$411.08	87.30%	\$358.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52355	CYSTOURETERO W/EXCISE TUMOR		\$421.09	\$460.48	\$460.48	\$460.48	91.45%	\$421.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52356	CYSTO/URETERO W/LITHOTRIPSY		\$366.88	\$409.68	\$409.68	\$409.68	89.55%	\$366.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	52400	CYSTOURETERO W/CONGEN REPR		\$477.48	\$477.64	\$477.64	\$477.64	99.97%	\$453.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52441	CYSTOURETHRO W/IMPLANT		\$664.20	\$1,312.20	\$207.02	\$646.05	102.81%	\$613.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52442	CYSTOURETHRO W/ADDL IMPLANT		\$225.43	\$896.31	\$49.81	\$218.02	103.40%	\$207.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52450	INCISION OF PROSTATE		\$404.66	\$481.74	\$481.74	\$481.74	84.00%	\$404.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52500	REVISION OF BLADDER NECK		\$398.00	\$499.68	\$499.68	\$499.68	79.65%	\$398.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52601	PROSTATECTOMY (TURP)		\$730.14	\$729.85	\$729.85	\$729.85	100.04%	\$693.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52630	REMOVE PROSTATE REGROWTH		\$410.67	\$411.88	\$411.88	\$411.88	99.71%	\$391.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52648	LASER SURGERY OF PROSTATE		\$696.35	\$1,660.44	\$696.86	\$684.10	101.79%	\$649.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52649	PROSTATE LASER ENUCLEATION		\$706.28	\$828.55	\$828.55	\$828.55	85.24%	\$706.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	52700	DRAINAGE OF PROSTATE ABSCESS		\$357.60	\$447.70	\$447.70	\$447.70	79.88%	\$357.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53000	INCISION OF URETHRA		\$120.40	\$151.01	\$151.01	\$151.01	79.73%	\$120.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53010	INCISION OF URETHRA		\$241.60	\$304.04	\$304.04	\$304.04	79.46%	\$241.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53020	INCISION OF URETHRA		\$77.18	\$96.29	\$96.29	\$96.29	80.15%	\$77.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53040	DRAINAGE OF URETHRA ABSCESS		\$317.60	\$397.51	\$397.51	\$397.51	79.90%	\$317.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53060	DRAINAGE OF URETHRA ABSCESS		\$145.20	\$193.10	\$167.86	\$180.54	80.43%	\$145.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53200	BIOPSY OF URETHRA		\$113.60	\$161.03	\$141.76	\$141.79	80.12%	\$113.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53230	REMOVAL OF URETHRA LESION		\$491.70	\$615.05	\$615.05	\$615.05	79.94%	\$491.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53235	REMOVAL OF URETHRA LESION		\$511.20	\$639.44	\$639.44	\$639.44	79.94%	\$511.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53260	TREATMENT OF URETHRA LESION		\$154.40	\$211.45	\$183.41	\$192.74	80.11%	\$154.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53270	REMOVAL OF URETHRA GLAND		\$149.28	\$216.42	\$186.97	\$187.16	79.76%	\$149.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53275	REPAIR OF URETHRA DEFECT		\$212.00	\$264.42	\$264.42	\$264.42	80.17%	\$212.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53410	RECONSTRUCTION OF URETHRA		\$784.97	\$980.63	\$980.63	\$980.63	80.05%	\$784.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53415	RECONSTRUCTION OF URETHRA		\$903.73	\$1,127.70	\$1,127.70	\$1,127.70	80.14%	\$903.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53430	RECONSTRUCTION OF URETHRA		\$781.68	\$974.99	\$974.99	\$974.99	80.17%	\$781.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53445	INSERT URO/VES NCK SPHINCTER		\$762.49	\$762.84	\$762.84	\$762.84	99.95%	\$724.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53446	REMOVE URO SPHINCTER		\$588.69	\$648.43	\$648.43	\$648.43	90.79%	\$588.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53447	REMOVE/REPLACE UR SPHINCTER		\$648.00	\$809.64	\$809.64	\$809.64	80.04%	\$648.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53450	REVISION OF URETHRA		\$331.26	\$414.83	\$414.83	\$414.83	79.86%	\$331.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53460	REVISION OF URETHRA		\$369.73	\$463.56	\$463.56	\$463.56	79.76%	\$369.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53500	URETHRYS TRANSVAG W/ SCOPE		\$604.40	\$752.17	\$752.17	\$752.17	80.35%	\$604.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	53502	REPAIR OF URETHRA INJURY		\$392.40	\$492.06	\$492.06	\$492.06	79.75%	\$392.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53505	REPAIR OF URETHRA INJURY		\$392.00	\$491.71	\$491.71	\$491.71	79.72%	\$392.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53520	REPAIR OF URETHRA DEFECT		\$451.47	\$565.52	\$565.52	\$565.52	79.83%	\$451.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53600	DILATE URETHRA STRICTURE		\$56.55	\$90.30	\$62.96	\$70.17	80.59%	\$56.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53601	DILATE URETHRA STRICTURE		\$70.40	\$88.06	\$53.01	\$88.06	79.94%	\$70.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53620	DILATE URETHRA STRICTURE		\$141.60	\$174.83	\$86.50	\$174.83	80.99%	\$141.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53660	DILATION OF URETHRA		\$53.07	\$78.53	\$41.72	\$66.31	80.04%	\$53.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53661	DILATION OF URETHRA		\$61.60	\$77.11	\$40.31	\$77.11	79.89%	\$61.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	53852	PROSTATIC RF THERMOTX		\$1,172.00	\$1,429.06	\$388.02	\$1,429.06	82.01%	\$1,172.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54001	SLITTING OF PREPUCE		\$113.80	\$204.92	\$142.88	\$142.30	79.97%	\$113.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54015	DRAIN PENIS LESION		\$245.20	\$306.68	\$306.68	\$306.68	79.95%	\$245.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54050	DESTRUCTION PENIS LESION(S)		\$120.16	\$150.12	\$110.16	\$150.12	80.05%	\$120.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54055	DESTRUCTION PENIS LESION(S)		\$114.60	\$143.16	\$98.65	\$143.16	80.05%	\$114.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54056	CRYOSURGERY PENIS LESION(S)		\$114.36	\$150.54	\$115.49	\$143.28	79.81%	\$114.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54060	EXCISION OF PENIS LESION(S)		\$106.72	\$203.09	\$134.38	\$134.08	79.60%	\$106.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54065	DESTRUCTION PENIS LESION(S)		\$176.93	\$229.89	\$175.56	\$220.77	80.14%	\$176.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54100	BIOPSY OF PENIS		\$158.20	\$209.39	\$122.81	\$196.26	80.61%	\$158.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54105	BIOPSY OF PENIS		\$199.20	\$283.79	\$215.44	\$249.42	79.87%	\$199.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54111	TREAT PENIS LESION GRAFT		\$687.18	\$801.22	\$801.22	\$801.22	85.77%	\$687.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54115	TREATMENT OF PENIS LESION		\$345.44	\$467.26	\$433.61	\$433.67	79.65%	\$345.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54120	PARTIAL REMOVAL OF PENIS		\$509.28	\$637.93	\$637.93	\$637.93	79.83%	\$509.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54150	CIRCUMCISION W/REGIONL BLOCK		\$85.47	\$151.68	\$95.25	\$105.96	80.66%	\$85.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54160	CIRCUMCISION NEONATE		\$131.50	\$227.32	\$146.70	\$164.35	80.01%	\$131.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54161	CIRCUM 28 DAYS OR OLDER		\$171.82	\$199.52	\$199.52	\$199.52	86.11%	\$171.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54162	LYSIS PENIL CIRCUMIC LESION		\$185.93	\$263.32	\$203.03	\$211.44	87.93%	\$185.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54163	REPAIR OF CIRCUMCISION		\$177.94	\$223.71	\$223.71	\$223.71	79.54%	\$177.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54164	FRENULOTOMY OF PENIS		\$157.87	\$198.90	\$198.90	\$198.90	79.37%	\$157.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54200	TREATMENT OF PENIS LESION		\$83.50	\$121.02	\$89.82	\$105.08	79.47%	\$83.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54220	TREATMENT OF PENIS LESION		\$106.66	\$228.56	\$134.27	\$134.09	79.54%	\$106.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54230	PREPARE PENIS STUDY		\$81.40	\$109.31	\$80.21	\$102.08	79.74%	\$81.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	54235	PENILE INJECTION		\$66.56	\$92.43	\$74.55	\$83.51	79.71%	\$66.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54300	REVISION OF PENIS		\$519.70	\$650.12	\$650.12	\$650.12	79.94%	\$519.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54304	REVISION OF PENIS		\$600.80	\$750.98	\$750.98	\$750.98	80.00%	\$600.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54308	RECONSTRUCTION OF URETHRA		\$576.80	\$720.32	\$720.32	\$720.32	80.08%	\$576.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54322	RECONSTRUCTION OF URETHRA		\$763.53	\$783.68	\$783.68	\$783.68	97.43%	\$744.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54324	RECONSTRUCTION OF URETHRA		\$775.88	\$969.21	\$969.21	\$969.21	80.05%	\$775.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54326	RECONSTRUCTION OF URETHRA		\$944.47	\$943.81	\$943.81	\$943.81	100.07%	\$896.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54332	REVISE PENIS/URETHRA		\$1,011.31	\$1,010.41	\$1,010.41	\$1,010.41	100.09%	\$959.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54336	REVISE PENIS/URETHRA		\$1,188.71	\$1,187.53	\$1,187.53	\$1,187.53	100.10%	\$1,128.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54340	RPR HYPSPAD COMP SIMPLE		\$534.47	\$575.46	\$575.46	\$575.46	92.88%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54344	RRP HYPSPAD COMP MOBLJ&URTP		\$905.56	\$945.85	\$945.85	\$945.85	95.74%	\$898.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54352	REVJ PRIOR HYPSPAD REPAIR		\$1,129.60	\$1,409.38	\$1,409.38	\$1,409.38	80.15%	\$1,129.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54360	PENIS PLASTIC SURGERY		\$580.23	\$724.84	\$724.84	\$724.84	80.05%	\$580.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54400	INSERT SEMI-RIGID PROSTHESIS		\$458.12	\$537.19	\$537.19	\$537.19	85.28%	\$458.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54405	INSERT MULTI-COMP PENIS PROS		\$811.71	\$810.46	\$810.46	\$810.46	100.15%	\$769.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54420	REVISION OF PENIS		\$706.73	\$706.79	\$706.79	\$706.79	99.99%	\$671.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54430	REVISION OF PENIS		\$643.68	\$644.17	\$644.17	\$644.17	99.92%	\$611.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54435	REVISION OF PENIS		\$419.70	\$420.73	\$420.73	\$420.73	99.76%	\$399.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54437	REPAIR CORPOREAL TEAR		\$568.07	\$685.89	\$685.89	\$685.89	82.82%	\$568.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54450	PREPUTIAL STRETCHING		\$50.79	\$69.83	\$56.51	\$63.95	79.42%	\$50.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54500	BIOPSY OF TESTIS		\$60.00	\$74.65	\$74.65	\$74.65	80.38%	\$60.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54505	BIOPSY OF TESTIS		\$169.60	\$211.72	\$211.72	\$211.72	80.10%	\$169.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54512	EXCISE LESION TESTIS		\$447.06	\$542.53	\$542.53	\$542.53	82.40%	\$447.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54520	REMOVAL OF TESTIS		\$265.77	\$333.31	\$333.31	\$333.31	79.74%	\$265.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54522	ORCHIECTOMY PARTIAL		\$508.13	\$592.15	\$592.15	\$592.15	85.81%	\$508.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54530	REMOVAL OF TESTIS		\$411.65	\$515.49	\$515.49	\$515.49	79.86%	\$411.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54550	EXPLORATION FOR TESTIS		\$397.07	\$497.29	\$497.29	\$497.29	79.85%	\$397.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54600	REDUCE TESTIS TORSION		\$381.78	\$458.89	\$458.89	\$458.89	83.20%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54620	SUSPENSION OF TESTIS		\$240.58	\$300.47	\$300.47	\$300.47	80.07%	\$240.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54640	ORCHIOPEXY INGUN/SCROT APPR		\$433.83	\$433.62	\$433.62	\$433.62	100.05%	\$411.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	54650	ORCHIOPEXY (FOWLER-STEPHENS)		\$573.60	\$718.01	\$718.01	\$718.01	79.89%	\$573.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54660	REVISION OF TESTIS		\$291.20	\$365.05	\$365.05	\$365.05	79.77%	\$291.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54670	REPAIR TESTIS INJURY		\$332.00	\$415.78	\$415.78	\$415.78	79.85%	\$332.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54692	LAPAROSCOPY ORCHIOPEXY		\$606.26	\$756.92	\$756.92	\$756.92	80.10%	\$606.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54700	DRAINAGE OF SCROTUM		\$172.10	\$215.95	\$215.95	\$215.95	79.70%	\$172.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54800	BIOPSY OF EPIDIDYMIS		\$99.20	\$125.07	\$125.07	\$125.07	79.31%	\$99.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54830	REMOVE EPIDIDYMIS LESION		\$302.40	\$379.06	\$379.06	\$379.06	79.78%	\$302.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54840	REMOVE EPIDIDYMIS LESION		\$305.41	\$327.29	\$327.29	\$327.29	93.31%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54860	REMOVAL OF EPIDIDYMIS		\$339.40	\$425.20	\$425.20	\$425.20	79.82%	\$339.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	54861	REMOVAL OF EPIDIDYMIS		\$534.47	\$574.78	\$574.78	\$574.78	92.99%	\$534.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55000	DRAINAGE OF HYDROCELE		\$85.60	\$123.39	\$85.18	\$106.46	80.41%	\$85.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55040	REMOVAL OF HYDROCELE		\$305.41	\$344.45	\$344.45	\$344.45	88.67%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55041	REMOVAL OF HYDROCELES		\$517.56	\$518.53	\$518.53	\$518.53	99.81%	\$492.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55060	REPAIR OF HYDROCELE		\$308.47	\$386.06	\$386.06	\$386.06	79.90%	\$308.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55100	DRAINAGE OF SCROTUM ABSCESS		\$142.58	\$238.28	\$171.33	\$178.12	80.05%	\$142.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55110	EXPLORE SCROTUM		\$314.80	\$394.18	\$394.18	\$394.18	79.86%	\$314.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55120	REMOVAL OF SCROTUM LESION		\$288.00	\$361.92	\$361.92	\$361.92	79.58%	\$288.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55150	REMOVAL OF SCROTUM		\$399.77	\$499.65	\$499.65	\$499.65	80.01%	\$399.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55175	REVISION OF SCROTUM		\$296.68	\$371.21	\$371.21	\$371.21	79.92%	\$296.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55180	REVISION OF SCROTUM		\$555.90	\$694.54	\$694.54	\$694.54	80.04%	\$555.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55250	REMOVAL OF SPERM DUCT(S)		\$271.29	\$345.61	\$234.85	\$337.17	80.46%	\$271.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55500	REMOVAL OF HYDROCELE		\$318.60	\$397.72	\$397.72	\$397.72	80.11%	\$318.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55520	REMOVAL OF SPERM CORD LESION		\$372.40	\$464.35	\$464.35	\$464.35	80.20%	\$372.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55530	REVISE SPERMATIC CORD VEINS		\$305.41	\$357.79	\$357.79	\$357.79	85.36%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55535	REVISE SPERMATIC CORD VEINS		\$362.67	\$436.53	\$436.53	\$436.53	83.08%	\$362.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55550	LAPARO LIGATE SPERMATIC VEIN		\$347.73	\$435.81	\$435.81	\$435.81	79.79%	\$347.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55700	BIOPSY OF PROSTATE		\$171.35	\$247.35	\$129.22	\$211.78	80.91%	\$171.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55706	PROSTATE SATURATION SAMPLING		\$321.07	\$379.63	\$379.63	\$379.63	84.57%	\$321.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55840	EXTENSIVE PROSTATE SURGERY		\$992.59	\$1,168.92	\$1,168.92	\$1,168.92	84.92%	\$992.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55866	LAPARO RADICAL PROSTATECTOMY		\$1,194.54	\$1,191.13	\$1,191.13	\$1,191.13	100.29%	\$1,131.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	55873	CRYOABLATE PROSTATE		\$768.18	\$5,932.32	\$767.80	\$744.93	103.12%	\$707.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55874	TPRNL PLMT BIODEGRDABL MATRL		\$466.09	\$2,980.16	\$163.76	\$561.86	82.96%	\$466.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55875	TRANSPERI NEEDLE PLACE PROS		\$629.33	\$786.06	\$786.06	\$786.06	80.06%	\$629.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55876	PLACE RT DEVICE/MARKER PROS		\$117.95	\$155.46	\$102.89	\$136.79	86.23%	\$117.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55880	ABLTIJ MAL PRST8 TISS HIFU		\$981.13	\$981.05	\$981.05	\$981.05	100.01%	\$932.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	55920	PLACE NEEDLES PELVIC FOR RT		\$374.40	\$463.20	\$463.20	\$463.20	80.83%	\$374.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56405	I & D OF VULVA/PERINEUM		\$110.81	\$151.52	\$130.84	\$136.03	81.46%	\$110.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56420	DRAINAGE OF GLAND ABSCESS		\$112.11	\$193.38	\$113.46	\$138.27	81.08%	\$112.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56440	SURGERY FOR VULVA LESION		\$152.71	\$184.49	\$184.49	\$184.49	82.77%	\$152.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56441	LYSIS OF LABIAL LESION(S)		\$133.42	\$189.45	\$159.66	\$165.31	80.71%	\$133.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56501	DESTROY VULVA LESIONS SIM		\$151.89	\$199.83	\$137.79	\$186.67	81.37%	\$151.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56515	DESTROY VULVA LESION/S COMPL		\$219.70	\$285.71	\$217.01	\$271.31	80.98%	\$219.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56605	BIOPSY OF VULVA/PERINEUM		\$76.58	\$99.00	\$59.04	\$94.46	81.07%	\$76.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56606	BIOPSY OF VULVA/PERINEUM		\$28.73	\$38.46	\$28.99	\$34.89	82.34%	\$28.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56620	PARTIAL REMOVAL OF VULVA		\$484.67	\$603.44	\$603.44	\$603.44	80.32%	\$484.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56625	COMPLETE REMOVAL OF VULVA		\$572.64	\$683.46	\$683.46	\$683.46	83.79%	\$572.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56630	EXTENSIVE VULVA SURGERY		\$785.44	\$977.98	\$977.98	\$977.98	80.31%	\$785.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56632	EXTENSIVE VULVA SURGERY		\$1,241.90	\$1,460.24	\$1,460.24	\$1,460.24	85.05%	\$1,241.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56700	PARTIAL REMOVAL OF HYMEN		\$167.89	\$207.78	\$207.78	\$207.78	80.80%	\$167.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56740	REMOVE VAGINA GLAND LESION		\$258.26	\$320.14	\$320.14	\$320.14	80.67%	\$258.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56800	REPAIR OF VAGINA		\$207.60	\$257.79	\$257.79	\$257.79	80.53%	\$207.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56805	REPAIR CLITORIS		\$949.49	\$1,175.54	\$1,175.54	\$1,175.54	80.77%	\$949.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56810	REPAIR OF PERINEUM		\$222.56	\$277.76	\$277.76	\$277.76	80.13%	\$222.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56820	EXAM OF VULVA W/SCOPE		\$100.38	\$128.79	\$84.28	\$124.59	80.57%	\$100.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	56821	EXAM/BIOPSY OF VULVA W/SCOPE		\$129.02	\$172.36	\$113.47	\$160.15	80.56%	\$129.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57010	DRAINAGE OF PELVIC ABSCESS		\$376.80	\$467.12	\$467.12	\$467.12	80.66%	\$376.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57022	I & D VAGINAL HEMATOMA PP		\$149.12	\$184.61	\$184.61	\$184.61	80.78%	\$149.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57023	I & D VAG HEMATOMA NON-OB		\$261.60	\$324.57	\$324.57	\$324.57	80.60%	\$261.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57061	DESTROY VAG LESIONS SIMPLE		\$121.40	\$174.11	\$119.08	\$149.70	81.10%	\$121.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57065	DESTROY VAG LESIONS COMPLEX		\$190.87	\$254.62	\$190.12	\$210.85	90.53%	\$190.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	57100	BIOPSY OF VAGINA		\$75.62	\$106.41	\$65.40	\$93.83	80.59%	\$75.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57105	BIOPSY OF VAGINA		\$137.44	\$183.44	\$151.19	\$170.32	80.70%	\$137.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57106	REMOVE VAGINA WALL PARTIAL		\$442.00	\$550.15	\$550.15	\$550.15	80.34%	\$442.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57107	REMOVE VAGINA TISSUE PART		\$1,184.00	\$1,473.77	\$1,473.77	\$1,473.77	80.34%	\$1,184.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57110	REMOVE VAGINA WALL COMPLETE		\$736.00	\$911.89	\$911.89	\$911.89	80.71%	\$736.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57120	CLOSURE OF VAGINA		\$458.12	\$540.17	\$540.17	\$540.17	84.81%	\$458.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57130	REMOVE VAGINA LESION		\$175.23	\$237.54	\$176.90	\$175.33	99.94%	\$166.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57135	REMOVE VAGINA LESION		\$162.77	\$255.18	\$192.09	\$200.49	81.19%	\$162.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57155	INSERT UTERI TANDEM/OVOIDS		\$288.68	\$408.47	\$286.14	\$287.09	100.55%	\$272.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57156	INS VAG BRACHYTX DEVICE		\$129.81	\$235.82	\$152.75	\$153.00	84.84%	\$129.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57160	INSERT PESSARY/OTHER DEVICE		\$54.87	\$76.13	\$45.63	\$67.69	81.06%	\$54.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57170	FITTING OF DIAPHRAGM/CAP		\$62.24	\$79.53	\$46.93	\$76.29	81.59%	\$62.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57180	TREAT VAGINAL BLEEDING		\$120.24	\$205.56	\$123.89	\$122.74	97.96%	\$116.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57200	REPAIR OF VAGINA		\$273.76	\$341.48	\$341.48	\$341.48	80.17%	\$273.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57210	REPAIR VAGINA/PERINEUM		\$323.60	\$402.12	\$402.12	\$402.12	80.47%	\$323.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57240	ANTERIOR COLPORRHAPHY		\$501.18	\$621.90	\$621.90	\$621.90	80.59%	\$501.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57250	REPAIR RECTUM & VAGINA		\$503.33	\$624.25	\$624.25	\$624.25	80.63%	\$503.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57260	CMBN ANT PST COLPRHY		\$634.45	\$786.64	\$786.64	\$786.64	80.65%	\$634.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57265	CMBN AP COLPRHY W/NTRCL RPR		\$709.48	\$878.86	\$878.86	\$878.86	80.73%	\$709.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57267	INSERT MESH/PELVIC FLR ADDON		\$226.38	\$248.53	\$248.53	\$248.53	91.09%	\$226.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57268	REPAIR OF BOWEL BULGE		\$416.53	\$516.90	\$516.90	\$516.90	80.58%	\$416.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57270	REPAIR OF BOWEL POUCH		\$663.66	\$822.29	\$822.29	\$822.29	80.71%	\$663.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57280	SUSPENSION OF VAGINA		\$784.72	\$973.07	\$973.07	\$973.07	80.64%	\$784.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57282	COLPOPEXY EXTRAPERITONEAL		\$566.17	\$702.09	\$702.09	\$702.09	80.64%	\$566.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57283	COLPOPEXY INTRAPERITONEAL		\$570.65	\$706.78	\$706.78	\$706.78	80.74%	\$570.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57284	REPAIR PARAVAG DEFECT OPEN		\$728.04	\$840.46	\$840.46	\$840.46	86.62%	\$728.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57285	REPAIR PARAVAG DEFECT VAG		\$564.80	\$700.46	\$700.46	\$700.46	80.63%	\$564.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57287	REVISE/REMOVE SLING REPAIR		\$608.86	\$756.17	\$756.17	\$756.17	80.52%	\$608.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57288	REPAIR BLADDER DEFECT		\$606.28	\$753.77	\$753.77	\$753.77	80.43%	\$606.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57292	CONSTRUCT VAGINA WITH GRAFT		\$804.77	\$836.50	\$836.50	\$836.50	96.21%	\$794.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	57295	REVISE VAG GRAFT VIA VAGINA		\$411.35	\$510.49	\$510.49	\$510.49	80.58%	\$411.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57300	REPAIR RECTUM-VAGINA FISTULA		\$502.40	\$625.73	\$625.73	\$625.73	80.29%	\$502.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57308	FISTULA REPAIR TRANSPERINE		\$542.88	\$674.61	\$674.61	\$674.61	80.47%	\$542.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57310	REPAIR URETHROVAGINAL LESION		\$480.63	\$503.04	\$503.04	\$503.04	95.55%	\$477.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57320	REPAIR BLADDER-VAGINA LESION		\$546.30	\$574.37	\$574.37	\$574.37	95.11%	\$545.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57335	REPAIR VAGINA		\$959.20	\$1,187.79	\$1,187.79	\$1,187.79	80.75%	\$959.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57410	PELVIC EXAMINATION		\$85.39	\$107.01	\$107.01	\$107.01	79.79%	\$85.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57415	REMOVE VAGINAL FOREIGN BODY		\$144.36	\$179.74	\$179.74	\$179.74	80.32%	\$144.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57420	EXAM OF VAGINA W/SCOPE		\$98.21	\$136.56	\$89.94	\$122.35	80.27%	\$98.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57421	EXAM/BIOPSY OF VAG W/SCOPE		\$128.65	\$182.42	\$121.78	\$154.30	83.38%	\$128.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57423	REPAIR PARAVAG DEFECT LAP		\$754.67	\$935.42	\$935.42	\$935.42	80.68%	\$754.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57425	LAPAROSCOPY SURGERY COLPOPEXY		\$789.67	\$980.02	\$980.02	\$980.02	80.58%	\$789.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57426	REVISE PROSTH VAG GRAFT LAP		\$710.72	\$884.57	\$884.57	\$884.57	80.35%	\$710.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57452	EXAM OF CERVIX W/SCOPE		\$104.09	\$130.20	\$91.64	\$128.83	80.80%	\$104.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57454	BX/CURETT OF CERVIX W/SCOPE		\$137.78	\$172.34	\$134.13	\$170.55	80.78%	\$137.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57455	BIOPSY OF CERVIX W/SCOPE		\$130.50	\$165.94	\$108.45	\$162.20	80.46%	\$130.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57456	ENDOCERV CURETTAGE W/SCOPE		\$116.89	\$156.49	\$101.10	\$145.11	80.56%	\$116.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57460	BX OF CERVIX W/SCOPE LEEP		\$231.23	\$323.46	\$159.77	\$282.90	81.74%	\$231.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57461	CONZ OF CERVIX W/SCOPE LEEP		\$278.92	\$359.67	\$182.31	\$341.23	81.74%	\$278.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57465	CAM CERVIX UTERI DRG COLP		\$56.27	\$55.57	\$42.25	\$55.57	101.26%	\$52.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57500	BIOPSY OF CERVIX		\$119.21	\$158.99	\$75.91	\$146.24	81.52%	\$119.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57505	ENDOCERVICAL CURETTAGE		\$125.05	\$161.11	\$113.08	\$154.09	81.15%	\$125.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57510	CAUTERIZATION OF CERVIX		\$115.20	\$172.11	\$114.27	\$142.40	80.90%	\$115.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57511	CRYOCAUTERY OF CERVIX		\$164.91	\$206.31	\$151.28	\$203.57	81.01%	\$164.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57513	LASER SURGERY OF CERVIX		\$155.73	\$212.97	\$150.58	\$191.81	81.19%	\$155.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57520	CONIZATION OF CERVIX		\$248.44	\$364.33	\$304.04	\$308.04	80.65%	\$248.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57522	CONIZATION OF CERVIX		\$240.18	\$312.04	\$261.21	\$297.48	80.74%	\$240.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57530	REMOVAL OF CERVIX		\$308.40	\$383.75	\$383.75	\$383.75	80.37%	\$308.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57540	REMOVAL OF RESIDUAL CERVIX		\$645.60	\$799.93	\$799.93	\$799.93	80.71%	\$645.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57550	REMOVAL OF RESIDUAL CERVIX		\$392.84	\$441.48	\$441.48	\$441.48	88.98%	\$392.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	57700	REVISION OF CERVIX		\$296.80	\$367.88	\$367.88	\$367.88	80.68%	\$296.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57720	REVISION OF CERVIX		\$276.48	\$342.73	\$342.73	\$342.73	80.67%	\$276.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	57800	DILATION OF CERVICAL CANAL		\$59.68	\$80.24	\$48.69	\$73.76	80.91%	\$59.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58100	BIOPSY OF UTERUS LINING		\$81.06	\$103.94	\$62.93	\$99.91	81.13%	\$81.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58110	BX DONE W/COLPOSCOPY ADD-ON		\$41.24	\$50.80	\$39.93	\$50.52	81.63%	\$41.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58120	DILATION AND CURETTAGE		\$199.12	\$306.28	\$237.57	\$246.72	80.71%	\$199.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58140	MYOMECTOMY ABDOM METHOD		\$760.19	\$929.92	\$929.92	\$929.92	81.75%	\$760.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58145	MYOMECTOMY VAG METHOD		\$465.20	\$578.81	\$578.81	\$578.81	80.37%	\$465.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58146	MYOMECTOMY ABDOM COMPLEX		\$938.16	\$1,161.63	\$1,161.63	\$1,161.63	80.76%	\$938.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58263	VAG HYST W/T/O & VAG REPAIR		\$874.25	\$1,002.82	\$1,002.82	\$1,002.82	87.18%	\$874.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58301	REMOVE INTRAUTERINE DEVICE		\$87.60	\$113.24	\$65.92	\$108.32	80.88%	\$87.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58340	CATHETER FOR HYSTEROGRAPHY		\$143.11	\$252.10	\$58.27	\$172.48	82.97%	\$143.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58350	REOPEN FALLOPIAN TUBE		\$79.46	\$160.05	\$98.01	\$97.52	81.48%	\$79.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58353	ENDOMETR ABLATE THERMAL		\$189.67	\$958.92	\$234.40	\$227.45	83.39%	\$189.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58400	SUSPENSION OF UTERUS		\$433.68	\$472.65	\$472.65	\$472.65	91.75%	\$433.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58410	SUSPENSION OF UTERUS		\$665.60	\$824.07	\$824.07	\$824.07	80.77%	\$665.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58520	REPAIR OF RUPTURED UTERUS		\$652.53	\$807.13	\$807.13	\$807.13	80.85%	\$652.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58540	REVISION OF UTERUS		\$746.67	\$925.64	\$925.64	\$925.64	80.67%	\$746.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58543	LSH UTERUS ABOVE 250 G		\$710.08	\$850.83	\$850.83	\$850.83	83.46%	\$710.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58553	LAPARO-VAG HYST COMPLEX		\$908.00	\$1,125.27	\$1,125.27	\$1,125.27	80.69%	\$908.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58555	HYSTEROSCOPY DX SEP PROC		\$180.58	\$372.68	\$151.50	\$212.72	84.89%	\$180.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58558	HYSTEROSCOPY BIOPSY		\$296.74	\$1,374.71	\$230.97	\$356.89	83.15%	\$296.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58559	HYSTEROSCOPY LYSIS		\$285.57	\$283.18	\$283.18	\$283.18	100.84%	\$269.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58560	HYSTEROSCOPY RESECT SEPTUM		\$314.08	\$311.75	\$311.75	\$311.75	100.75%	\$296.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58561	HYSTEROSCOPY REMOVE MYOMA		\$359.45	\$356.67	\$356.67	\$356.67	100.78%	\$338.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58562	HYSTEROSCOPY REMOVE FB		\$238.47	\$443.16	\$221.29	\$291.19	81.89%	\$238.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58563	HYSTEROSCOPY ABLATION		\$311.53	\$2,184.00	\$245.29	\$347.28	89.71%	\$311.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58575	LAPS TOT HYST RESJ MAL		\$1,566.24	\$1,949.93	\$1,949.93	\$1,949.93	80.32%	\$1,566.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58600	DIVISION OF FALLOPIAN TUBE		\$381.78	\$377.18	\$377.18	\$377.18	101.22%	\$358.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58605	DIVISION OF FALLOPIAN TUBE		\$286.33	\$343.20	\$343.20	\$343.20	83.43%	\$286.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	58611	LIGATE OVIDUCT(S) ADD-ON		\$76.06	\$74.89	\$74.89	\$74.89	101.56%	\$71.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58660	LAPAROSCOPY LYSIS		\$553.16	\$689.53	\$689.53	\$689.53	80.22%	\$553.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58661	LAPAROSCOPY REMOVE ADNEXA		\$557.00	\$657.32	\$657.32	\$657.32	84.74%	\$557.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58662	LAPAROSCOPY EXCISE LESIONS		\$578.98	\$720.04	\$720.04	\$720.04	80.41%	\$578.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58670	LAPAROSCOPY TUBAL CAUTERY		\$314.03	\$377.88	\$377.88	\$377.88	83.10%	\$314.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58671	LAPAROSCOPY TUBAL BLOCK		\$323.27	\$377.88	\$377.88	\$377.88	85.55%	\$323.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58672	LAPAROSCOPY FIMBRIOPLASTY		\$593.60	\$735.32	\$735.32	\$735.32	80.73%	\$593.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58674	LAPS ABLTJ UTERINE FIBROIDS		\$661.60	\$819.50	\$819.50	\$819.50	80.73%	\$661.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58700	REMOVAL OF FALLOPIAN TUBE		\$652.04	\$810.02	\$810.02	\$810.02	80.50%	\$652.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58720	REMOVAL OF OVARY/TUBE(S)		\$618.47	\$770.40	\$770.40	\$770.40	80.28%	\$618.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58740	ADHESIOLYSIS TUBE OVARY		\$734.40	\$910.40	\$910.40	\$910.40	80.67%	\$734.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58800	DRAINAGE OF OVARIAN CYST(S)		\$260.00	\$372.08	\$322.66	\$321.40	80.90%	\$260.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58805	DRAINAGE OF OVARIAN CYST(S)		\$381.78	\$437.08	\$437.08	\$437.08	87.35%	\$381.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58825	TRANSPOSITION OVARY(S)		\$579.60	\$718.12	\$718.12	\$718.12	80.71%	\$579.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58920	PARTIAL REMOVAL OF OVARY(S)		\$583.73	\$722.62	\$722.62	\$722.62	80.78%	\$583.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58925	REMOVAL OF OVARIAN CYST(S)		\$625.68	\$775.65	\$775.65	\$775.65	80.67%	\$625.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58940	REMOVAL OF OVARY(S)		\$455.80	\$564.82	\$564.82	\$564.82	80.70%	\$455.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58943	REMOVAL OF OVARY(S)		\$951.80	\$1,215.78	\$1,215.78	\$1,215.78	78.29%	\$951.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58951	RESECT OVARIAN MALIGNANCY		\$1,170.20	\$1,456.51	\$1,456.51	\$1,456.51	80.34%	\$1,170.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58952	RESECT OVARIAN MALIGNANCY		\$1,337.20	\$1,665.16	\$1,665.16	\$1,665.16	80.30%	\$1,337.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58953	TAH RAD DISSECT FOR DEBULK		\$1,621.45	\$2,018.24	\$2,018.24	\$2,018.24	80.34%	\$1,621.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58954	TAH RAD DEBULK/LYMPH REMOVE		\$1,752.40	\$2,182.96	\$2,182.96	\$2,182.96	80.28%	\$1,752.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	58956	BSO OMENTECTOMY W/TAH		\$1,103.20	\$1,374.91	\$1,374.91	\$1,374.91	80.24%	\$1,103.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60100	BIOPSY OF THYROID		\$77.23	\$111.70	\$75.60	\$95.03	81.27%	\$77.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60200	REMOVE THYROID LESION		\$545.80	\$677.89	\$677.89	\$677.89	80.51%	\$545.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60210	PARTIAL THYROID EXCISION		\$657.01	\$713.68	\$713.68	\$713.68	92.06%	\$657.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60220	PARTIAL REMOVAL OF THYROID		\$575.48	\$714.09	\$714.09	\$714.09	80.59%	\$575.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60225	PARTIAL REMOVAL OF THYROID		\$760.40	\$947.04	\$947.04	\$947.04	80.29%	\$760.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60240	REMOVAL OF THYROID		\$742.87	\$921.60	\$921.60	\$921.60	80.61%	\$742.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60252	REMOVAL OF THYROID		\$1,068.33	\$1,323.68	\$1,323.68	\$1,323.68	80.71%	\$1,068.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	60254	EXTENSIVE THYROID SURGERY		\$1,350.00	\$1,669.22	\$1,669.22	\$1,669.22	80.88%	\$1,350.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60260	REPEAT THYROID SURGERY		\$881.20	\$1,092.38	\$1,092.38	\$1,092.38	80.67%	\$881.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60270	REMOVAL OF THYROID		\$1,099.20	\$1,362.96	\$1,362.96	\$1,362.96	80.65%	\$1,099.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60271	REMOVAL OF THYROID		\$930.74	\$1,058.44	\$1,058.44	\$1,058.44	87.93%	\$930.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60280	REMOVE THYROID DUCT LESION		\$419.94	\$466.64	\$466.64	\$466.64	89.99%	\$419.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60281	REMOVE THYROID DUCT LESION		\$491.20	\$609.14	\$609.14	\$609.14	80.64%	\$491.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60300	ASPIR/INJ THYROID CYST		\$72.80	\$110.31	\$47.92	\$89.45	81.39%	\$72.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60500	EXPLORE PARATHYROID GLANDS		\$784.76	\$974.49	\$974.49	\$974.49	80.53%	\$784.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60502	RE-EXPLORE PARATHYROIDS		\$1,050.27	\$1,305.94	\$1,305.94	\$1,305.94	80.42%	\$1,050.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60512	AUTOTRANSPLANT PARATHYROID		\$239.37	\$238.37	\$238.37	\$238.37	100.42%	\$226.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60520	REMOVAL OF THYMUS GLAND		\$843.87	\$1,048.06	\$1,048.06	\$1,048.06	80.52%	\$843.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60521	REMOVAL OF THYMUS GLAND		\$1,104.46	\$1,108.37	\$1,108.37	\$1,108.37	99.65%	\$1,052.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60540	EXPLORE ADRENAL GLAND		\$865.07	\$1,078.67	\$1,078.67	\$1,078.67	80.20%	\$865.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60600	REMOVE CAROTID BODY LESION		\$1,082.76	\$1,343.34	\$1,343.34	\$1,343.34	80.60%	\$1,082.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	60650	LAPAROSCOPY ADRENALECTOMY		\$952.56	\$1,185.97	\$1,185.97	\$1,185.97	80.32%	\$952.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61000	REMOVE CRANIAL CAVITY FLUID		\$90.40	\$113.60	\$113.60	\$113.60	79.58%	\$90.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61001	REMOVE CRANIAL CAVITY FLUID		\$85.60	\$107.80	\$107.80	\$107.80	79.41%	\$85.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61020	REMOVE BRAIN CAVITY FLUID		\$84.80	\$107.09	\$107.09	\$107.09	79.18%	\$84.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61026	INJECTION INTO BRAIN CANAL		\$107.57	\$110.03	\$110.03	\$110.03	97.76%	\$104.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61070	BRAIN CANAL SHUNT PROCEDURE		\$53.47	\$56.35	\$56.35	\$56.35	94.89%	\$53.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61107	DRILL SKULL FOR IMPLANTATION		\$298.16	\$307.02	\$307.02	\$307.02	97.12%	\$291.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61108	DRILL SKULL FOR DRAINAGE		\$801.71	\$920.07	\$920.07	\$920.07	87.14%	\$801.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61150	PIERCE SKULL FOR DRAINAGE		\$1,086.93	\$1,357.74	\$1,357.74	\$1,357.74	80.05%	\$1,086.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61154	PIERCE SKULL & REMOVE CLOT		\$1,032.79	\$1,292.12	\$1,292.12	\$1,292.12	79.93%	\$1,032.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61156	PIERCE SKULL FOR DRAINAGE		\$991.73	\$1,246.18	\$1,246.18	\$1,246.18	79.58%	\$991.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61210	PIERCE SKULL IMPLANT DEVICE		\$289.60	\$359.83	\$359.83	\$359.83	80.48%	\$289.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61215	INSERT BRAIN-FLUID DEVICE		\$423.20	\$530.35	\$530.35	\$530.35	79.80%	\$423.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61304	OPEN SKULL FOR EXPLORATION		\$1,315.00	\$1,645.40	\$1,645.40	\$1,645.40	79.92%	\$1,315.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61305	OPEN SKULL FOR EXPLORATION		\$1,609.60	\$2,008.66	\$2,008.66	\$2,008.66	80.13%	\$1,609.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61312	OPEN SKULL FOR DRAINAGE		\$1,657.58	\$2,068.75	\$2,068.75	\$2,068.75	80.12%	\$1,657.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	61313	OPEN SKULL FOR DRAINAGE		\$1,592.80	\$1,991.61	\$1,991.61	\$1,991.61	79.98%	\$1,592.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61314	OPEN SKULL FOR DRAINAGE		\$1,464.20	\$1,831.01	\$1,831.01	\$1,831.01	79.97%	\$1,464.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61315	OPEN SKULL FOR DRAINAGE		\$1,658.83	\$2,071.84	\$2,071.84	\$2,071.84	80.07%	\$1,658.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61320	OPEN SKULL FOR DRAINAGE		\$1,516.95	\$1,894.37	\$1,894.37	\$1,894.37	80.08%	\$1,516.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61321	OPEN SKULL FOR DRAINAGE		\$1,703.20	\$2,125.72	\$2,125.72	\$2,125.72	80.12%	\$1,703.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61322	DECOMPRESSIVE CRANIOTOMY		\$1,908.23	\$2,384.01	\$2,384.01	\$2,384.01	80.04%	\$1,908.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61323	DECOMPRESSIVE LOBECTOMY		\$1,912.29	\$2,386.28	\$2,386.28	\$2,386.28	80.14%	\$1,912.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61333	EXPLORE ORBIT/REMOVE LESION		\$1,615.20	\$2,015.50	\$2,015.50	\$2,015.50	80.14%	\$1,615.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61343	INCISE SKULL (PRESS RELIEF)		\$1,760.34	\$2,192.53	\$2,192.53	\$2,192.53	80.29%	\$1,760.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61345	RELIEVE CRANIAL PRESSURE		\$1,639.20	\$2,045.50	\$2,045.50	\$2,045.50	80.14%	\$1,639.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61458	INCISE SKULL FOR BRAIN WOUND		\$1,618.24	\$2,013.69	\$2,013.69	\$2,013.69	80.36%	\$1,618.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61460	INCISE SKULL FOR SURGERY		\$1,689.20	\$2,108.13	\$2,108.13	\$2,108.13	80.13%	\$1,689.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61500	REMOVAL OF SKULL LESION		\$1,230.06	\$1,309.93	\$1,309.93	\$1,309.93	93.90%	\$1,230.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61501	REMOVE INFECTED SKULL BONE		\$1,054.82	\$1,142.98	\$1,142.98	\$1,142.98	92.29%	\$1,054.82	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61510	REMOVAL OF BRAIN LESION		\$1,769.22	\$2,209.92	\$2,209.92	\$2,209.92	80.06%	\$1,769.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61512	REMOVE BRAIN LINING LESION		\$2,044.19	\$2,548.83	\$2,548.83	\$2,548.83	80.20%	\$2,044.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61514	REMOVAL OF BRAIN ABSCESS		\$1,540.00	\$1,918.87	\$1,918.87	\$1,918.87	80.26%	\$1,540.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61516	REMOVAL OF BRAIN LESION		\$1,503.47	\$1,879.99	\$1,879.99	\$1,879.99	79.97%	\$1,503.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61518	REMOVAL OF BRAIN LESION		\$2,217.90	\$2,769.70	\$2,769.70	\$2,769.70	80.08%	\$2,217.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61519	REMOVE BRAIN LINING LESION		\$2,355.28	\$2,931.28	\$2,931.28	\$2,931.28	80.35%	\$2,355.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61520	REMOVAL OF BRAIN LESION		\$2,986.72	\$3,702.08	\$3,702.08	\$3,702.08	80.68%	\$2,986.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61521	REMOVAL OF BRAIN LESION		\$2,530.40	\$3,163.83	\$3,163.83	\$3,163.83	79.98%	\$2,530.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61522	REMOVAL OF BRAIN ABSCESS		\$1,753.20	\$2,188.35	\$2,188.35	\$2,188.35	80.12%	\$1,753.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61524	REMOVAL OF BRAIN LESION		\$1,717.95	\$2,086.57	\$2,086.57	\$2,086.57	82.33%	\$1,717.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61526	REMOVAL OF BRAIN LESION		\$2,689.07	\$3,330.44	\$3,330.44	\$3,330.44	80.74%	\$2,689.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61534	REMOVAL OF BRAIN LESION		\$1,527.07	\$1,660.70	\$1,660.70	\$1,660.70	91.95%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61536	REMOVAL OF BRAIN LESION		\$2,061.07	\$2,570.56	\$2,570.56	\$2,570.56	80.18%	\$2,061.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61537	REMOVAL OF BRAIN TISSUE		\$1,962.08	\$2,446.06	\$2,446.06	\$2,446.06	80.21%	\$1,962.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61538	REMOVAL OF BRAIN TISSUE		\$2,123.20	\$2,647.66	\$2,647.66	\$2,647.66	80.19%	\$2,123.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61541	INCISION OF BRAIN TISSUE		\$1,908.85	\$2,151.17	\$2,151.17	\$2,151.17	88.74%	\$1,908.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	61543	REMOVAL OF BRAIN TISSUE		\$1,959.23	\$2,174.30	\$2,174.30	\$2,174.30	90.11%	\$1,959.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61545	EXCISION OF BRAIN TUMOR		\$2,548.00	\$3,178.32	\$3,178.32	\$3,178.32	80.17%	\$2,548.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61548	REMOVAL OF PITUITARY GLAND		\$1,420.94	\$1,572.67	\$1,572.67	\$1,572.67	90.35%	\$1,420.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61550	RELEASE OF SKULL SEAMS		\$971.20	\$1,214.92	\$1,214.92	\$1,214.92	79.94%	\$971.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61552	RELEASE OF SKULL SEAMS		\$1,200.16	\$1,498.75	\$1,498.75	\$1,498.75	80.08%	\$1,200.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61556	INCISE SKULL/SUTURES		\$1,374.34	\$1,715.63	\$1,715.63	\$1,715.63	80.11%	\$1,374.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61557	INCISE SKULL/SUTURES		\$1,359.88	\$1,698.60	\$1,698.60	\$1,698.60	80.06%	\$1,359.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61558	EXCISION OF SKULL/SUTURES		\$1,585.48	\$1,890.47	\$1,890.47	\$1,890.47	83.87%	\$1,585.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61559	EXCISION OF SKULL/SUTURES		\$2,015.71	\$2,404.10	\$2,404.10	\$2,404.10	83.84%	\$2,015.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61571	INCISE SKULL FOR BRAIN WOUND		\$1,598.72	\$1,995.65	\$1,995.65	\$1,995.65	80.11%	\$1,598.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61580	CRANIOFACIAL APPROACH SKULL		\$2,037.20	\$2,513.95	\$2,513.95	\$2,513.95	81.04%	\$2,037.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61582	CRANIOFACIAL APPROACH SKULL		\$2,570.40	\$3,036.97	\$3,036.97	\$3,036.97	84.64%	\$2,570.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61583	CRANIOFACIAL APPROACH SKULL		\$2,372.27	\$2,930.89	\$2,930.89	\$2,930.89	80.94%	\$2,372.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61584	ORBITOCRANIAL APPROACH/SKULL		\$2,347.20	\$2,891.03	\$2,891.03	\$2,891.03	81.19%	\$2,347.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61590	INFRA TEMPORAL APPROACH/SKULL		\$2,464.32	\$3,041.10	\$3,041.10	\$3,041.10	81.03%	\$2,464.32	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61591	INFRA TEMPORAL APPROACH/SKULL		\$2,500.00	\$3,088.53	\$3,088.53	\$3,088.53	80.94%	\$2,500.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61600	RESECT/EXCISE CRANIAL LESION		\$1,744.00	\$2,146.15	\$2,146.15	\$2,146.15	81.26%	\$1,744.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61601	RESECT/EXCISE CRANIAL LESION		\$1,973.07	\$2,448.57	\$2,448.57	\$2,448.57	80.58%	\$1,973.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61605	RESECT/EXCISE CRANIAL LESION		\$1,780.90	\$2,192.11	\$2,192.11	\$2,192.11	81.24%	\$1,780.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61606	RESECT/EXCISE CRANIAL LESION		\$2,358.00	\$2,909.16	\$2,909.16	\$2,909.16	81.05%	\$2,358.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61608	RESECT/EXCISE CRANIAL LESION		\$2,640.40	\$3,277.55	\$3,277.55	\$3,277.55	80.56%	\$2,640.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61618	REPAIR DURA		\$1,042.40	\$1,294.91	\$1,294.91	\$1,294.91	80.50%	\$1,042.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61623	ENDOVASC TEMPORY VESSEL OCCL		\$456.00	\$566.52	\$566.52	\$566.52	80.49%	\$456.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61624	TRANSCATH OCCLUSION CNS		\$1,019.69	\$1,141.29	\$1,141.29	\$1,141.29	89.35%	\$1,019.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61626	TRANSCATH OCCLUSION NON-CNS		\$856.30	\$889.24	\$889.24	\$889.24	96.30%	\$844.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61630	INTRACRANIAL ANGIOPLASTY		\$1,090.80	\$1,351.73	\$1,351.73	\$1,351.73	80.70%	\$1,090.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61635	INTRACRAN ANGIOPLSTY W/STENT		\$1,178.40	\$1,467.66	\$1,467.66	\$1,467.66	80.29%	\$1,178.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61645	PERQ ART M-THROMBECT &/NFS		\$666.19	\$828.26	\$828.26	\$828.26	80.43%	\$666.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61650	EVASC PRLNG ADMN RX AGNT 1ST		\$452.45	\$571.62	\$571.62	\$571.62	79.15%	\$452.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61651	EVASC PRLNG ADMN RX AGNT ADD		\$194.40	\$244.04	\$244.04	\$244.04	79.66%	\$194.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	61680	INTRACRANIAL VESSEL SURGERY		\$1,792.00	\$2,270.53	\$2,270.53	\$2,270.53	78.92%	\$1,792.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61682	INTRACRANIAL VESSEL SURGERY		\$3,301.20	\$4,129.51	\$4,129.51	\$4,129.51	79.94%	\$3,301.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61684	INTRACRANIAL VESSEL SURGERY		\$2,271.20	\$2,832.49	\$2,832.49	\$2,832.49	80.18%	\$2,271.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61692	INTRACRANIAL VESSEL SURGERY		\$2,904.00	\$3,620.45	\$3,620.45	\$3,620.45	80.21%	\$2,904.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61697	BRAIN ANEURYSM REPR COMPLX		\$3,362.53	\$4,189.34	\$4,189.34	\$4,189.34	80.26%	\$3,362.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61698	BRAIN ANEURYSM REPR COMPLX		\$3,676.80	\$4,581.70	\$4,581.70	\$4,581.70	80.25%	\$3,676.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61700	BRAIN ANEURYSM REPR SIMPLE		\$2,704.97	\$3,393.00	\$3,393.00	\$3,393.00	79.72%	\$2,704.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61735	INCISE SKULL/BRAIN SURGERY		\$1,284.80	\$1,604.48	\$1,604.48	\$1,604.48	80.08%	\$1,284.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61736	LITT ICR 1 TRAJ 1 SMPL LES		\$785.94	\$1,194.19	\$1,194.19	\$1,194.19	65.81%	\$785.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61737	LITT ICR MLT TRJ MLT/CPLX LS		\$1,065.00	\$1,435.12	\$1,435.12	\$1,435.12	74.21%	\$1,065.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61750	INCISE SKULL/BRAIN BIOPSY		\$1,132.69	\$1,414.51	\$1,414.51	\$1,414.51	80.08%	\$1,132.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61751	BRAIN BIOPSY W/CT/MR GUIDE		\$1,120.64	\$1,400.85	\$1,400.85	\$1,400.85	80.00%	\$1,120.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61760	IMPLANT BRAIN ELECTRODES		\$1,276.25	\$1,583.24	\$1,583.24	\$1,583.24	80.61%	\$1,276.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61781	SCAN PROC CRANIAL INTRA		\$202.73	\$230.96	\$230.96	\$230.96	87.78%	\$202.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61782	SCAN PROC CRANIAL EXTRA		\$167.61	\$171.52	\$171.52	\$171.52	97.72%	\$162.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61783	SCAN PROC SPINAL		\$202.73	\$227.14	\$227.14	\$227.14	89.26%	\$202.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61790	TREAT TRIGEMINAL NERVE		\$773.10	\$894.01	\$894.01	\$894.01	86.48%	\$773.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61796	SRS CRANIAL LESION SIMPLE		\$822.19	\$1,027.81	\$1,027.81	\$1,027.81	79.99%	\$822.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61797	SRS CRAN LES SIMPLE ADDL		\$172.39	\$215.22	\$215.22	\$215.22	80.10%	\$172.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61798	SRS CRANIAL LESION COMPLEX		\$1,108.58	\$1,385.31	\$1,385.31	\$1,385.31	80.02%	\$1,108.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61799	SRS CRAN LES COMPLEX ADDL		\$238.40	\$297.42	\$297.42	\$297.42	80.16%	\$238.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61800	APPLY SRS HEADFRAME ADD-ON		\$119.68	\$148.77	\$148.77	\$148.77	80.45%	\$119.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61860	IMPLANT NEUROELECTRODES		\$1,256.60	\$1,568.26	\$1,568.26	\$1,568.26	80.13%	\$1,256.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61863	IMPLANT NEUROELECTRODE		\$1,213.37	\$1,516.86	\$1,516.86	\$1,516.86	79.99%	\$1,213.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61864	IMPLANT NEUROELECTRDE ADDL		\$222.80	\$276.95	\$276.95	\$276.95	80.45%	\$222.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61867	IMPLANT NEUROELECTRODE		\$1,826.63	\$2,279.25	\$2,279.25	\$2,279.25	80.14%	\$1,826.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61880	REVISE/REMOVE NEUROELECTRODE		\$479.80	\$600.41	\$600.41	\$600.41	79.91%	\$479.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61885	INSRT/REDO NEUROSTIM 1 ARRAY		\$431.67	\$540.80	\$540.80	\$540.80	79.82%	\$431.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61886	IMPLANT NEUROSTIM ARRAYS		\$718.29	\$901.73	\$901.73	\$901.73	79.66%	\$718.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	61888	REVISE/REMOVE NEURORECEIVER		\$323.20	\$403.10	\$403.10	\$403.10	80.18%	\$323.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	62000	TREAT SKULL FRACTURE		\$837.60	\$1,046.44	\$1,046.44	\$1,046.44	80.04%	\$837.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62005	TREAT SKULL FRACTURE		\$1,026.56	\$1,282.51	\$1,282.51	\$1,282.51	80.04%	\$1,026.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62010	TREATMENT OF HEAD INJURY		\$1,238.84	\$1,547.17	\$1,547.17	\$1,547.17	80.07%	\$1,238.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62100	REPAIR BRAIN FLUID LEAKAGE		\$1,336.18	\$1,580.84	\$1,580.84	\$1,580.84	84.52%	\$1,336.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62120	REPAIR SKULL CAVITY LESION		\$1,691.47	\$2,101.68	\$2,101.68	\$2,101.68	80.48%	\$1,691.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62121	INCISE SKULL REPAIR		\$1,527.07	\$1,572.35	\$1,572.35	\$1,572.35	97.12%	\$1,493.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62140	REPAIR OF SKULL DEFECT		\$916.23	\$1,032.00	\$1,032.00	\$1,032.00	88.78%	\$916.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62141	REPAIR OF SKULL DEFECT		\$1,046.81	\$1,152.94	\$1,152.94	\$1,152.94	90.79%	\$1,046.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62142	REMOVE SKULL PLATE/FLAP		\$723.52	\$905.06	\$905.06	\$905.06	79.94%	\$723.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62143	REPLACE SKULL PLATE/FLAP		\$846.03	\$1,054.93	\$1,054.93	\$1,054.93	80.20%	\$846.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62145	REPAIR OF SKULL & BRAIN		\$1,280.81	\$1,427.53	\$1,427.53	\$1,427.53	89.72%	\$1,280.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62146	REPAIR OF SKULL WITH GRAFT		\$1,068.94	\$1,260.40	\$1,260.40	\$1,260.40	84.81%	\$1,068.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62147	REPAIR OF SKULL WITH GRAFT		\$1,328.56	\$1,423.39	\$1,423.39	\$1,423.39	93.34%	\$1,328.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62160	NEUROENDOSCOPY ADD-ON		\$148.40	\$184.30	\$184.30	\$184.30	80.52%	\$148.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62161	DISSECT BRAIN W/SCOPE		\$1,225.07	\$1,534.76	\$1,534.76	\$1,534.76	79.82%	\$1,225.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62162	REMOVE COLLOID CYST W/SCOPE		\$1,518.00	\$1,895.43	\$1,895.43	\$1,895.43	80.09%	\$1,518.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62164	REMOVE BRAIN TUMOR W/SCOPE		\$1,684.00	\$2,102.79	\$2,102.79	\$2,102.79	80.08%	\$1,684.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62165	REMOVE PITUIT TUMOR W/SCOPE		\$1,227.90	\$1,524.90	\$1,524.90	\$1,524.90	80.52%	\$1,227.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62190	ESTABLISH BRAIN CAVITY SHUNT		\$754.40	\$944.08	\$944.08	\$944.08	79.91%	\$754.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62192	ESTABLISH BRAIN CAVITY SHUNT		\$790.00	\$1,006.48	\$1,006.48	\$1,006.48	78.49%	\$790.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62200	ESTABLISH BRAIN CAVITY SHUNT		\$1,259.81	\$1,384.70	\$1,384.70	\$1,384.70	90.98%	\$1,259.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62201	BRAIN CAVITY SHUNT W/SCOPE		\$1,072.00	\$1,230.02	\$1,230.02	\$1,230.02	87.15%	\$1,072.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62220	ESTABLISH BRAIN CAVITY SHUNT		\$780.80	\$981.52	\$981.52	\$981.52	79.55%	\$780.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62223	ESTABLISH BRAIN CAVITY SHUNT		\$840.42	\$1,045.92	\$1,045.92	\$1,045.92	80.35%	\$840.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62225	REPLACE/IRRIGATE CATHETER		\$438.70	\$550.05	\$550.05	\$550.05	79.76%	\$438.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62230	REPLACE/REVISE BRAIN SHUNT		\$725.35	\$850.86	\$850.86	\$850.86	85.25%	\$725.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62252	CSF SHUNT REPROGRAM		\$68.91	\$87.57	\$87.57	\$87.57	78.69%	\$68.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62256	REMOVE BRAIN CAVITY SHUNT		\$498.30	\$625.82	\$625.82	\$625.82	79.62%	\$498.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62258	REPLACE BRAIN CAVITY SHUNT		\$898.77	\$1,123.42	\$1,123.42	\$1,123.42	80.00%	\$898.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62264	EPIDURAL LYSIS ON SINGLE DAY		\$377.94	\$451.70	\$245.60	\$451.70	83.67%	\$377.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	62267	INTERDISCAL PERQ ASPIR DX		\$154.84	\$269.81	\$152.73	\$150.30	103.02%	\$142.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62268	DRAIN SPINAL CORD CYST		\$205.60	\$327.29	\$327.29	\$327.29	62.82%	\$205.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62270	DX LMBR SPI PNXR		\$51.55	\$150.02	\$62.74	\$70.17	73.47%	\$51.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62272	THER SPI PNXR DRG CSF		\$73.77	\$189.06	\$90.56	\$94.61	77.97%	\$73.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62273	INJECT EPIDURAL PATCH		\$107.27	\$171.79	\$113.25	\$112.72	95.16%	\$107.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62284	INJECTION FOR MYELOGRAM		\$84.71	\$192.70	\$82.64	\$81.62	103.78%	\$77.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62290	NJX PX DISCOGRAPHY LUMBAR		\$137.28	\$353.81	\$155.76	\$165.39	83.00%	\$137.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62302	MYELOGRAPHY LUMBAR INJECTION		\$144.83	\$260.96	\$117.95	\$140.03	103.43%	\$133.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62303	MYELOGRAPHY LUMBAR INJECTION		\$120.00	\$265.59	\$118.02	\$115.77	103.66%	\$109.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62304	MYELOGRAPHY LUMBAR INJECTION		\$128.86	\$259.62	\$116.60	\$124.70	103.33%	\$118.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62305	MYELOGRAPHY LUMBAR INJECTION		\$123.00	\$282.95	\$121.01	\$119.17	103.21%	\$113.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62320	NJX INTERLAMINAR CRV/THRC		\$128.72	\$167.88	\$99.88	\$157.82	81.56%	\$128.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62321	NJX INTERLAMINAR CRV/THRC		\$137.47	\$272.21	\$107.82	\$170.27	80.74%	\$137.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62322	NJX INTERLAMINAR LMBR/SAC		\$90.46	\$138.71	\$79.12	\$87.51	103.38%	\$83.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62323	NJX INTERLAMINAR LMBR/SAC		\$110.88	\$267.95	\$99.70	\$136.99	80.94%	\$110.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62324	NJX INTERLAMINAR CRV/THRC		\$89.60	\$140.03	\$88.50	\$87.98	101.84%	\$83.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62325	NJX INTERLAMINAR CRV/THRC		\$187.68	\$258.09	\$110.17	\$228.19	82.25%	\$187.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62326	NJX INTERLAMINAR LMBR/SAC		\$86.21	\$140.54	\$84.81	\$84.23	102.35%	\$80.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62328	DX LMBR SPI PNXR W/FLUOR/CT		\$88.24	\$228.87	\$84.46	\$83.10	106.18%	\$78.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62329	THER SPI PNXR CSF FLUOR/CT		\$107.87	\$269.16	\$103.01	\$97.00	111.21%	\$92.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62350	IMPLANT SPINAL CANAL CATH		\$361.54	\$403.86	\$403.86	\$403.86	89.52%	\$361.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62351	IMPLANT SPINAL CANAL CATH		\$734.80	\$926.78	\$926.78	\$926.78	79.29%	\$734.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62355	REMOVE SPINAL CANAL CATHETER		\$281.50	\$282.02	\$282.02	\$282.02	99.82%	\$267.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62362	IMPLANT SPINE INFUSION PUMP		\$363.45	\$391.09	\$391.09	\$391.09	92.93%	\$363.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62365	REMOVE SPINE INFUSION DEVICE		\$299.69	\$304.08	\$304.08	\$304.08	98.56%	\$288.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62367	ANALYZE SPINE INFUS PUMP		\$25.95	\$32.48	\$24.77	\$27.27	95.15%	\$25.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62368	ANALYZE SP INF PUMP W/REPROG		\$40.47	\$45.01	\$34.15	\$39.93	101.34%	\$37.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62369	ANAL SP INF PMP W/REPRG&FILL		\$81.68	\$95.49	\$34.85	\$81.12	100.69%	\$77.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	62370	ANL SP INF PMP W/MDREPRG&FIL		\$63.16	\$94.99	\$45.57	\$62.28	101.41%	\$59.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63001	REMOVE SPINE LAMINA 1/2 CRVL		\$1,124.69	\$1,237.74	\$1,237.74	\$1,237.74	90.87%	\$1,124.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	63003	REMOVE SPINE LAMINA 1/2 THRC		\$1,131.54	\$1,242.60	\$1,242.60	\$1,242.60	91.06%	\$1,131.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63005	REMOVE SPINE LAMINA 1/2 LMBR		\$1,074.67	\$1,212.77	\$1,212.77	\$1,212.77	88.61%	\$1,074.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63011	REMOVE SPINE LAMINA 1/2 SCRL		\$1,015.49	\$1,101.48	\$1,101.48	\$1,101.48	92.19%	\$1,015.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63012	REMOVE LAMINA/FACETS LUMBAR		\$1,093.40	\$1,204.46	\$1,204.46	\$1,204.46	90.78%	\$1,093.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63015	REMOVE SPINE LAMINA >2 CRVCL		\$1,351.08	\$1,491.30	\$1,491.30	\$1,491.30	90.60%	\$1,351.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63020	NECK SPINE DISK SURGERY		\$890.13	\$1,111.61	\$1,111.61	\$1,111.61	80.08%	\$890.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63030	LOW BACK DISK SURGERY		\$784.92	\$928.88	\$928.88	\$928.88	84.50%	\$784.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63035	SPINAL DISK SURGERY ADD-ON		\$185.53	\$229.78	\$229.78	\$229.78	80.74%	\$185.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63040	LAMINOTOMY SINGLE CERVICAL		\$1,302.19	\$1,386.14	\$1,386.14	\$1,386.14	93.94%	\$1,302.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63042	LAMINOTOMY SINGLE LUMBAR		\$1,219.36	\$1,306.73	\$1,306.73	\$1,306.73	93.31%	\$1,219.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63045	LAM FACETEC & FORAMOT CRV		\$1,164.78	\$1,298.84	\$1,298.84	\$1,298.84	89.68%	\$1,164.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63046	LAM FACETEC & FORAMOT THRC		\$1,113.62	\$1,241.46	\$1,241.46	\$1,241.46	89.70%	\$1,113.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63047	REMOVE SPINE LAMINA 1 LMBR		\$1,016.26	\$1,118.05	\$1,118.05	\$1,118.05	90.90%	\$1,016.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63048	LAM FACETEC & FORAMOT EA ADDL		\$203.48	\$207.28	\$207.28	\$207.28	98.17%	\$196.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63050	CERVICAL LAMINOPLSTY 2/> SEG		\$1,192.00	\$1,475.61	\$1,475.61	\$1,475.61	80.78%	\$1,192.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63051	C-LAMINOPLASTY W/GRAFT/PLATE		\$1,365.28	\$1,697.78	\$1,697.78	\$1,697.78	80.42%	\$1,365.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63052	LAM FACETC/FRMT ARTHRD LUM 1		\$255.82	\$254.00	\$254.00	\$254.00	100.72%	\$241.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63053	LAM FACTC/FRMT ARTHRD LUM EA		\$206.00	\$225.69	\$225.69	\$225.69	91.28%	\$206.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63055	DECOMPRESS SPINAL CORD THRC		\$1,374.35	\$1,630.20	\$1,630.20	\$1,630.20	84.31%	\$1,374.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63056	DECOMPRESS SPINAL CORD LMBR		\$1,374.35	\$1,496.20	\$1,496.20	\$1,496.20	91.86%	\$1,374.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63057	DECOMPRESS SPINE CORD ADD-ON		\$254.40	\$315.87	\$315.87	\$315.87	80.54%	\$254.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63064	DECOMPRESS SPINAL CORD THRC		\$1,432.00	\$1,779.80	\$1,779.80	\$1,779.80	80.46%	\$1,432.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63075	NECK SPINE DISK SURGERY		\$1,095.77	\$1,361.39	\$1,361.39	\$1,361.39	80.49%	\$1,095.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63076	NECK SPINE DISK SURGERY		\$229.07	\$238.14	\$238.14	\$238.14	96.19%	\$226.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63081	REMOVE VERT BODY DCMPRN CRVL		\$1,527.07	\$1,767.19	\$1,767.19	\$1,767.19	86.41%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63082	REMOVE VERTEBRAL BODY ADD-ON		\$259.98	\$261.65	\$261.65	\$261.65	99.36%	\$248.57	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63085	REMOVE VERT BODY DCMPRN THRC		\$1,679.77	\$1,942.42	\$1,942.42	\$1,942.42	86.48%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63086	REMOVE VERTEBRAL BODY ADD-ON		\$184.78	\$188.17	\$188.17	\$188.17	98.20%	\$178.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63087	REMOV VERTBR DCMPRN THRCLMBR		\$1,933.60	\$2,415.01	\$2,415.01	\$2,415.01	80.07%	\$1,933.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63088	REMOVE VERTEBRAL BODY ADD-ON		\$252.74	\$254.35	\$254.35	\$254.35	99.37%	\$241.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	63090	REMOVE VERT BODY DCMPRN LMBR		\$1,908.85	\$1,946.31	\$1,946.31	\$1,946.31	98.08%	\$1,848.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63091	REMOVE VERTEBRAL BODY ADD-ON		\$173.71	\$172.76	\$172.76	\$172.76	100.55%	\$164.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63101	REMOVE VERT BODY DCMPRN THRC		\$1,867.27	\$2,328.64	\$2,328.64	\$2,328.64	80.19%	\$1,867.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63102	REMOVE VERT BODY DCMPRN LMBR		\$1,840.08	\$2,289.34	\$2,289.34	\$2,289.34	80.38%	\$1,840.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63103	REMOVE VERTEBRAL BODY ADD-ON		\$233.20	\$288.72	\$288.72	\$288.72	80.77%	\$233.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63172	DRAINAGE OF SPINAL CYST		\$1,267.84	\$1,422.10	\$1,422.10	\$1,422.10	89.15%	\$1,267.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63173	DRAINAGE OF SPINAL CYST		\$1,527.07	\$1,734.80	\$1,734.80	\$1,734.80	88.03%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63185	INCISE SPINE NRV HALF SEGMNT		\$1,038.02	\$1,243.54	\$1,243.54	\$1,243.54	83.47%	\$1,038.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63190	INCISE SPINE NRV >2 SEGMNTS		\$1,193.03	\$1,251.90	\$1,251.90	\$1,251.90	95.30%	\$1,189.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63200	RELEASE SPINAL CORD LUMBAR		\$1,374.35	\$1,542.63	\$1,542.63	\$1,542.63	89.09%	\$1,374.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63251	REVISE SPINAL CORD VSLS THRC		\$2,420.00	\$3,017.41	\$3,017.41	\$3,017.41	80.20%	\$2,420.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63265	EXCISE INTRASPINL LESION CRV		\$1,527.07	\$1,678.22	\$1,678.22	\$1,678.22	90.99%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63266	EXCISE INTRSPINL LESION THRC		\$1,527.07	\$1,722.69	\$1,722.69	\$1,722.69	88.64%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63267	EXCISE INTRSPINL LESION LMBR		\$1,261.75	\$1,382.99	\$1,382.99	\$1,382.99	91.23%	\$1,261.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63268	EXCISE INTRSPINL LESION SCRL		\$1,298.00	\$1,475.56	\$1,475.56	\$1,475.56	87.97%	\$1,298.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63270	EXCISE INTRSPINL LESION CRVL		\$1,667.60	\$2,080.70	\$2,080.70	\$2,080.70	80.15%	\$1,667.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63271	EXCISE INTRSPINL LESION THRC		\$1,667.20	\$2,075.44	\$2,075.44	\$2,075.44	80.33%	\$1,667.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63272	EXCISE INTRSPINL LESION LMBR		\$1,503.73	\$1,879.50	\$1,879.50	\$1,879.50	80.01%	\$1,503.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63275	BX/EXC XDRL SPINE LESN CRVL		\$1,527.07	\$1,806.62	\$1,806.62	\$1,806.62	84.53%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63276	BX/EXC XDRL SPINE LESN THRC		\$1,527.07	\$1,795.18	\$1,795.18	\$1,795.18	85.06%	\$1,527.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63277	BX/EXC XDRL SPINE LESN LMBR		\$1,374.35	\$1,570.16	\$1,570.16	\$1,570.16	87.53%	\$1,374.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63278	BX/EXC XDRL SPINE LESN SCRL		\$1,285.60	\$1,605.65	\$1,605.65	\$1,605.65	80.07%	\$1,285.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63281	BX/EXC IDRL SPINE LESN THRC		\$1,685.03	\$2,106.81	\$2,106.81	\$2,106.81	79.98%	\$1,685.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63282	BX/EXC IDRL SPINE LESN LMBR		\$1,592.80	\$1,987.27	\$1,987.27	\$1,987.27	80.15%	\$1,592.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63283	BX/EXC IDRL SPINE LESN SCRL		\$1,531.20	\$1,912.46	\$1,912.46	\$1,912.46	80.06%	\$1,531.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63285	BX/EXC IDRL IMED LESN CERVL		\$2,092.27	\$2,610.73	\$2,610.73	\$2,610.73	80.14%	\$2,092.27	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63287	BX/EXC IDRL IMED LESN THRLMB		\$2,192.80	\$2,735.89	\$2,735.89	\$2,735.89	80.15%	\$2,192.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63295	REPAIR LAMINECTOMY DEFECT		\$260.80	\$322.65	\$322.65	\$322.65	80.83%	\$260.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63300	REMOVE VERT XDRL BODY CRVCL		\$1,679.77	\$1,817.26	\$1,817.26	\$1,817.26	92.43%	\$1,679.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63302	REMOVE VERT XDRL BODY THRLMB		\$1,832.48	\$2,183.83	\$2,183.83	\$2,183.83	83.91%	\$1,832.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	63303	REMOV VERT XDRL BDY LMBR/SAC		\$1,908.85	\$2,312.92	\$2,312.92	\$2,312.92	82.53%	\$1,908.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63308	REMOVE VERTEBRAL BODY ADD-ON		\$305.41	\$315.08	\$315.08	\$315.08	96.93%	\$299.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63650	IMPLANT NEUROELECTRODES		\$580.14	\$2,377.15	\$418.46	\$706.42	82.12%	\$580.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63655	IMPLANT NEUROELECTRODES		\$774.99	\$852.23	\$852.23	\$852.23	90.94%	\$774.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63661	REMOVE SPINE ELTRD PERQ ARAY		\$332.64	\$707.48	\$333.48	\$329.41	100.98%	\$312.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63662	REMOVE SPINE ELTRD PLATE		\$689.98	\$864.95	\$864.95	\$864.95	79.77%	\$689.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63663	REVISE SPINE ELTRD PERQ ARAY		\$456.00	\$931.47	\$455.12	\$451.34	101.03%	\$428.77	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63664	REVISE SPINE ELTRD PLATE		\$718.80	\$899.82	\$899.82	\$899.82	79.88%	\$718.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63685	INSRT/REDO SPINE N GENERATOR		\$372.98	\$344.21	\$344.21	\$344.21	108.36%	\$327.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63688	REVISE/REMOVE NEURORECEIVER		\$343.59	\$304.51	\$304.51	\$304.51	112.84%	\$289.28	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63702	REPAIR OF SPINAL HERNIATION		\$1,159.20	\$1,448.28	\$1,448.28	\$1,448.28	80.04%	\$1,159.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63704	REPAIR OF SPINAL HERNIATION		\$1,348.80	\$1,685.10	\$1,685.10	\$1,685.10	80.04%	\$1,348.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63706	REPAIR OF SPINAL HERNIATION		\$1,494.00	\$1,866.01	\$1,866.01	\$1,866.01	80.06%	\$1,494.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63707	REPAIR SPINAL FLUID LEAKAGE		\$831.86	\$950.83	\$950.83	\$950.83	87.49%	\$831.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63709	REPAIR SPINAL FLUID LEAKAGE		\$1,010.54	\$1,126.37	\$1,126.37	\$1,126.37	89.72%	\$1,010.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63710	GRAFT REPAIR OF SPINE DEFECT		\$1,009.38	\$1,096.18	\$1,096.18	\$1,096.18	92.08%	\$1,009.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63740	INSTALL SPINAL SHUNT		\$802.13	\$1,002.33	\$1,002.33	\$1,002.33	80.03%	\$802.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	63744	REVISION OF SPINAL SHUNT		\$553.60	\$695.84	\$695.84	\$695.84	79.56%	\$553.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64400	NJX AA&/STRD TRIGEMINAL NRV		\$85.76	\$117.17	\$51.63	\$86.05	99.67%	\$81.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64405	NJX AA&/STRD GR OCPL NRV		\$56.83	\$76.50	\$52.32	\$71.15	79.87%	\$56.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64408	NJX AA&/STRD VAGUS NRV		\$45.59	\$83.93	\$45.02	\$44.78	101.80%	\$42.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64415	NJX AA&/STRD BRACH PLEXUS		\$56.42	\$137.68	\$68.98	\$69.32	81.39%	\$56.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64416	NJX AA&/STRD BRACH PLEX NFS		\$77.99	\$76.09	\$76.09	\$76.09	102.49%	\$72.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64417	NJX AA&/STRD AXILLARY NRV		\$57.26	\$165.66	\$63.66	\$62.85	91.11%	\$57.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64418	NJX AA&/STRD SPRSCAP NRV		\$68.39	\$88.23	\$55.28	\$83.99	81.43%	\$68.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64420	NJX AA&/STRD NTRCOST NRV 1		\$57.58	\$100.68	\$58.27	\$71.72	80.29%	\$57.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64421	NJX AA&/STRD NTRCOST NRV EA		\$27.78	\$33.93	\$24.81	\$27.92	99.52%	\$26.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64425	NJX AA&/STRD II IH NERVES		\$67.19	\$114.12	\$54.53	\$83.07	80.88%	\$67.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64430	NJX AA&/STRD PUDENDAL NERVE		\$57.26	\$101.00	\$54.73	\$65.09	87.97%	\$57.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64435	NJX AA&/STRD PARACRV NRV		\$63.40	\$82.72	\$43.82	\$77.75	81.55%	\$63.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	64445	NJX AA&/STRD SCIATIC NERVE		\$63.26	\$163.71	\$71.88	\$77.09	82.06%	\$63.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64446	NJX AA&/STRD SCIATIC NRV NFS		\$76.29	\$74.42	\$74.42	\$74.42	102.52%	\$70.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64447	NJX AA&/STRD FEMORAL NERVE		\$61.08	\$119.15	\$62.71	\$62.49	97.75%	\$59.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64448	NJX AA&/STRD FEM NERVE NFS		\$72.03	\$71.09	\$71.09	\$71.09	101.32%	\$67.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64449	NJX AA&/STRD LMBR PLEX NFS		\$62.20	\$63.29	\$63.29	\$63.29	98.27%	\$60.13	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64450	NJX AA&/STRD OTHER PN/BRANCH		\$48.34	\$77.42	\$42.01	\$60.07	80.47%	\$48.34	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64451	NJX AA&/STRD NRV NRV TG SI JT		\$215.34	\$236.42	\$81.85	\$212.89	101.15%	\$202.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64454	NJX AA&/STRD GNCLR NRV BRNCH		\$187.90	\$230.11	\$82.55	\$186.35	100.83%	\$177.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64455	NJX AA&/STRD PLTR COM DG NRV		\$40.62	\$51.00	\$33.13	\$50.77	80.00%	\$40.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64461	PVB THORACIC SINGLE INJ SITE		\$80.95	\$137.08	\$77.14	\$79.48	101.84%	\$75.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64462	PVB THORACIC 2ND+ INJ SITE		\$45.43	\$72.34	\$47.80	\$53.80	84.44%	\$45.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64463	PVB THORACIC CONT INFUSION		\$70.64	\$235.35	\$80.42	\$78.97	89.46%	\$70.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64479	NJX AA&/STRD TFRM EPI C/T 1		\$154.87	\$274.70	\$131.34	\$153.70	100.76%	\$146.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64480	NJX AA&/STRD TFRM EPI C/T EA		\$76.99	\$138.98	\$60.82	\$76.33	100.86%	\$72.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64483	NJX AA&/STRD TFRM EPI L/S 1		\$162.40	\$255.18	\$112.17	\$160.98	100.88%	\$152.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64484	NJX AA&/STRD TFRM EPI L/S EA		\$83.69	\$114.82	\$51.38	\$82.52	101.42%	\$78.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64486	TAP BLOCK UNIL BY INJECTION		\$67.25	\$114.34	\$54.40	\$65.90	102.05%	\$62.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64487	TAP BLOCK UNI BY INFUSION		\$63.33	\$220.86	\$62.43	\$61.18	103.52%	\$58.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64488	TAP BLOCK BI INJECTION		\$68.88	\$141.04	\$67.78	\$67.38	102.23%	\$64.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64489	TAP BLOCK BI BY INFUSION		\$78.00	\$359.31	\$76.09	\$74.85	104.21%	\$71.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64490	INJ PARAVERT F JNT C/T 1 LEV		\$108.18	\$198.87	\$105.98	\$135.47	79.85%	\$108.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64491	INJ PARAVERT F JNT C/T 2 LEV		\$60.54	\$99.71	\$59.05	\$75.44	80.25%	\$60.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64492	INJ PARAVERT F JNT C/T 3 LEV		\$58.97	\$100.06	\$60.10	\$73.22	80.54%	\$58.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64493	INJ PARAVERT F JNT L/S 1 LEV		\$101.95	\$183.42	\$91.23	\$127.21	80.14%	\$101.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64494	INJ PARAVERT F JNT L/S 2 LEV		\$56.66	\$93.44	\$50.68	\$70.63	80.22%	\$56.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64495	INJ PARAVERT F JNT L/S 3 LEV		\$53.49	\$93.44	\$51.73	\$66.68	80.21%	\$53.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64505	N BLOCK SPENOPALATINE GANGL		\$116.96	\$148.36	\$106.29	\$146.70	79.73%	\$116.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64510	N BLOCK STELLATE GANGLION		\$77.83	\$151.50	\$77.89	\$96.53	80.62%	\$77.83	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64517	N BLOCK INJ HYOGAS PLXS		\$142.40	\$199.98	\$127.07	\$145.30	98.01%	\$138.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64520	N BLOCK LUMBAR/THORACIC		\$99.58	\$239.56	\$86.03	\$123.54	80.60%	\$99.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	64530	N BLOCK INJ CELIAC PELUS		\$102.50	\$236.96	\$95.35	\$125.27	81.82%	\$102.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64553	IMPLANT NEUROELECTRODES		\$319.60	\$4,039.39	\$453.24	\$600.50	53.22%	\$319.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64555	IMPLANT NEUROELECTRODES		\$263.31	\$2,218.10	\$326.01	\$318.41	82.69%	\$263.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64561	IMPLANT NEUROELECTRODES		\$399.11	\$757.42	\$303.85	\$389.85	102.37%	\$370.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64566	NEUROELTRD STIM POST TIBIAL		\$112.22	\$121.18	\$30.05	\$120.18	93.37%	\$112.22	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64568	INC FOR VAGUS N ELECT IMPL		\$551.66	\$611.07	\$611.07	\$611.07	90.28%	\$551.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64569	REVISE/REPL VAGUS N ELTRD		\$622.20	\$777.95	\$777.95	\$777.95	79.98%	\$622.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64570	REMOVE VAGUS N ELTRD		\$599.20	\$750.10	\$750.10	\$750.10	79.88%	\$599.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64585	REVISE/REMOVE NEUROELECTRODE		\$116.67	\$249.76	\$146.36	\$144.42	80.78%	\$116.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64590	INSRT/REDO PN/GASTR STIMUL		\$163.70	\$452.01	\$296.38	\$270.75	60.46%	\$163.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64595	REVISE/RMV PN/GASTR STIMUL		\$130.00	\$373.58	\$231.62	\$200.61	64.80%	\$130.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64600	INJECTION TREATMENT OF NERVE		\$388.48	\$492.72	\$239.30	\$492.72	78.84%	\$388.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64611	CHEMODENERV SALIV GLANDS		\$92.55	\$136.01	\$115.68	\$117.79	78.57%	\$92.55	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64612	DESTROY NERVE FACE MUSCLE		\$112.66	\$141.45	\$121.82	\$136.90	82.29%	\$112.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64615	CHEMODENERV MUSC MIGRAINE		\$120.68	\$155.13	\$122.18	\$149.67	80.63%	\$120.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64616	CHEMODENERV MUSC NECK DYSTON		\$109.41	\$140.66	\$109.82	\$137.87	79.36%	\$109.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64617	CHEMODENER MUSCLE LARYNX EMG		\$117.43	\$165.82	\$108.69	\$115.37	101.79%	\$109.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64620	INJECTION TREATMENT OF NERVE		\$144.53	\$214.64	\$179.59	\$180.91	79.89%	\$144.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64624	DSTRJ NULYT AGT GNCLR NRV		\$359.15	\$403.23	\$147.35	\$354.60	101.28%	\$336.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64625	RF ABLTJ NRV NRVTG SI JT		\$413.55	\$489.90	\$197.22	\$409.26	101.05%	\$388.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64630	INJECTION TREATMENT OF NERVE		\$155.02	\$261.92	\$192.87	\$192.86	80.38%	\$155.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64632	N BLOCK INJ COMMON DIGIT		\$74.12	\$93.10	\$67.86	\$93.10	79.62%	\$74.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64633	DESTROY CERV/THOR FACET JNT		\$266.32	\$453.55	\$193.82	\$263.46	101.09%	\$250.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64634	DESTROY C/TH FACET JNT ADDL		\$138.34	\$265.89	\$66.80	\$135.59	102.03%	\$128.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64635	DESTROY LUMB/SAC FACET JNT		\$288.04	\$457.41	\$194.17	\$284.71	101.17%	\$270.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64636	DESTROY L/S FACET JNT ADDL		\$112.71	\$249.81	\$58.42	\$137.88	81.74%	\$112.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64640	INJECTION TREATMENT OF NERVE		\$134.63	\$256.94	\$120.24	\$167.86	80.20%	\$134.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64642	CHEMODENERV 1 EXTREMITY 1-4		\$122.55	\$156.46	\$107.39	\$123.01	99.63%	\$116.86	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64643	CHEMODENERV 1 EXTREM 1-4 EA		\$77.55	\$94.86	\$69.63	\$77.80	99.68%	\$73.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64644	CHEMODENERV 1 EXTREM 5/> MUS		\$140.12	\$182.14	\$116.24	\$156.29	89.65%	\$140.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	64645	CHEMODENERV 1 EXTREM 5/> EA		\$98.87	\$122.67	\$80.61	\$98.35	100.53%	\$93.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64646	CHEMODENERV TRUNK MUSC 1-5		\$132.10	\$164.32	\$115.95	\$157.22	84.02%	\$132.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64647	CHEMODENERV TRUNK MUSC 6/>		\$152.71	\$186.94	\$133.31	\$186.94	81.69%	\$152.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64650	CHEMODENERV ECCRINE GLANDS		\$47.51	\$91.64	\$40.81	\$58.80	80.80%	\$47.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64653	CHEMODENERV ECCRINE GLANDS		\$54.98	\$107.31	\$51.58	\$56.29	97.68%	\$53.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64680	INJECTION TREATMENT OF NERVE		\$162.06	\$352.62	\$161.94	\$196.21	82.60%	\$162.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64681	INJECTION TREATMENT OF NERVE		\$225.46	\$466.66	\$220.24	\$218.60	103.14%	\$207.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64702	REVISE FINGER/TOE NERVE		\$425.75	\$531.31	\$531.31	\$531.31	80.13%	\$425.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64704	REVISE HAND/FOOT NERVE		\$305.41	\$333.75	\$333.75	\$333.75	91.51%	\$305.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64708	REVISE ARM/LEG NERVE		\$413.94	\$524.97	\$524.97	\$524.97	78.85%	\$413.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64712	REVISION OF SCIATIC NERVE		\$512.33	\$608.08	\$608.08	\$608.08	84.25%	\$512.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64713	REVISION OF ARM NERVE(S)		\$648.59	\$813.87	\$813.87	\$813.87	79.69%	\$648.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64714	REVISE LOW BACK NERVE(S)		\$621.20	\$779.52	\$779.52	\$779.52	79.69%	\$621.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64716	REVISION OF CRANIAL NERVE		\$487.89	\$523.60	\$523.60	\$523.60	93.18%	\$487.89	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64718	REVISE ULNAR NERVE AT ELBOW		\$499.26	\$623.29	\$623.29	\$623.29	80.10%	\$499.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64719	REVISE ULNAR NERVE AT WRIST		\$338.18	\$422.00	\$422.00	\$422.00	80.14%	\$338.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64721	CARPAL TUNNEL SURGERY		\$363.39	\$461.66	\$453.60	\$453.59	80.12%	\$363.39	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64722	RELIEVE PRESSURE ON NERVE(S)		\$300.36	\$380.89	\$380.89	\$380.89	78.86%	\$300.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64727	INTERNAL NERVE REVISION		\$144.80	\$179.35	\$179.35	\$179.35	80.74%	\$144.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64766	INCISE HIP/THIGH NERVE		\$516.16	\$641.93	\$641.93	\$641.93	80.41%	\$516.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64772	INCISION OF SPINAL NERVE		\$459.51	\$570.25	\$570.25	\$570.25	80.58%	\$459.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64774	REMOVE SKIN NERVE LESION		\$350.93	\$438.61	\$438.61	\$438.61	80.01%	\$350.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64776	REMOVE DIGIT NERVE LESION		\$327.84	\$416.03	\$416.03	\$416.03	78.80%	\$327.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64778	DIGIT NERVE SURGERY ADD-ON		\$144.40	\$178.05	\$178.05	\$178.05	81.10%	\$144.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64782	REMOVE LIMB NERVE LESION		\$373.46	\$465.79	\$465.79	\$465.79	80.18%	\$373.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64783	LIMB NERVE SURGERY ADD-ON		\$172.00	\$212.36	\$212.36	\$212.36	81.00%	\$172.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64784	REMOVE NERVE LESION		\$592.68	\$735.73	\$735.73	\$735.73	80.56%	\$592.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64786	REMOVE SCIATIC NERVE LESION		\$808.80	\$1,004.53	\$1,004.53	\$1,004.53	80.52%	\$808.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64787	IMPLANT NERVE END		\$229.07	\$231.27	\$231.27	\$231.27	99.05%	\$219.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64788	REMOVE SKIN NERVE LESION		\$333.05	\$420.14	\$420.14	\$420.14	79.27%	\$333.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Other Surgeries	64790	REMOVAL OF NERVE LESION		\$688.40	\$861.11	\$861.11	\$861.11	79.94%	\$688.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64792	REMOVAL OF NERVE LESION		\$862.40	\$1,085.86	\$1,085.86	\$1,085.86	79.42%	\$862.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64795	BIOPSY OF NERVE		\$155.47	\$194.35	\$194.35	\$194.35	80.00%	\$155.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64820	SYMPATHECTOMY DIGITAL ARTERY		\$627.80	\$783.12	\$783.12	\$783.12	80.17%	\$627.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64822	REMOVE SYMPATHETIC NERVES		\$574.80	\$716.08	\$716.08	\$716.08	80.27%	\$574.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64823	SYMPATHECTOMY SUPFC PALMAR		\$649.20	\$808.63	\$808.63	\$808.63	80.28%	\$649.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64831	REPAIR OF DIGIT NERVE		\$571.44	\$711.25	\$711.25	\$711.25	80.34%	\$571.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64832	REPAIR NERVE ADD-ON		\$266.50	\$329.37	\$329.37	\$329.37	80.91%	\$266.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64834	REPAIR OF HAND OR FOOT NERVE		\$601.12	\$758.90	\$758.90	\$758.90	79.21%	\$601.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64835	REPAIR OF HAND OR FOOT NERVE		\$666.88	\$829.73	\$829.73	\$829.73	80.37%	\$666.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64836	REPAIR OF HAND OR FOOT NERVE		\$666.93	\$829.73	\$829.73	\$829.73	80.38%	\$666.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64840	REPAIR OF LEG NERVE		\$784.80	\$975.24	\$975.24	\$975.24	80.47%	\$784.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64856	REPAIR/TRANSPOSE NERVE		\$822.00	\$1,016.02	\$1,016.02	\$1,016.02	80.90%	\$822.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64857	REPAIR ARM/LEG NERVE		\$856.96	\$1,062.47	\$1,062.47	\$1,062.47	80.66%	\$856.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64859	NERVE SURGERY		\$196.80	\$243.59	\$243.59	\$243.59	80.79%	\$196.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64864	REPAIR OF FACIAL NERVE		\$703.36	\$867.42	\$867.42	\$867.42	81.09%	\$703.36	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64865	REPAIR OF FACIAL NERVE		\$892.00	\$1,100.63	\$1,100.63	\$1,100.63	81.04%	\$892.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64868	FUSION OF FACIAL/OTHER NERVE		\$992.97	\$1,009.40	\$1,009.40	\$1,009.40	98.37%	\$958.93	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64874	REPAIR & REVISE NERVE ADD-ON		\$137.60	\$170.76	\$170.76	\$170.76	80.58%	\$137.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64885	NERVE GRAFT HEAD/NECK <4 CM		\$875.20	\$1,084.72	\$1,084.72	\$1,084.72	80.68%	\$875.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64886	NERVE GRAFT HEAD/NECK >4 CM		\$1,243.04	\$1,297.66	\$1,297.66	\$1,297.66	95.79%	\$1,232.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64890	NERVE GRAFT HAND/FOOT <4 CM		\$876.00	\$1,088.53	\$1,088.53	\$1,088.53	80.48%	\$876.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64892	NERVE GRAFT ARM/LEG <4 CM		\$853.60	\$1,059.88	\$1,059.88	\$1,059.88	80.54%	\$853.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64893	NERVE GRAFT ARM/LEG >4 CM		\$908.80	\$1,129.37	\$1,129.37	\$1,129.37	80.47%	\$908.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64896	NERVE GRAFT HAND/FOOT >4 CM		\$1,155.20	\$1,435.62	\$1,435.62	\$1,435.62	80.47%	\$1,155.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64905	NERVE PEDICLE TRANSFER		\$818.04	\$1,010.51	\$1,010.51	\$1,010.51	80.95%	\$818.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64910	NERVE REPAIR W/ALLOGRAFT		\$623.53	\$776.04	\$776.04	\$776.04	80.35%	\$623.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64912	NRV RPR W/NRV ALGRFT 1ST		\$795.03	\$909.57	\$909.57	\$909.57	87.41%	\$795.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	64913	NRV RPR W/NRV ALGRFT EA ADDL		\$138.80	\$170.98	\$170.98	\$170.98	81.18%	\$138.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Other Surgeries	69990	MICROSURGERY ADD-ON		\$171.19	\$212.82	\$212.82	\$212.82	80.44%	\$171.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	30000	DRAINAGE OF NOSE LESION		\$164.40	\$276.19	\$124.77	\$199.06	82.59%	\$164.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30020	DRAINAGE OF NOSE LESION		\$156.69	\$281.45	\$126.52	\$191.44	81.85%	\$156.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30100	INTRANASAL BIOPSY		\$90.03	\$146.23	\$69.82	\$110.08	81.78%	\$90.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30115	REMOVAL OF NOSE POLYP(S)		\$394.30	\$483.11	\$483.11	\$483.11	81.62%	\$394.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30117	REMOVAL OF INTRANASAL LESION		\$522.20	\$1,032.02	\$428.08	\$649.72	80.37%	\$522.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30118	REMOVAL OF INTRANASAL LESION		\$662.40	\$731.25	\$731.25	\$731.25	90.58%	\$662.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30124	REMOVAL OF NOSE LESION		\$255.20	\$315.97	\$315.97	\$315.97	80.77%	\$255.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30125	REMOVAL OF NOSE LESION		\$549.60	\$675.32	\$675.32	\$675.32	81.38%	\$549.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30130	EXCISE INFERIOR TURBINATE		\$353.06	\$432.77	\$432.77	\$432.77	81.58%	\$353.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30140	RESECT INFERIOR TURBINATE		\$189.49	\$304.58	\$179.10	\$186.07	101.84%	\$176.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30200	INJECTION TREATMENT OF NOSE		\$93.60	\$114.73	\$61.10	\$114.73	81.59%	\$93.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30220	INSERT NASAL SEPTAL BUTTON		\$144.35	\$316.96	\$132.24	\$176.08	81.98%	\$144.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30300	REMOVE NASAL FOREIGN BODY		\$115.00	\$219.39	\$127.56	\$141.09	81.51%	\$115.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30310	REMOVE NASAL FOREIGN BODY		\$175.03	\$215.63	\$215.63	\$215.63	81.17%	\$175.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30400	RECONSTRUCTION OF NOSE		\$1,034.40	\$1,266.93	\$1,266.93	\$1,266.93	81.65%	\$1,034.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30410	RECONSTRUCTION OF NOSE		\$1,184.95	\$1,452.75	\$1,452.75	\$1,452.75	81.57%	\$1,184.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30420	RECONSTRUCTION OF NOSE		\$1,214.91	\$1,491.14	\$1,491.14	\$1,491.14	81.48%	\$1,214.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30450	REVISION OF NOSE		\$1,456.80	\$1,787.66	\$1,787.66	\$1,787.66	81.49%	\$1,456.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30460	REVISION OF NOSE		\$686.74	\$844.79	\$844.79	\$844.79	81.29%	\$686.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30462	REVISION OF NOSE		\$1,318.56	\$1,620.74	\$1,620.74	\$1,620.74	81.36%	\$1,318.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30465	REPAIR NASAL STENOSIS		\$857.98	\$1,054.40	\$1,054.40	\$1,054.40	81.37%	\$857.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30520	REPAIR OF NASAL SEPTUM		\$566.99	\$697.78	\$697.78	\$697.78	81.26%	\$566.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30560	RELEASE OF NASAL ADHESIONS		\$141.60	\$336.18	\$157.07	\$172.11	82.27%	\$141.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30580	REPAIR UPPER JAW FISTULA		\$378.40	\$625.65	\$469.32	\$466.38	81.14%	\$378.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30600	REPAIR MOUTH/NOSE FISTULA		\$381.78	\$531.39	\$391.53	\$389.96	97.90%	\$370.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30630	REPAIR NASAL SEPTUM DEFECT		\$563.68	\$690.33	\$690.33	\$690.33	81.65%	\$563.68	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30801	ABLATE INF TURBINATE SUPERF		\$130.12	\$228.00	\$158.25	\$159.12	81.77%	\$130.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30802	ABLATE INF TURBINATE SUBMUC		\$178.15	\$288.36	\$209.14	\$218.20	81.65%	\$178.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30901	CONTROL OF NOSEBLEED		\$80.90	\$161.67	\$56.16	\$98.65	82.01%	\$80.90	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30903	CONTROL OF NOSEBLEED		\$101.37	\$252.32	\$76.36	\$122.89	82.49%	\$101.37	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	30905	CONTROL OF NOSEBLEED		\$129.50	\$362.81	\$105.18	\$157.63	82.15%	\$129.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30906	REPEAT CONTROL OF NOSEBLEED		\$118.35	\$388.70	\$132.13	\$132.33	89.43%	\$118.35	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30915	LIGATION NASAL SINUS ARTERY		\$504.00	\$620.62	\$620.62	\$620.62	81.21%	\$504.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	30930	THER FX NASAL INF TURBINATE		\$98.15	\$122.44	\$122.44	\$122.44	80.16%	\$98.15	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31000	IRRIGATION MAXILLARY SINUS		\$91.73	\$193.56	\$114.35	\$113.19	81.04%	\$91.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31020	EXPLORATION MAXILLARY SINUS		\$298.67	\$436.17	\$354.15	\$352.51	84.73%	\$298.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31030	EXPLORATION MAXILLARY SINUS		\$534.47	\$663.21	\$528.96	\$528.66	101.10%	\$502.23	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31032	EXPLORE SINUS REMOVE POLYPS		\$530.64	\$612.66	\$612.66	\$612.66	86.61%	\$530.64	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31040	EXPLORATION BEHIND UPPER JAW		\$699.01	\$827.82	\$827.82	\$827.82	84.44%	\$699.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31070	EXPLORATION OF FRONTAL SINUS		\$402.40	\$493.41	\$493.41	\$493.41	81.55%	\$402.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31085	REMOVAL OF FRONTAL SINUS		\$1,039.20	\$1,276.74	\$1,276.74	\$1,276.74	81.39%	\$1,039.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31090	EXPLORATION OF SINUSES		\$932.00	\$1,143.84	\$1,143.84	\$1,143.84	81.48%	\$932.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31200	REMOVAL OF ETHMOID SINUS		\$526.40	\$651.39	\$651.39	\$651.39	80.81%	\$526.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31201	REMOVAL OF ETHMOID SINUS		\$667.20	\$803.18	\$803.18	\$803.18	83.07%	\$667.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31225	REMOVAL OF UPPER JAW		\$1,481.53	\$1,826.06	\$1,826.06	\$1,826.06	81.13%	\$1,481.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31231	NASAL ENDOSCOPY DX		\$136.21	\$194.49	\$64.80	\$165.84	82.13%	\$136.21	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31233	NSL/SINS NDSC DX MAX SINUSC		\$223.40	\$283.50	\$136.64	\$274.20	81.47%	\$223.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31235	NSL/SINS NDSC DX SPHN SINUSC		\$261.12	\$322.05	\$160.81	\$322.05	81.08%	\$261.12	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31237	NASAL/SINUS ENDOSCOPY SURGERY		\$203.53	\$264.55	\$161.14	\$251.56	80.91%	\$203.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31238	NASAL/SINUS ENDOSCOPY SURGERY		\$166.75	\$256.83	\$168.50	\$205.51	81.14%	\$166.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31239	NASAL/SINUS ENDOSCOPY SURGERY		\$610.06	\$616.10	\$616.10	\$616.10	99.02%	\$585.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31240	NASAL/SINUS ENDOSCOPY SURGERY		\$158.05	\$160.08	\$160.08	\$160.08	98.73%	\$152.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31253	NSL/SINS NDSC TOTAL		\$427.38	\$498.23	\$498.23	\$498.23	85.78%	\$427.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31254	NSL/SINS NDSC W/PRTL ETHMDCT		\$259.61	\$449.24	\$243.14	\$254.19	102.13%	\$241.48	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31255	NSL/SINS NDSC W/TOT ETHMDCT		\$326.50	\$322.69	\$322.69	\$322.69	101.18%	\$306.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31256	EXPLORATION MAXILLARY SINUS		\$182.20	\$180.26	\$180.26	\$180.26	101.08%	\$171.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31257	NSL/SINS NDSC TOT W/SPHENDT		\$359.65	\$444.63	\$444.63	\$444.63	80.89%	\$359.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31259	NSL/SINS NDSC SPHN TISS RMVL		\$404.96	\$469.82	\$469.82	\$469.82	86.19%	\$404.96	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31267	ENDOSCOPY MAXILLARY SINUS		\$267.94	\$265.41	\$265.41	\$265.41	100.95%	\$252.14	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31276	NSL/SINS NDSC FRNT TISS RMVL		\$381.06	\$377.47	\$377.47	\$377.47	100.95%	\$358.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	31287	NASAL/SINUS ENDOSCOPY SURGERY		\$203.87	\$201.31	\$201.31	\$201.31	101.27%	\$191.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31288	NASAL/SINUS ENDOSCOPY SURGERY		\$236.69	\$234.01	\$234.01	\$234.01	101.15%	\$222.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31290	NASAL/SINUS ENDOSCOPY SURGERY		\$1,112.10	\$1,150.85	\$1,150.85	\$1,150.85	96.63%	\$1,093.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31291	NASAL/SINUS ENDOSCOPY SURGERY		\$1,172.03	\$1,230.62	\$1,230.62	\$1,230.62	95.24%	\$1,169.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31292	NSL/SINS NDSC MED/INF DCMPRN		\$1,014.36	\$998.94	\$998.94	\$998.94	101.54%	\$948.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31295	NSL/SINS NDSC SURGERY MAX SINS		\$1,726.45	\$1,720.72	\$158.12	\$1,650.51	104.60%	\$1,567.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31296	NSL/SINS NDSC SURGERY FRNT SINS		\$662.84	\$1,746.04	\$179.57	\$633.79	104.58%	\$602.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31297	NSL/SINS NDSC SURGERY SPHN SINS		\$1,375.48	\$1,706.26	\$144.36	\$1,314.48	104.64%	\$1,248.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31298	NSL/SINS NDSC SURGERY FRNT&SPHN		\$3,008.03	\$3,236.89	\$255.74	\$2,872.27	104.73%	\$2,728.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31300	REMOVAL OF LARYNX LESION		\$1,037.60	\$1,277.44	\$1,277.44	\$1,277.44	81.23%	\$1,037.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31360	REMOVAL OF LARYNX		\$1,688.80	\$2,083.16	\$2,083.16	\$2,083.16	81.07%	\$1,688.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31368	PARTIAL REMOVAL OF LARYNX		\$1,979.20	\$2,436.10	\$2,436.10	\$2,436.10	81.24%	\$1,979.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31370	PARTIAL REMOVAL OF LARYNX		\$1,684.80	\$2,072.57	\$2,072.57	\$2,072.57	81.29%	\$1,684.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31400	REVISION OF LARYNX		\$843.60	\$1,038.64	\$1,038.64	\$1,038.64	81.22%	\$843.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31420	REMOVAL OF EPIGLOTTIS		\$688.00	\$849.76	\$849.76	\$849.76	80.96%	\$688.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31500	INSERT EMERGENCY AIRWAY		\$112.09	\$138.44	\$138.44	\$138.44	80.97%	\$112.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31502	CHANGE OF WINDPIPE AIRWAY		\$34.74	\$34.80	\$34.80	\$34.80	99.82%	\$33.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31505	DIAGNOSTIC LARYNGOSCOPY		\$57.11	\$93.12	\$50.71	\$69.59	82.07%	\$57.11	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31511	REMOVE FOREIGN BODY LARYNX		\$142.40	\$216.94	\$135.62	\$175.66	81.07%	\$142.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31513	INJECTION INTO VOCAL CORD		\$129.03	\$132.28	\$132.28	\$132.28	97.55%	\$125.66	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31515	LARYNGOSCOPY FOR ASPIRATION		\$113.07	\$219.83	\$111.87	\$137.69	82.12%	\$113.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31520	DX LARYNGOSCOPY NEWBORN		\$126.40	\$157.35	\$157.35	\$157.35	80.33%	\$126.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31525	DX LARYNGOSCOPY EXCL NB		\$137.04	\$257.42	\$161.02	\$169.11	81.04%	\$137.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31526	DX LARYNGOSCOPY W/OPER SCOPE		\$155.00	\$157.68	\$157.68	\$157.68	98.30%	\$149.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31527	LARYNGOSCOPY FOR TREATMENT		\$189.35	\$195.22	\$195.22	\$195.22	96.99%	\$185.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31528	LARYNGOSCOPY AND DILATION		\$141.26	\$144.89	\$144.89	\$144.89	97.49%	\$137.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31529	LARYNGOSCOPY AND DILATION		\$130.00	\$161.65	\$161.65	\$161.65	80.42%	\$130.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31530	LARYNGOSCOPY W/FB REMOVAL		\$195.09	\$198.96	\$198.96	\$198.96	98.06%	\$189.01	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31531	LARYNGOSCOPY W/FB & OP SCOPE		\$209.98	\$211.28	\$211.28	\$211.28	99.39%	\$200.71	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31535	LARYNGOSCOPY W/BIOPSY		\$186.68	\$189.50	\$189.50	\$189.50	98.51%	\$180.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	31536	LARYNGOSCOPY W/BX & OP SCOPE		\$208.44	\$210.27	\$210.27	\$210.27	99.13%	\$199.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31540	LARYNGOSCOPY W/EXC OF TUMOR		\$229.07	\$240.99	\$240.99	\$240.99	95.06%	\$228.94	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31541	LARYNSCOP W/TUMR EXC + SCOPE		\$262.28	\$262.72	\$262.72	\$262.72	99.83%	\$249.58	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31545	REMOVE VC LESION W/SCOPE		\$309.61	\$360.80	\$360.80	\$360.80	85.81%	\$309.61	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31546	REMOVE VC LESION SCOPE/GRAFT		\$471.47	\$546.01	\$546.01	\$546.01	86.35%	\$471.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31552	LARYNGOPLASTY LARYNGEAL STEN		\$1,230.40	\$1,517.62	\$1,517.62	\$1,517.62	81.07%	\$1,230.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31554	LARYNGOPLASTY LARYNGEAL STEN		\$1,393.60	\$1,715.46	\$1,715.46	\$1,715.46	81.24%	\$1,393.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31561	LARYNSCOP REMVE CART + SCOP		\$340.16	\$340.26	\$340.26	\$340.26	99.97%	\$323.24	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31570	LARYNGOSCOPE W/VC INJ		\$262.25	\$352.06	\$229.03	\$259.41	101.10%	\$246.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31571	LARYNGOSCOP W/VC INJ + SCOPE		\$247.38	\$248.69	\$248.69	\$248.69	99.47%	\$236.25	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31572	LARGSC W/LASER DSTRJ LES		\$182.80	\$542.92	\$181.19	\$177.80	102.81%	\$168.91	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31573	LARGSC W/THER INJECTION		\$212.64	\$296.92	\$149.71	\$209.21	101.64%	\$198.75	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31574	LARGSC W/NJX AUGMENTATION		\$469.58	\$975.80	\$150.33	\$451.34	104.04%	\$428.78	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31575	DIAGNOSTIC LARYNGOSCOPY		\$89.92	\$133.54	\$69.75	\$110.26	81.55%	\$89.92	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31579	LARYNGOSCOPY TELESCOPIC		\$167.76	\$203.86	\$120.79	\$164.89	101.74%	\$156.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31584	LARYNGOPLASTY FX RDCTJ FIXJ		\$1,173.60	\$1,442.28	\$1,442.28	\$1,442.28	81.37%	\$1,173.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31591	LARYNGOPLASTY MEDIALIZATION		\$914.88	\$1,128.01	\$1,128.01	\$1,128.01	81.11%	\$914.88	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31592	CRICOTRACHEAL RESECTION		\$1,428.00	\$1,760.66	\$1,760.66	\$1,760.66	81.11%	\$1,428.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31600	INCISION OF WINDPIPE		\$243.84	\$301.47	\$301.47	\$301.47	80.88%	\$243.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31601	INCISION OF WINDPIPE		\$363.08	\$449.18	\$449.18	\$449.18	80.83%	\$363.08	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31603	INCISION OF WINDPIPE		\$255.85	\$315.93	\$315.93	\$315.93	80.98%	\$255.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31605	INCISION OF WINDPIPE		\$263.80	\$324.02	\$324.02	\$324.02	81.42%	\$263.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31610	INCISION OF WINDPIPE		\$794.74	\$978.02	\$978.02	\$978.02	81.26%	\$794.74	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31611	SURGERY/SPEECH PROSTHESIS		\$447.00	\$552.43	\$552.43	\$552.43	80.92%	\$447.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31612	PUNCTURE/CLEAR WINDPIPE		\$39.07	\$95.73	\$47.71	\$47.87	81.62%	\$39.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31613	REPAIR WINDPIPE OPENING		\$353.60	\$435.81	\$435.81	\$435.81	81.14%	\$353.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31614	REPAIR WINDPIPE OPENING		\$593.60	\$730.05	\$730.05	\$730.05	81.31%	\$593.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31615	VISUALIZATION OF WINDPIPE		\$105.69	\$176.93	\$116.64	\$130.32	81.10%	\$105.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31622	DX BRONCHOSCOPE/WASH		\$133.18	\$256.07	\$130.58	\$132.91	100.21%	\$126.26	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31623	DX BRONCHOSCOPE/BRUSH		\$130.74	\$282.10	\$129.98	\$129.34	101.08%	\$122.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	31624	DX BRONCHOSCOPE/LAVAGE		\$133.10	\$262.05	\$131.66	\$131.98	100.85%	\$125.38	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31625	BRONCHOSCOPY W/BIOPSY(S)		\$123.45	\$358.67	\$153.62	\$152.40	81.01%	\$123.45	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31627	NAVIGATIONAL BRONCHOSCOPY		\$120.07	\$1,110.42	\$94.27	\$115.53	103.93%	\$109.76	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31628	BRONCHOSCOPY/LUNG BX EACH		\$140.65	\$381.78	\$172.87	\$173.45	81.09%	\$140.65	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31629	BRONCHOSCOPY/NEEDLE BX EACH		\$184.49	\$465.57	\$183.41	\$181.71	101.53%	\$172.62	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31630	BRONCHOSCOPY DILATE/FX REPR		\$157.29	\$194.83	\$194.83	\$194.83	80.73%	\$157.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31631	BRONCHOSCOPY DILATE W/STENT		\$224.27	\$221.95	\$221.95	\$221.95	101.05%	\$210.85	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31632	BRONCHOSCOPY/LUNG BX ADDL		\$48.81	\$65.43	\$47.90	\$48.47	100.70%	\$46.05	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31633	BRONCHOSCOPY/NEEDLE BX ADDL		\$52.31	\$81.17	\$61.54	\$61.98	84.40%	\$52.31	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31634	BRONCH W/BALLOON OCCLUSION		\$187.16	\$1,527.57	\$184.73	\$177.92	105.19%	\$169.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31635	BRONCHOSCOPY W/FB REMOVAL		\$138.52	\$299.42	\$172.53	\$172.10	80.49%	\$138.52	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31636	BRONCHOSCOPY BRONCH STENTS		\$193.95	\$212.33	\$212.33	\$212.33	91.35%	\$193.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31640	BRONCHOSCOPY W/TUMOR EXCISE		\$196.87	\$242.63	\$242.63	\$242.63	81.14%	\$196.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31641	BRONCHOSCOPY TREAT BLOCKAGE		\$252.17	\$249.28	\$249.28	\$249.28	101.16%	\$236.81	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31645	BRNCHSC W/THER ASPIR 1ST		\$145.58	\$281.28	\$144.93	\$144.91	100.46%	\$137.67	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31646	BRNCHSC W/THER ASPIR SBSQ		\$140.48	\$139.97	\$139.97	\$139.97	100.36%	\$132.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31652	BRONCH EBUS SAMPLNG 1/2 NODE		\$195.46	\$1,290.58	\$216.24	\$211.64	92.35%	\$195.46	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31653	BRONCH EBUS SAMPLNG 3/> NODE		\$215.70	\$1,338.80	\$239.58	\$234.27	92.07%	\$215.70	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31654	BRONCH EBUS IVNTJ PERPH LES		\$56.49	\$123.11	\$65.63	\$65.27	86.55%	\$56.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31720	CLEARANCE OF AIRWAYS		\$38.87	\$47.93	\$47.93	\$47.93	81.09%	\$38.87	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31780	RECONSTRUCT WINDPIPE		\$977.49	\$1,209.78	\$1,209.78	\$1,209.78	80.80%	\$977.49	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31800	REPAIR OF WINDPIPE INJURY		\$658.56	\$724.90	\$724.90	\$724.90	90.85%	\$658.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31820	CLOSURE OF WINDPIPE LESION		\$273.53	\$459.08	\$340.25	\$337.80	80.97%	\$273.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31825	REPAIR OF WINDPIPE DEFECT		\$428.00	\$633.05	\$496.70	\$529.28	80.86%	\$428.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	31830	REVISE WINDPIPE SCAR		\$305.60	\$513.74	\$378.79	\$376.30	81.21%	\$305.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32096	OPEN WEDGE/BX LUNG INFILTR		\$716.19	\$785.78	\$785.78	\$785.78	91.14%	\$716.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32097	OPEN WEDGE/BX LUNG NODULE		\$716.19	\$787.18	\$787.18	\$787.18	90.98%	\$716.19	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32098	OPEN BIOPSY OF LUNG PLEURA		\$673.06	\$745.03	\$745.03	\$745.03	90.34%	\$673.06	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32100	EXPLORATION OF CHEST		\$640.30	\$798.50	\$798.50	\$798.50	80.19%	\$640.30	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32110	EXPLORE/REPAIR CHEST		\$1,165.03	\$1,452.31	\$1,452.31	\$1,452.31	80.22%	\$1,165.03	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	32120	RE-EXPLORATION OF CHEST		\$692.40	\$861.43	\$861.43	\$861.43	80.38%	\$692.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32141	REMOVE/TREAT LUNG LESIONS		\$1,198.00	\$1,484.69	\$1,484.69	\$1,484.69	80.69%	\$1,198.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32150	REMOVAL OF LUNG LESION(S)		\$802.29	\$1,003.52	\$1,003.52	\$1,003.52	79.95%	\$802.29	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32160	OPEN CHEST HEART MASSAGE		\$634.72	\$789.28	\$789.28	\$789.28	80.42%	\$634.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32220	RELEASE OF LUNG		\$1,265.44	\$1,573.48	\$1,573.48	\$1,573.48	80.42%	\$1,265.44	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32225	PARTIAL RELEASE OF LUNG		\$789.80	\$979.24	\$979.24	\$979.24	80.65%	\$789.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32320	FREE/REMOVE CHEST LINING		\$1,270.40	\$1,576.51	\$1,576.51	\$1,576.51	80.58%	\$1,270.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32400	NEEDLE BIOPSY CHEST LINING		\$67.20	\$172.67	\$82.24	\$83.02	80.94%	\$67.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32408	CORE NDL BX LNG/MED PERQ		\$151.63	\$875.43	\$149.16	\$145.04	104.54%	\$137.79	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32440	REMOVE LUNG PNEUMONECTOMY		\$1,235.47	\$1,535.13	\$1,535.13	\$1,535.13	80.48%	\$1,235.47	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32480	PARTIAL REMOVAL OF LUNG		\$1,166.04	\$1,447.32	\$1,447.32	\$1,447.32	80.57%	\$1,166.04	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32484	SEGMENTECTOMY		\$1,177.00	\$1,399.58	\$1,399.58	\$1,399.58	84.10%	\$1,177.00	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32501	REPAIR BRONCHUS ADD-ON		\$236.16	\$234.46	\$234.46	\$234.46	100.73%	\$222.73	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32505	WEDGE RESECT OF LUNG INITIAL		\$826.53	\$915.37	\$915.37	\$915.37	90.29%	\$826.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32506	WEDGE RESECT OF LUNG ADD-ON		\$138.95	\$150.55	\$150.55	\$150.55	92.29%	\$138.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32550	INSERT PLEURAL CATH		\$202.89	\$797.66	\$200.38	\$193.85	104.66%	\$184.16	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32551	INSERTION OF CHEST TUBE		\$123.02	\$152.35	\$152.35	\$152.35	80.75%	\$123.02	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32552	REMOVE LUNG CATHETER		\$126.53	\$184.81	\$156.77	\$156.62	80.79%	\$126.53	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32554	ASPIRATE PLEURA W/O IMAGING		\$88.02	\$241.41	\$87.18	\$86.50	101.76%	\$82.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32555	ASPIRATE PLEURA W/ IMAGING		\$109.73	\$322.68	\$107.11	\$106.49	103.04%	\$101.17	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32556	INSERT CATH PLEURA W/O IMAGE		\$133.13	\$768.12	\$121.76	\$129.82	102.55%	\$123.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32557	INSERT CATH PLEURA W/ IMAGE		\$156.55	\$680.01	\$146.17	\$150.62	103.94%	\$143.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32560	TREAT PLEURODESIS W/AGENT		\$75.03	\$260.88	\$74.40	\$73.07	102.68%	\$69.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32561	LYSE CHEST FIBRIN INIT DAY		\$61.84	\$96.26	\$66.12	\$67.38	91.78%	\$61.84	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32562	LYSE CHEST FIBRIN SUBQ DAY		\$54.98	\$86.12	\$59.13	\$60.07	91.52%	\$54.98	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32601	THORACOSCOPY DIAGNOSTIC		\$300.83	\$300.45	\$300.45	\$300.45	100.13%	\$285.43	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32606	THORACOSCOPY W/BX MED SPACE		\$361.07	\$448.29	\$448.29	\$448.29	80.54%	\$361.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32607	THORACOSCOPY W/BX INFILTRATE		\$278.69	\$299.75	\$299.75	\$299.75	92.97%	\$278.69	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32608	THORACOSCOPY W/BX NODULE		\$336.33	\$367.94	\$367.94	\$367.94	91.41%	\$336.33	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32609	THORACOSCOPY W/BX PLEURA		\$232.50	\$250.33	\$250.33	\$250.33	92.88%	\$232.50	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.

Surgery - Respiratory System	32650	THORACOSCOPY W/PLEURODESIS		\$561.97	\$661.55	\$661.55	\$661.55	84.95%	\$561.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32651	THORACOSCOPY REMOVE CORTEX		\$864.42	\$1,074.22	\$1,074.22	\$1,074.22	80.47%	\$864.42	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32652	THORACOSCOPY REM TOTL CORTEX		\$1,309.09	\$1,624.74	\$1,624.74	\$1,624.74	80.57%	\$1,309.09	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32653	THORACOSCOPY REMOV FB/FIBRIN		\$836.80	\$1,039.41	\$1,039.41	\$1,039.41	80.51%	\$836.80	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32654	THORACOSCOPY CONTRL BLEEDING		\$930.40	\$1,160.84	\$1,160.84	\$1,160.84	80.15%	\$930.40	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32655	THORACOSCOPY RESECT BULLAE		\$834.18	\$940.48	\$940.48	\$940.48	88.70%	\$834.18	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32656	THORACOSCOPY W/PLEURECTOMY		\$797.00	\$792.17	\$792.17	\$792.17	100.61%	\$752.56	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32659	THORACOSCOPY W/SAC DRAINAGE		\$727.26	\$725.83	\$725.83	\$725.83	100.20%	\$689.54	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32662	THORACOSCOPY W/MEDIAST EXC		\$894.46	\$879.71	\$879.71	\$879.71	101.68%	\$835.72	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32663	THORACOSCOPY W/LOBECTOMY		\$1,099.97	\$1,364.86	\$1,364.86	\$1,364.86	80.59%	\$1,099.97	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32664	THORACOSCOPY W/ TH NRV EXC		\$804.77	\$834.31	\$834.31	\$834.31	96.46%	\$792.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32666	THORACOSCOPY W/WEDGE RESECT		\$773.10	\$856.53	\$856.53	\$856.53	90.26%	\$773.10	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32667	THORACOSCOPY W/W RESECT ADDL		\$138.95	\$150.83	\$150.83	\$150.83	92.13%	\$138.95	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32669	THORACOSCOPY REMOVE SEGMENT		\$1,189.59	\$1,311.00	\$1,311.00	\$1,311.00	90.74%	\$1,189.59	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32670	THORACOSCOPY BILOBECTOMY		\$1,419.41	\$1,560.01	\$1,560.01	\$1,560.01	90.99%	\$1,419.41	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32672	THORACOSCOPY FOR LVRS		\$1,347.63	\$1,479.85	\$1,479.85	\$1,479.85	91.07%	\$1,347.63	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32673	THORACOSCOPY W/THYMUS RESECT		\$1,063.99	\$1,189.06	\$1,189.06	\$1,189.06	89.48%	\$1,063.99	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32674	THORACOSCOPY LYMPH NODE EXC		\$190.51	\$207.26	\$207.26	\$207.26	91.92%	\$190.51	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32853	LUNG TRANSPLANT DOUBLE		\$3,573.60	\$4,437.57	\$4,437.57	\$4,437.57	80.53%	\$3,573.60	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32854	LUNG TRANSPLANT WITH BYPASS		\$3,785.07	\$4,696.73	\$4,696.73	\$4,696.73	80.59%	\$3,785.07	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32905	REVISE & REPAIR CHEST WALL		\$1,051.20	\$1,305.70	\$1,305.70	\$1,305.70	80.51%	\$1,051.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Surgery - Respiratory System	32997	TOTAL LUNG LAVAGE		\$268.20	\$331.07	\$331.07	\$331.07	81.01%	\$268.20	The Medicare benchmark rate is the mix of Medicare facility and non-facility rates depending on the place of service.
Vision	70030	X-ray eye for foreign body	26	\$8.71	\$8.42	\$8.42	\$8.42	103.47%	\$8.00	The Medicare benchmark rate is the Medicare non-facility rate
Vision	70030	X-ray eye for foreign body	TC	\$20.83	\$25.51	\$25.51	\$25.51	81.65%	\$20.83	The Medicare benchmark rate is the Medicare non-facility rate
Vision	70030	X-ray eye for foreign body		\$28.09	\$33.93	\$33.93	\$33.93	82.79%	\$28.09	The Medicare benchmark rate is the Medicare non-facility rate
Vision	92081	Limited visual field xm	TC	\$15.03	\$18.50	\$18.50	\$18.50	81.23%	\$15.03	The Medicare benchmark rate is the Medicare non-facility rate
Vision	92082	Intermediate visual field xm	TC	\$24.59	\$27.97	\$27.97	\$27.97	87.93%	\$24.59	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2101	Single visn sphere 4.12-7.00		\$51.31	\$64.51	\$64.51	\$64.51	79.54%	\$51.31	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2102	Singl visn sphere 7.12-20.00		\$72.17	\$90.74	\$90.74	\$90.74	79.53%	\$72.17	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2106	Sphero cylinder 4.00d/>6.00d		\$45.06	\$53.34	\$53.34	\$53.34	84.48%	\$45.06	The Medicare benchmark rate is the Medicare non-facility rate

Vision	V2107	Spherocylinder 4.25d/12-2d		\$43.51	\$54.72	\$54.72	\$54.72	79.51%	\$43.51	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2108	Spherocylinder 4.25d/2.12-4d		\$52.95	\$66.58	\$66.58	\$66.58	79.53%	\$52.95	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2110	Spherocylinder 4.25d/over 6d		\$51.64	\$57.34	\$57.34	\$57.34	90.06%	\$51.64	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2111	Spherocylindr 7.25d/.25-2.25		\$47.54	\$59.78	\$59.78	\$59.78	79.52%	\$47.54	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2112	Spherocylindr 7.25d/2.25-4d		\$51.91	\$65.26	\$65.26	\$65.26	79.54%	\$51.91	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2113	Spherocylindr 7.25d/4.25-6d		\$59.29	\$74.55	\$74.55	\$74.55	79.53%	\$59.29	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2114	Spherocylinder over 12.00d		\$77.80	\$97.82	\$97.82	\$97.82	79.53%	\$77.80	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2115	Lens lenticular bifocal		\$80.14	\$103.36	\$103.36	\$103.36	77.53%	\$80.14	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2118	Lens aniseikonic single		\$69.31	\$85.95	\$85.95	\$85.95	80.64%	\$69.31	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2121	Lenticular lens, single		\$71.28	\$91.70	\$91.70	\$91.70	77.73%	\$71.28	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2200	Lens spher bifoc plano 4.00d		\$51.21	\$64.39	\$64.39	\$64.39	79.53%	\$51.21	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2201	Lens sphere bifocal 4.12-7.0		\$60.08	\$75.53	\$75.53	\$75.53	79.54%	\$60.08	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2202	Lens sphere bifocal 7.12-20.		\$79.44	\$99.88	\$99.88	\$99.88	79.54%	\$79.44	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2203	Lens sphcyl bifocal 4.00d/.1		\$51.12	\$64.28	\$64.28	\$64.28	79.53%	\$51.12	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2204	Lens sphcy bifocal 4.00d/2.1		\$53.13	\$66.80	\$66.80	\$66.80	79.54%	\$53.13	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2205	Lens sphcy bifocal 4.00d/4.2		\$61.91	\$77.84	\$77.84	\$77.84	79.53%	\$61.91	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2206	Lens sphcy bifocal 4.00d/ove		\$58.55	\$73.62	\$73.62	\$73.62	79.53%	\$58.55	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2207	Lens sphcy bifocal 4.25-7d/.		\$59.67	\$75.02	\$75.02	\$75.02	79.54%	\$59.67	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2208	Lens sphcy bifocal 4.25-7/2.		\$64.19	\$80.71	\$80.71	\$80.71	79.53%	\$64.19	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2209	Lens sphcy bifocal 4.25-7/4.		\$65.04	\$81.77	\$81.77	\$81.77	79.54%	\$65.04	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2210	Lens sphcy bifocal 4.25-7/ov		\$69.34	\$87.19	\$87.19	\$87.19	79.53%	\$69.34	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2211	Lens sphcy bifo 7.25-12/.25-		\$91.79	\$115.42	\$115.42	\$115.42	79.53%	\$91.79	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2212	Lens sphcyl bifo 7.25-12/2.2		\$94.79	\$119.18	\$119.18	\$119.18	79.54%	\$94.79	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2213	Lens sphcyl bifo 7.25-12/4.2		\$95.75	\$120.39	\$120.39	\$120.39	79.53%	\$95.75	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2214	Lens sphcyl bifocal over 12.		\$91.00	\$114.43	\$114.43	\$114.43	79.52%	\$91.00	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2215	Lens lenticular bifocal		\$82.21	\$101.92	\$101.92	\$101.92	80.66%	\$82.21	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2218	Lens aniseikonic bifocal		\$95.61	\$118.56	\$118.56	\$118.56	80.64%	\$95.61	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2219	Lens bifocal seg width over		\$56.11	\$69.58	\$69.58	\$69.58	80.64%	\$56.11	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2220	Lens bifocal add over 3.25d		\$35.29	\$43.77	\$43.77	\$43.77	80.63%	\$35.29	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2221	Lenticular lens, bifocal		\$87.06	\$106.79	\$106.79	\$106.79	81.52%	\$87.06	The Medicare benchmark rate is the Medicare non-facility rate

Vision	V2300	Lens sphere trifocal 4.00d		\$67.38	\$84.72	\$84.72	\$84.72	79.53%	\$67.38	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2301	Lens sphere trifocal 4.12-7.		\$71.72	\$90.17	\$90.17	\$90.17	79.54%	\$71.72	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2303	Lens sphcy trifocal 4.0/.12-		\$64.15	\$80.65	\$80.65	\$80.65	79.54%	\$64.15	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2304	Lens sphcy trifocal 4.0/2.25		\$68.78	\$86.48	\$86.48	\$86.48	79.53%	\$68.78	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2305	Lens sphcy trifocal 4.0/4.25		\$76.85	\$96.63	\$96.63	\$96.63	79.53%	\$76.85	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2307	Lens sphcy trifocal 4.25-7/.		\$73.25	\$92.09	\$92.09	\$92.09	79.54%	\$73.25	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2308	Lens sphc trifocal 4.25-7/2.		\$76.27	\$95.89	\$95.89	\$95.89	79.54%	\$76.27	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2311	Lens sphc trifo 7.25-12/.25-		\$83.05	\$104.43	\$104.43	\$104.43	79.53%	\$83.05	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2312	Lens sphc trifo 7.25-12/2.25		\$83.54	\$105.03	\$105.03	\$105.03	79.54%	\$83.54	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2430	Lens variable asphericity bi		\$114.62	\$144.11	\$144.11	\$144.11	79.54%	\$114.62	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2500	Contact lens pmma spherical		\$80.15	\$100.77	\$100.77	\$100.77	79.54%	\$80.15	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2501	Cntct lens pmma-toric/prism		\$141.04	\$177.33	\$177.33	\$177.33	79.54%	\$141.04	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2510	Cntct gas permeable sphericl		\$115.47	\$145.19	\$145.19	\$145.19	79.53%	\$115.47	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2511	Cntct toric prism ballast		\$150.68	\$186.86	\$186.86	\$186.86	80.64%	\$150.68	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2513	Contact lens extended wear		\$147.43	\$185.37	\$185.37	\$185.37	79.53%	\$147.43	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2520	Contact lens hydrophilic		\$97.22	\$122.23	\$122.23	\$122.23	79.54%	\$97.22	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2521	Cntct lens hydrophilic toric		\$188.25	\$236.70	\$236.70	\$236.70	79.53%	\$188.25	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2522	Cntct lens hydrophil bifocl		\$164.73	\$207.11	\$207.11	\$207.11	79.54%	\$164.73	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2523	Cntct lens hydrophil extend		\$142.36	\$176.50	\$176.50	\$176.50	80.66%	\$142.36	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2530	Contact lens gas impermeable		\$229.45	\$284.50	\$284.50	\$284.50	80.65%	\$229.45	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2531	Contact lens gas permeable		\$511.63	\$643.30	\$643.30	\$643.30	79.53%	\$511.63	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2700	Balance lens		\$48.15	\$60.54	\$60.54	\$60.54	79.53%	\$48.15	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2710	Glass/plastic slab off prism		\$72.07	\$90.62	\$90.62	\$90.62	79.53%	\$72.07	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2715	Prism lens/es		\$10.83	\$13.63	\$13.63	\$13.63	79.46%	\$10.83	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2718	Fresnell prism press-on lens		\$26.62	\$33.47	\$33.47	\$33.47	79.53%	\$26.62	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2745	Tint, any color/solid/grad		\$9.79	\$12.31	\$12.31	\$12.31	79.53%	\$9.79	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2755	Uv lens/es		\$16.89	\$20.58	\$20.58	\$20.58	82.07%	\$16.89	The Medicare benchmark rate is the Medicare non-facility rate
Vision	V2780	Oversize lens/es		\$11.85	\$14.69	\$14.69	\$14.69	80.67%	\$11.85	The Medicare benchmark rate is the Medicare non-facility rate

Service Category	Procedure Code	Procedure Code Description	Modifier 1	July 2024 CO Medicaid Rate	2024 Medicare Non-Rural Rate	2024 Medicare Rural Rate	Medicare Benchmark Rate	Benchmark Ratio	Proposed Rate	Note
NEMT	A0430	Air Fixed Wing- Conventional air services		\$ 3,461.93	\$ 3,795.15	\$ 5,692.72	\$ 4,743.94	72.98%	\$ 3,461.93	The Medicare benchmark rate is the average of the Medicare non-rural rate and rural rate.
NEMT	A0431	Air Rotary Wing- Conventional air services		\$ 3,126.85	\$ 4,412.43	\$ 6,618.65	\$ 5,515.54	56.69%	\$ 3,126.85	The Medicare benchmark rate is the average of the Medicare non-rural rate and rural rate.
NEMT	A0433	Advanced Life Support (ALS), Level 2 Base Rate		\$ 559.54	\$ 792.55	\$ 800.32	\$ 796.44	70.26%	\$ 559.54	The Medicare benchmark rate is the average of the Medicare non-rural rate and rural rate.
NEMT	A0434	Specialty Care Transport Base Rate		\$ 668.93	\$ 936.65	\$ 945.83	\$ 941.24	71.07%	\$ 668.93	The Medicare benchmark rate is the average of the Medicare non-rural rate and rural rate.
EMT	A0425	Mileage - In-State		\$ 6.41	\$ 8.94	\$ 9.02	\$ 8.95	71.57%	\$ 6.41	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0427	Advanced Life Support (ALS), Level 1 Base Rate		\$ 386.59	\$ 547.58	\$ 552.95	\$ 547.94	70.55%	\$ 386.59	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0429	Basic Life Support (BLS) Base Rate		\$ 325.55	\$ 461.12	\$ 465.64	\$ 461.40	70.55%	\$ 325.55	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0430	Air Fixed Wing		\$ 3,461.93	\$ 3,795.15	\$ 5,692.72	\$ 5,344.88	64.77%	\$ 3,461.93	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0431	Air Rotary Wing		\$ 3,126.85	\$ 4,412.43	\$ 6,618.65	\$ 5,352.12	58.42%	\$ 3,126.85	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0433	Advanced Life Support (ALS), Level 2 Base Rate		\$ 559.54	\$ 792.55	\$ 800.32	\$ 793.03	70.55%	\$ 559.54	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0434	Specialty Care Base Rate		\$ 668.93	\$ 936.65	\$ 945.83	\$ 938.68	71.25%	\$ 668.93	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0435	Air Transport Mileage- Plane Transport		\$ 8.28	\$ 10.50	\$ 15.75	\$ 14.69	56.37%	\$ 8.28	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.
EMT	A0436	Air Transport Mileage- Helicopter Transport		\$ 20.02	\$ 27.99	\$ 41.99	\$ 36.81	54.40%	\$ 20.02	The Medicare benchmark rate is a mix of rural and non-rural Medicare rates, depending on the member county.

Service Category	Groupers	July 2024 CO Medicaid Rate	Medicare Benchmark Rate (Estimated)	Benchmark Ratio	Proposed Rate	Note
Ambulatory Surgical Center	1	\$ 405.53	\$ 506.91	80%	\$ 405.53	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	2	\$ 464.48	\$ 580.60	80%	\$ 464.48	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	3	\$ 1,349.51	\$ 1,686.89	80%	\$ 1,349.51	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	4	\$ 1,231.50	\$ 1,539.38	80%	\$ 1,231.50	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	5	\$ 1,338.88	\$ 1,673.60	80%	\$ 1,338.88	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	6	\$ 1,689.73	\$ 2,112.16	80%	\$ 1,689.73	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	7	\$ 1,661.26	\$ 2,076.58	80%	\$ 1,661.26	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	8	\$ 848.38	\$ 1,060.48	80%	\$ 848.38	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	9	\$ 1,222.70	\$ 1,528.38	80%	\$ 1,222.70	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	10	\$ 1,939.69	\$ 2,424.61	80%	\$ 1,939.69	The benchmark ratio of 80% was taken from the 2023 JBC decision
Ambulatory Surgical Center	11	\$ 3,755.05	\$ 4,693.82	80%	\$ 3,755.05	The proxy benchmark ratio of 80% was taken from the 2023 JBC decision

Service Category	Procedure Code	Procedure Code Description	Modifier 1	Rate Type	Rate Type Description	July 2024 CO Medicaid Rate	2024 Medicare Non-Rural Rate	2024 Medicare Rural Rate	Medicare Benchmark Rate	Benchmark Ratio	Proposed Rate	Note
DME	A7007	Lg vol nebulizer disposable	NU	DRN	DME Non-Rural	\$ 3.44	\$ 3.92	\$ 5.09	\$ 3.92	87.76%	\$ 3.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	A7007	Lg vol nebulizer disposable	NU	DRR	DME Rural	\$ 4.49	\$ 3.92	\$ 5.09	\$ 5.09	88.21%	\$ 4.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0100	Cane adjust/fixd with tip	NU	DRN	DME Non-Rural	\$ 25.47	\$ 28.76	\$ -	\$ 28.76	88.56%	\$ 25.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0105	Cane adjust/fixd quad/3 pro	NU	DRN	DME Non-Rural	\$ 57.45	\$ 64.87	\$ -	\$ 64.87	88.56%	\$ 57.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0110	Crutch forearm pair	NU	DRN	DME Non-Rural	\$ 79.69	\$ 89.99	\$ -	\$ 89.99	88.55%	\$ 79.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0111	Crutch forearm each	NU	DRN	DME Non-Rural	\$ 62.20	\$ 70.24	\$ -	\$ 70.24	88.55%	\$ 62.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0114	Crutch underarm pair no wood	NU	DRN	DME Non-Rural	\$ 57.02	\$ 64.39	\$ -	\$ 64.39	88.55%	\$ 57.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0114	Crutch underarm pair no wood	UE	DRN	DME Non-Rural	\$ 43.11	\$ 48.68	\$ -	\$ 48.68	88.56%	\$ 43.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0114	Crutch underarm pair no wood	RR	DRN	DME Non-Rural	\$ 10.35	\$ 11.69	\$ -	\$ 11.69	88.54%	\$ 10.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0116	Crutch underarm each no wood	NU	DRN	DME Non-Rural	\$ 28.50	\$ 32.18	\$ -	\$ 32.18	88.56%	\$ 28.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0130	Walker rigid adjust/fixd ht	NU	DRR	DME Rural	\$ 62.36	\$ 54.35	\$ 70.65	\$ 70.65	88.27%	\$ 62.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0130	Walker rigid adjust/fixd ht	NU	DRN	DME Non-Rural	\$ 47.76	\$ 54.35	\$ 70.65	\$ 54.35	87.87%	\$ 47.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0135	Walker folding adjust/fixd	NU	DRN	DME Non-Rural	\$ 47.76	\$ 54.35	\$ 74.60	\$ 54.35	87.87%	\$ 47.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0135	Walker folding adjust/fixd	NU	DRR	DME Rural	\$ 65.86	\$ 54.35	\$ 74.60	\$ 74.60	88.28%	\$ 65.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0141	Rigid wheeled walker adj/fix	NU	DRN	DME Non-Rural	\$ 55.83	\$ 54.35	\$ 98.43	\$ 54.35	102.72%	\$ 51.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0141	Rigid wheeled walker adj/fix	NU	DRR	DME Rural	\$ 86.96	\$ 54.35	\$ 98.43	\$ 98.43	88.35%	\$ 86.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0143	Walker folding wheeled w/o s	NU	DRN	DME Non-Rural	\$ 56.92	\$ 54.35	\$ 101.33	\$ 54.35	104.73%	\$ 51.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0143	Walker folding wheeled w/o s	NU	DRR	DME Rural	\$ 89.52	\$ 54.35	\$ 101.33	\$ 101.33	88.35%	\$ 89.52	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0143	Walker folding wheeled w/o s	RR	DRN	DME Non-Rural	\$ 7.81	\$ 5.44	\$ 15.76	\$ 5.44	143.57%	\$ 5.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0143	Walker folding wheeled w/o s	RR	DRR	DME Rural	\$ 13.93	\$ 5.44	\$ 15.76	\$ 15.76	88.39%	\$ 13.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0147	Walker variable wheel resist	NU	DRN	DME Non-Rural	\$ 423.22	\$ 481.72	\$ 601.32	\$ 481.72	87.86%	\$ 423.22	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0147	Walker variable wheel resist	NU	DRR	DME Rural	\$ 530.71	\$ 481.72	\$ 601.32	\$ 601.32	88.26%	\$ 530.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0148	Heavyduty walker no wheels	NU	DRN	DME Non-Rural	\$ 85.40	\$ 97.21	\$ 128.09	\$ 97.21	87.85%	\$ 85.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0148	Heavyduty walker no wheels	RR	DRN	DME Non-Rural	\$ 8.57	\$ 9.72	\$ 12.82	\$ 9.72	88.17%	\$ 8.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0149	Heavy duty wheeled walker	RR	DRN	DME Non-Rural	\$ 12.44	\$ 13.45	\$ 20.69	\$ 13.45	92.49%	\$ 12.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0153	Forearm crutch platform atta	NU	DRN	DME Non-Rural	\$ 64.27	\$ 81.61	\$ -	\$ 81.61	78.75%	\$ 64.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0154	Walker platform attachment	NU	DRN	DME Non-Rural	\$ 59.11	\$ 56.35	\$ 71.37	\$ 56.35	104.90%	\$ 53.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0154	Walker platform attachment	NU	DRR	DME Rural	\$ 62.65	\$ 56.35	\$ 71.37	\$ 71.37	87.78%	\$ 62.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0155	Walker wheel attachment,pair	NU	DRN	DME Non-Rural	\$ 27.14	\$ 25.57	\$ 31.73	\$ 25.57	106.14%	\$ 24.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0155	Walker wheel attachment,pair	NU	DRR	DME Rural	\$ 28.01	\$ 25.57	\$ 31.73	\$ 31.73	88.28%	\$ 28.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0156	Walker seat attachment	NU	DRN	DME Non-Rural	\$ 19.62	\$ 18.27	\$ 23.36	\$ 18.27	107.39%	\$ 17.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0156	Walker seat attachment	NU	DRR	DME Rural	\$ 20.62	\$ 18.27	\$ 23.36	\$ 23.36	88.27%	\$ 20.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0158	Walker leg extenders set of4	NU	DRN	DME Non-Rural	\$ 25.53	\$ 26.10	\$ 31.12	\$ 26.10	97.82%	\$ 24.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0159	Brake for wheeled walker	NU	DRN	DME Non-Rural	\$ 15.89	\$ 17.06	\$ 19.97	\$ 17.06	93.14%	\$ 15.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0163	Commode chair with fixed arm	NU	DRN	DME Non-Rural	\$ 62.82	\$ 63.83	\$ 106.36	\$ 63.83	98.42%	\$ 60.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0163	Commode chair with fixed arm	NU	DRR	DME Rural	\$ 93.96	\$ 63.83	\$ 106.36	\$ 106.36	88.34%	\$ 93.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0163	Commode chair with fixed arm	RR	DRR	DME Rural	\$ 17.75	\$ 6.38	\$ 20.06	\$ 20.06	88.48%	\$ 17.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0163	Commode chair with fixed arm	RR	DRN	DME Non-Rural	\$ 9.82	\$ 6.38	\$ 20.06	\$ 6.38	153.92%	\$ 6.06	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0168	Heavyduty/wide commode chair	NU	DRN	DME Non-Rural	\$ 128.28	\$ 146.01	\$ 178.53	\$ 146.01	87.86%	\$ 128.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0168	Heavyduty/wide commode chair	NU	DRR	DME Rural	\$ 157.59	\$ 146.01	\$ 178.53	\$ 178.53	88.27%	\$ 157.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0175	Commode chair foot rest	NU	DRN	DME Non-Rural	\$ 71.44	\$ 90.37	\$ -	\$ 90.37	79.05%	\$ 71.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0181	Press pad alternating w/ pum	RR	DRN	DME Non-Rural	\$ 17.30	\$ 19.62	\$ 27.82	\$ 19.62	88.18%	\$ 17.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0184	Dry pressure mattress	NU	DRN	DME Non-Rural	\$ 175.48	\$ 199.74	\$ 216.79	\$ 199.74	87.85%	\$ 175.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0184	Dry pressure mattress	NU	DRR	DME Rural	\$ 191.27	\$ 199.74	\$ 216.79	\$ 216.79	88.23%	\$ 191.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0184	Dry pressure mattress	RR	DRN	DME Non-Rural	\$ 17.54	\$ 19.97	\$ 24.64	\$ 19.97	87.83%	\$ 17.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0185	Gel pressure mattress pad	NU	DRN	DME Non-Rural	\$ 186.99	\$ 187.96	\$ 327.64	\$ 187.96	99.48%	\$ 178.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0188	Synthetic sheepskin pad	NU	DRN	DME Non-Rural	\$ 24.70	\$ 28.13	\$ 30.66	\$ 28.13	87.81%	\$ 24.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0188	Synthetic sheepskin pad	NU	DRR	DME Rural	\$ 27.15	\$ 28.13	\$ 30.66	\$ 30.66	88.55%	\$ 27.15	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0189	Lambswool sheepskin pad	NU	DRN	DME Non-Rural	\$ 51.39	\$ 58.49	\$ 60.27	\$ 58.49	87.86%	\$ 51.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0189	Lambswool sheepskin pad	NU	DRR	DME Rural	\$ 53.37	\$ 58.49	\$ 60.27	\$ 60.27	88.55%	\$ 53.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0191	Protector heel or elbow	NU	DRN	DME Non-Rural	\$ 11.00	\$ 13.63	\$ -	\$ 13.63	80.70%	\$ 11.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0217	Water circ heat pad w pump	NU	DRN	DME Non-Rural	\$ 557.24	\$ 677.40	\$ -	\$ 677.40	82.26%	\$ 557.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0250	Hosp bed fixed ht w/ mattres	RR	DRN	DME Non-Rural	\$ 63.76	\$ 72.57	\$ 95.80	\$ 72.57	87.86%	\$ 63.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0255	Hospital bed var ht w/ matt	RR	DRN	DME Non-Rural	\$ 66.49	\$ 72.57	\$ 108.63	\$ 72.57	91.62%	\$ 66.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0260	Hosp bed semi-electr w/ matt	RR	DRN	DME Non-Rural	\$ 71.57	\$ 72.57	\$ 122.18	\$ 72.57	98.62%	\$ 68.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0260	Hosp bed semi-electr w/ matt	RR	DRR	DME Rural	\$ 107.92	\$ 72.57	\$ 122.18	\$ 122.18	88.33%	\$ 107.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0261	Hosp bed semi-electr w/o mat	RR	DRR	DME Rural	\$ 106.05	\$ 72.57	\$ 120.07	\$ 120.07	88.32%	\$ 106.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0261	Hosp bed semi-electr w/o mat	RR	DRN	DME Non-Rural	\$ 70.80	\$ 72.57	\$ 120.07	\$ 72.57	97.56%	\$ 68.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0265	Hosp bed total electr w/ mat	RR	DRN	DME Non-Rural	\$ 152.82	\$ 173.95	\$ 204.51	\$ 173.95	87.85%	\$ 152.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0266	Hosp bed total elec w/o matt	RR	DRN	DME Non-Rural	\$ 133.46	\$ 151.36	\$ 173.00	\$ 151.36	88.17%	\$ 133.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0271	Mattress innerspring	NU	DRN	DME Non-Rural	\$ 138.28	\$ 159.70	\$ 210.41	\$ 159.70	86.59%	\$ 138.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0271	Mattress innerspring	NU	DRR	DME Rural	\$ 157.54	\$ 159.70	\$ 210.41	\$ 210.41	74.87%	\$ 157.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0272	Mattress foam rubber	NU	DRN	DME Non-Rural	\$ 135.19	\$ 164.10	\$ 206.36	\$ 164.10	82.38%	\$ 135.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0272	Mattress foam rubber	NU	DRR	DME Rural	\$ 154.44	\$ 164.10	\$ 206.36	\$ 206.36	74.84%	\$ 154.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0277	Powered pres-redu air mattrrs	RR	DRN	DME Non-Rural	\$ 287.38	\$ 236.31	\$ 537.97	\$ 236.31	121.61%	\$ 224.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0295	Hosp bed semi-elect w/o matt	RR	DRN	DME Non-Rural	\$ 63.99	\$ 72.57	\$ 114.42	\$ 72.57	88.18%	\$ 63.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0297	Hosp bed total elect w/o mat	RR	DRN	DME Non-Rural	\$ 130.82	\$ 119.77	\$ 142.60	\$ 119.77	109.23%	\$ 113.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0310	Rails bed side full length	NU	DRN	DME Non-Rural	\$ 110.94	\$ 133.31	\$ 169.26	\$ 133.31	83.22%	\$ 110.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0310	Rails bed side full length	NU	DRR	DME Rural	\$ 126.69	\$ 133.31	\$ 169.26	\$ 169.26	74.85%	\$ 126.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0424	Stationary compressed gas O2	RR	DRN	DME Non-Rural	\$ 97.54	\$ 95.60	\$ 168.96	\$ 95.60	102.03%	\$ 90.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0424	Stationary compressed gas O2	RR	DRR	DME Rural	\$ 142.60	\$ 95.60	\$ 168.96	\$ 168.96	84.40%	\$ 142.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0431	Portable gaseous O2	RR	DRN	DME Non-Rural	\$ 19.11	\$ 21.68	\$ 30.15	\$ 21.68	88.15%	\$ 19.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0431	Portable gaseous O2	RR	DRR	DME Rural	\$ 25.42	\$ 21.68	\$ 30.15	\$ 30.15	84.31%	\$ 25.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0434	Portable liquid O2	RR	DRN	DME Non-Rural	\$ 40.08	\$ 47.93	\$ 51.18	\$ 47.93	83.62%	\$ 40.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0434	Portable liquid O2	RR	DRR	DME Rural	\$ 46.78	\$ 47.93	\$ 51.18	\$ 51.18	91.40%	\$ 46.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0439	Stationary liquid O2	RR	DRN	DME Non-Rural	\$ 97.54	\$ 95.60	\$ 168.96	\$ 95.60	102.03%	\$ 90.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0439	Stationary liquid O2	RR	DRR	DME Rural	\$ 142.60	\$ 95.60	\$ 168.96	\$ 168.96	84.40%	\$ 142.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0441	Stationary o2 contents, gas		DRN	DME Non-Rural	\$ 57.95	\$ 66.45	\$ 73.81	\$ 66.45	87.21%	\$ 57.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0441	Stationary o2 contents, gas		DRR	DME Rural	\$ 71.16	\$ 66.45	\$ 73.81	\$ 73.81	96.41%	\$ 70.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0442	Stationary o2 contents, liq		DRN	DME Non-Rural	\$ 57.95	\$ 66.45	\$ 73.81	\$ 66.45	87.21%	\$ 57.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0442	Stationary o2 contents, liq		DRR	DME Rural	\$ 71.16	\$ 66.45	\$ 73.81	\$ 73.81	96.41%	\$ 70.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0465	Home vent invasive interface	RR	DRN	DME Non-Rural	\$ 980.29	\$ 1,107.04	\$ -	\$ 1,107.04	88.55%	\$ 980.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0466	Home vent non-invasive inter	RR	DRN	DME Non-Rural	\$ 980.29	\$ 1,107.04	\$ -	\$ 1,107.04	88.55%	\$ 980.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0470	Rad w/o backup non-inv intfc	RR	DRN	DME Non-Rural	\$ 129.09	\$ 129.21	\$ 221.32	\$ 129.21	99.91%	\$ 122.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0470	Rad w/o backup non-inv intfc	RR	DRR	DME Rural	\$ 195.52	\$ 129.21	\$ 221.32	\$ 221.32	88.34%	\$ 195.52	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0471	Rad w/backup non inv intrfc	RR	DRN	DME Non-Rural	\$ 308.02	\$ 328.41	\$ 505.20	\$ 328.41	93.79%	\$ 308.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0471	Rad w/backup non inv intrfc	RR	DRR	DME Rural	\$ 446.20	\$ 328.41	\$ 505.20	\$ 505.20	88.32%	\$ 446.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0480	Percussor elect/pneum home m	RR	DRN	DME Non-Rural	\$ 37.64	\$ 54.59	\$ -	\$ 54.59	68.95%	\$ 37.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0482	Cough stimulating device	RR	DRN	DME Non-Rural	\$ 519.58	\$ 586.76	\$ -	\$ 586.76	88.55%	\$ 519.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0483	Hi freq chest wall oscil sys	RR	DRN	DME Non-Rural	\$ 1,219.73	\$ 1,450.60	\$ -	\$ 1,450.60	84.08%	\$ 1,219.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0500	Ippb all types	RR	DRN	DME Non-Rural	\$ 113.86	\$ 127.30	\$ -	\$ 127.30	89.44%	\$ 113.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0550	Humidif extens suppl w ippb	RR	DRN	DME Non-Rural	\$ 51.37	\$ 68.41	\$ -	\$ 68.41	75.09%	\$ 51.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0562	Humidifier heated used w pap	NU	DRN	DME Non-Rural	\$ 242.61	\$ 161.68	\$ 267.21	\$ 161.68	150.06%	\$ 153.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0562	Humidifier heated used w pap	NU	DRR	DME Rural	\$ 242.61	\$ 161.68	\$ 267.21	\$ 267.21	90.79%	\$ 242.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0570	Nebulizer with compression	RR	DRN	DME Non-Rural	\$ 7.91	\$ 6.77	\$ 14.73	\$ 6.77	116.84%	\$ 6.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0570	Nebulizer with compression	RR	DRR	DME Rural	\$ 13.02	\$ 6.77	\$ 14.73	\$ 14.73	88.39%	\$ 13.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0600	Suction pump portab hom modl	RR	DRN	DME Non-Rural	\$ 55.32	\$ 62.47	\$ -	\$ 62.47	88.55%	\$ 55.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0601	Cont airway pressure device	RR	DRN	DME Non-Rural	\$ 48.61	\$ 48.12	\$ 84.42	\$ 48.12	101.02%	\$ 45.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0601	Cont airway pressure device	RR	DRR	DME Rural	\$ 74.58	\$ 48.12	\$ 84.42	\$ 84.42	88.34%	\$ 74.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0607	Blood glucose monitor home	NU	DRN	DME Non-Rural	\$ 80.73	\$ 91.17	\$ -	\$ 91.17	88.55%	\$ 80.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0630	Patient lift hydraulic	RR	DRN	DME Non-Rural	\$ 64.51	\$ 68.72	\$ 107.47	\$ 68.72	93.87%	\$ 64.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0630	Patient lift hydraulic	RR	DRR	DME Rural	\$ 94.91	\$ 68.72	\$ 107.47	\$ 107.47	88.31%	\$ 94.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0635	Patient lift electric	RR	DRN	DME Non-Rural	\$ 123.51	\$ 140.75	\$ 141.91	\$ 140.75	87.75%	\$ 123.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0650	Pneuma compresor non-segment	RR	DRN	DME Non-Rural	\$ 92.20	\$ 103.08	\$ -	\$ 103.08	89.45%	\$ 92.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0651	Pneum compressor segmental	NU	DRN	DME Non-Rural	\$ 1,109.64	\$ 1,253.12	\$ -	\$ 1,253.12	88.55%	\$ 1,109.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0652	Pneum compres w/cal pressure	NU	DRN	DME Non-Rural	\$ 5,831.69	\$ 6,585.77	\$ -	\$ 6,585.77	88.55%	\$ 5,831.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0652	Pneum compres w/cal pressure	UE	DRN	DME Non-Rural	\$ 4,418.31	\$ 4,939.31	\$ -	\$ 4,939.31	89.45%	\$ 4,418.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0667	Seg pneumatic appl full leg	NU	DRN	DME Non-Rural	\$ 281.96	\$ 375.50	\$ -	\$ 375.50	75.09%	\$ 281.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0668	Seg pneumatic appl full arm	NU	DRN	DME Non-Rural	\$ 384.83	\$ 512.48	\$ -	\$ 512.48	75.09%	\$ 384.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0669	Seg pneumatic appli half leg	NU	DRN	DME Non-Rural	\$ 200.98	\$ 250.13	\$ -	\$ 250.13	80.35%	\$ 200.98	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0673	Pressure pneum appl half leg	NU	DRN	DME Non-Rural	\$ 294.03	\$ 365.89	\$ -	\$ 365.89	80.36%	\$ 294.03	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0675	Pneumatic compression device	RR	DRN	DME Non-Rural	\$ 408.74	\$ 524.69	\$ -	\$ 524.69	77.90%	\$ 408.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0720	Tens two lead	NU	DRN	DME Non-Rural	\$ 128.74	\$ 63.23	\$ 291.96	\$ 63.23	203.61%	\$ 60.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0730	Tens four lead	NU	DRN	DME Non-Rural	\$ 130.37	\$ 64.79	\$ 294.41	\$ 64.79	201.22%	\$ 61.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0730	Tens four lead	NU	DRR	DME Rural	\$ 260.41	\$ 64.79	\$ 294.41	\$ 294.41	88.45%	\$ 260.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0731	Conductive garment for tens/	NU	DRN	DME Non-Rural	\$ 187.08	\$ 82.79	\$ 297.45	\$ 82.79	225.97%	\$ 78.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0745	Neuromuscular stim for shock	RR	DRN	DME Non-Rural	\$ 107.21	\$ 121.07	\$ -	\$ 121.07	88.55%	\$ 107.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0776	Iv pole	NU	DRN	DME Non-Rural	\$ 134.12	\$ 173.68	\$ 184.51	\$ 173.68	77.22%	\$ 134.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0776	Iv pole	NU	DRR	DME Rural	\$ 138.31	\$ 173.68	\$ 184.51	\$ 184.51	74.96%	\$ 138.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0776	Iv pole	RR	DRN	DME Non-Rural	\$ 15.78	\$ 17.37	\$ 20.87	\$ 17.37	90.85%	\$ 15.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0776	Iv pole	RR	DRR	DME Rural	\$ 15.78	\$ 17.37	\$ 20.87	\$ 20.87	75.61%	\$ 15.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0781	External ambulatory infus pu	RR	DRN	DME Non-Rural	\$ 257.87	\$ 292.42	\$ 326.91	\$ 292.42	88.18%	\$ 257.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0781	External ambulatory infus pu	RR	DRR	DME Rural	\$ 289.00	\$ 292.42	\$ 326.91	\$ 326.91	88.40%	\$ 289.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0784	Ext amb infusn pump insulin	RR	DRN	DME Non-Rural	\$ 464.95	\$ 527.27	\$ 548.51	\$ 527.27	88.18%	\$ 464.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0849	Cervical pneum trac equip	RR	DRN	DME Non-Rural	\$ 62.27	\$ 70.32	\$ -	\$ 70.32	88.55%	\$ 62.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0860	Tract equip cervical tract	NU	DRN	DME Non-Rural	\$ 47.03	\$ 52.58	\$ -	\$ 52.58	89.44%	\$ 47.03	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0910	Trapeze bar attached to bed	RR	DRN	DME Non-Rural	\$ 11.50	\$ 13.03	\$ 18.81	\$ 13.03	88.26%	\$ 11.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0912	Hd trapeze bar free standing	RR	DRN	DME Non-Rural	\$ 83.81	\$ 95.06	\$ 120.05	\$ 95.06	88.17%	\$ 83.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0935	Cont pas motion exercise dev	RR	DRN	DME Non-Rural	\$ 27.48	\$ 31.04	\$ -	\$ 31.04	88.53%	\$ 27.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0940	Trapeze bar free standing	RR	DRN	DME Non-Rural	\$ 21.61	\$ 24.60	\$ 34.03	\$ 24.60	87.85%	\$ 21.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0942	Cervical head harness/halter	NU	DRN	DME Non-Rural	\$ 20.41	\$ 27.08	\$ -	\$ 27.08	75.37%	\$ 20.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0951	Loop heel	NU	DRN	DME Non-Rural	\$ 15.19	\$ 15.91	\$ 18.05	\$ 15.91	95.47%	\$ 15.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0951	Loop heel	NU	DRR	DME Rural	\$ 15.92	\$ 15.91	\$ 18.05	\$ 18.05	88.20%	\$ 15.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0952	Toe loop/holder, each	NU	DRN	DME Non-Rural	\$ 16.10	\$ 18.83	\$ 18.83	\$ 18.83	85.50%	\$ 16.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0952	Toe loop/holder, each	NU	DRR	DME Rural	\$ 16.10	\$ 18.83	\$ 18.83	\$ 18.83	85.50%	\$ 16.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0953	W/C LATERAL THIGH/KNEE SUP	NU	DRN	DME Non-Rural	\$ 70.66	\$ 87.48	\$ 106.58	\$ 87.48	80.77%	\$ 70.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0954	FOOT BOX, ANY TYPE EACH FOOT	NU	DRN	DME Non-Rural	\$ 47.62	\$ 62.62	\$ 65.09	\$ 62.62	76.05%	\$ 47.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0956	W/c lateral trunk/hip suppor	NU	DRN	DME Non-Rural	\$ 95.02	\$ 87.48	\$ 106.58	\$ 87.48	108.62%	\$ 83.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0956	W/c lateral trunk/hip suppor	NU	DRR	DME Rural	\$ 95.02	\$ 87.48	\$ 106.58	\$ 106.58	89.15%	\$ 95.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0957	W/c medial thigh support	NU	DRN	DME Non-Rural	\$ 154.24	\$ 144.80	\$ 157.59	\$ 144.80	106.52%	\$ 137.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0957	W/c medial thigh support	NU	DRR	DME Rural	\$ 154.24	\$ 144.80	\$ 157.59	\$ 157.59	97.87%	\$ 149.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0960	W/c shoulder harness/straps	NU	DRN	DME Non-Rural	\$ 91.11	\$ 89.88	\$ 99.60	\$ 89.88	101.37%	\$ 85.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0960	W/c shoulder harness/straps	NU	DRR	DME Rural	\$ 91.11	\$ 89.88	\$ 99.60	\$ 99.60	91.48%	\$ 91.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0961	Wheelchair brake extension	NU	DRN	DME Non-Rural	\$ 20.89	\$ 23.73	\$ 33.31	\$ 23.73	88.03%	\$ 20.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0961	Wheelchair brake extension	NU	DRR	DME Rural	\$ 24.94	\$ 23.73	\$ 33.31	\$ 33.31	74.87%	\$ 24.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0966	Wheelchair head rest extensi	NU	DRN	DME Non-Rural	\$ 69.64	\$ 86.22	\$ 93.78	\$ 86.22	80.77%	\$ 69.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0966	Wheelchair head rest extensi	NU	DRR	DME Rural	\$ 70.17	\$ 86.22	\$ 93.78	\$ 93.78	74.82%	\$ 70.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0971	Wheelchair anti-tipping devi	NU	DRN	DME Non-Rural	\$ 34.30	\$ 34.75	\$ 48.82	\$ 34.75	98.71%	\$ 33.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0971	Wheelchair anti-tipping devi	NU	DRR	DME Rural	\$ 36.55	\$ 34.75	\$ 48.82	\$ 48.82	74.87%	\$ 36.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0973	W/ch access det adj armrest	NU	DRN	DME Non-Rural	\$ 129.68	\$ 56.89	\$ 101.57	\$ 56.89	227.95%	\$ 54.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0973	W/ch access det adj armrest	NU	DRR	DME Rural	\$ 129.68	\$ 56.89	\$ 101.57	\$ 101.57	127.68%	\$ 96.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0974	W/ch access anti-rollback	NU	DRR	DME Rural	\$ 68.23	\$ 87.40	\$ 90.94	\$ 90.94	75.03%	\$ 68.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0974	W/ch access anti-rollback	NU	DRN	DME Non-Rural	\$ 67.24	\$ 87.40	\$ 90.94	\$ 87.40	76.93%	\$ 67.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0978	W/c acc,saf belt pelv strap	NU	DRN	DME Non-Rural	\$ 46.30	\$ 29.49	\$ 38.51	\$ 29.49	157.00%	\$ 28.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0978	W/c acc,saf belt pelv strap	NU	DRR	DME Rural	\$ 46.30	\$ 29.49	\$ 38.51	\$ 38.51	120.23%	\$ 36.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0981	Seat upholstery, replacement	NU	DRN	DME Non-Rural	\$ 72.66	\$ 49.13	\$ 52.29	\$ 49.13	147.89%	\$ 46.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0982	Back upholstery, replacement	NU	DRN	DME Non-Rural	\$ 67.94	\$ 54.40	\$ 55.70	\$ 54.40	124.89%	\$ 51.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0990	Wheelchair elevating leg res	RR	DRN	DME Non-Rural	\$ 7.57	\$ 7.68	\$ 12.24	\$ 7.68	98.57%	\$ 7.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0990	Wheelchair elevating leg res	NU	DRN	DME Non-Rural	\$ 68.85	\$ 76.79	\$ 113.69	\$ 76.79	89.66%	\$ 68.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0990	Wheelchair elevating leg res	RR	DRR	DME Rural	\$ 9.17	\$ 7.68	\$ 12.24	\$ 12.24	74.92%	\$ 9.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E0990	Wheelchair elevating leg res	NU	DRR	DME Rural	\$ 85.12	\$ 76.79	\$ 113.69	\$ 113.69	74.87%	\$ 85.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0990	Wheelchair elevating leg res	UE	DRN	DME Non-Rural	\$ 52.45	\$ 57.59	\$ 87.44	\$ 57.59	91.07%	\$ 52.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0990	Wheelchair elevating leg res	UE	DRR	DME Rural	\$ 65.46	\$ 57.59	\$ 87.44	\$ 87.44	74.86%	\$ 65.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0992	Wheelchair solid seat insert	NU	DRN	DME Non-Rural	\$ 79.07	\$ 99.29	\$ 113.66	\$ 99.29	79.64%	\$ 79.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0995	Wc calf rest, pad replacemnt	NU	DRN	DME Non-Rural	\$ 24.35	\$ 31.57	\$ 33.66	\$ 31.57	77.13%	\$ 24.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E0995	Wc calf rest, pad replacemnt	NU	DRR	DME Rural	\$ 25.18	\$ 31.57	\$ 33.66	\$ 33.66	74.81%	\$ 25.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1160	Wheelchair fixed arms	RR	DRN	DME Non-Rural	\$ 76.30	\$ 85.29	\$ -	\$ 85.29	89.46%	\$ 76.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1226	Manual fully reclining back	RR	DRN	DME Non-Rural	\$ 37.84	\$ 44.65	\$ 56.65	\$ 44.65	84.75%	\$ 37.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1226	Manual fully reclining back	NU	DRN	DME Non-Rural	\$ 368.38	\$ 446.53	\$ 557.26	\$ 446.53	82.50%	\$ 368.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1226	Manual fully reclining back	RR	DRR	DME Rural	\$ 42.40	\$ 44.65	\$ 56.65	\$ 56.65	74.85%	\$ 42.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1226	Manual fully reclining back	NU	DRR	DME Rural	\$ 417.09	\$ 446.53	\$ 557.26	\$ 557.26	74.85%	\$ 417.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1236	Folding ped wc adjustable	RR	DRN	DME Non-Rural	\$ 198.00	\$ 223.60	\$ -	\$ 223.60	88.55%	\$ 198.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1238	Fld ped wc adjstabl w/o seat	RR	DRN	DME Non-Rural	\$ 198.00	\$ 223.60	\$ -	\$ 223.60	88.55%	\$ 198.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1297	Wheelchair special seat dept	NU	DRN	DME Non-Rural	\$ 117.41	\$ 142.73	\$ -	\$ 142.73	82.26%	\$ 117.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1353	Oxygen supplies regulator		DRN	DME Non-Rural	\$ 31.17	\$ 38.64	\$ -	\$ 38.64	80.67%	\$ 31.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1355	Oxygen supplies stand/rack		DRN	DME Non-Rural	\$ 23.46	\$ 29.12	\$ -	\$ 29.12	80.56%	\$ 23.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1390	Oxygen concentrator	RR	DRN	DME Non-Rural	\$ 97.54	\$ 95.60	\$ 168.96	\$ 95.60	102.03%	\$ 90.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1392	Portable oxygen concentrator	RR	DRN	DME Non-Rural	\$ 40.08	\$ 47.93	\$ 51.18	\$ 47.93	83.62%	\$ 40.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1800	Adjust elbow ext/flex device	RR	DRN	DME Non-Rural	\$ 125.81	\$ 142.08	\$ -	\$ 142.08	88.55%	\$ 125.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1802	Adjst forearm pro/sup device	RR	DRN	DME Non-Rural	\$ 394.86	\$ 445.92	\$ -	\$ 445.92	88.55%	\$ 394.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E1805	Adjust wrist ext/flex device	RR	DRN	DME Non-Rural	\$ 129.76	\$ 146.54	\$ -	\$ 146.54	88.55%	\$ 129.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1810	Adjust knee ext/flex device	RR	DRN	DME Non-Rural	\$ 127.96	\$ 144.50	\$ -	\$ 144.50	88.55%	\$ 127.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1811	Sps knee device	RR	DRN	DME Non-Rural	\$ 162.04	\$ 182.99	\$ -	\$ 182.99	88.55%	\$ 162.04	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1815	Adjust ankle ext/flex device	RR	DRN	DME Non-Rural	\$ 129.76	\$ 146.54	\$ -	\$ 146.54	88.55%	\$ 129.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E1840	Adj shoulder ext/flex device	RR	DRN	DME Non-Rural	\$ 462.41	\$ 522.20	\$ -	\$ 522.20	88.55%	\$ 462.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2201	Man w/ch acc seat w>=20"<24"	NU	DRN	DME Non-Rural	\$ 417.21	\$ 377.71	\$ 449.30	\$ 377.71	110.46%	\$ 358.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2201	Man w/ch acc seat w>=20"<24"	NU	DRR	DME Rural	\$ 417.21	\$ 377.71	\$ 449.30	\$ 449.30	92.86%	\$ 417.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2202	Seat width 24-27 in	NU	DRN	DME Non-Rural	\$ 530.02	\$ 567.51	\$ 607.10	\$ 567.51	93.39%	\$ 530.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2203	Frame depth less than 22 in	NU	DRN	DME Non-Rural	\$ 395.12	\$ 485.42	\$ 592.24	\$ 485.42	81.40%	\$ 395.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2203	Frame depth less than 22 in	NU	DRR	DME Rural	\$ 443.21	\$ 485.42	\$ 592.24	\$ 592.24	74.84%	\$ 443.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2204	Frame depth 22 to 25 in	NU	DRN	DME Non-Rural	\$ 684.62	\$ 852.11	\$ 1,019.42	\$ 852.11	80.34%	\$ 684.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2206	Man wc whl lock comp repl ea	NU	DRN	DME Non-Rural	\$ 45.50	\$ 46.97	\$ 51.83	\$ 46.97	96.87%	\$ 44.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2206	Man wc whl lock comp repl ea	NU	DRR	DME Rural	\$ 45.73	\$ 46.97	\$ 51.83	\$ 51.83	88.23%	\$ 45.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2207	Crutch and cane holder	NU	DRN	DME Non-Rural	\$ 40.35	\$ 52.32	\$ 58.38	\$ 52.32	77.12%	\$ 40.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2208	Cylinder tank carrier	NU	DRN	DME Non-Rural	\$ 90.67	\$ 89.32	\$ 118.22	\$ 89.32	101.51%	\$ 84.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2208	Cylinder tank carrier	NU	DRR	DME Rural	\$ 96.11	\$ 89.32	\$ 118.22	\$ 118.22	81.30%	\$ 96.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2209	Arm trough each	NU	DRN	DME Non-Rural	\$ 86.68	\$ 94.58	\$ 115.79	\$ 94.58	91.65%	\$ 86.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2209	Arm trough each	NU	DRR	DME Rural	\$ 86.68	\$ 94.58	\$ 115.79	\$ 115.79	74.86%	\$ 86.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2210	Wheelchair bearings	NU	DRN	DME Non-Rural	\$ 5.41	\$ 6.66	\$ 7.22	\$ 6.66	81.23%	\$ 5.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2210	Wheelchair bearings	NU	DRR	DME Rural	\$ 5.41	\$ 6.66	\$ 7.22	\$ 7.22	74.93%	\$ 5.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E2211	Pneumatic propulsion tire	NU	DRN	DME Non-Rural	\$ 33.11	\$ 37.84	\$ 49.38	\$ 37.84	87.50%	\$ 33.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2211	Pneumatic propulsion tire	NU	DRR	DME Rural	\$ 36.97	\$ 37.84	\$ 49.38	\$ 49.38	74.87%	\$ 36.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2212	Pneumatic prop tire tube	NU	DRN	DME Non-Rural	\$ 5.48	\$ 7.11	\$ 7.94	\$ 7.11	77.07%	\$ 5.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2212	Pneumatic prop tire tube	NU	DRR	DME Rural	\$ 5.94	\$ 7.11	\$ 7.94	\$ 7.94	74.81%	\$ 5.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2213	Pneumatic prop tire insert	NU	DRN	DME Non-Rural	\$ 26.74	\$ 33.90	\$ 39.51	\$ 33.90	78.88%	\$ 26.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2213	Pneumatic prop tire insert	NU	DRR	DME Rural	\$ 29.56	\$ 33.90	\$ 39.51	\$ 39.51	74.82%	\$ 29.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2214	Pneumatic caster tire each	NU	DRN	DME Non-Rural	\$ 30.73	\$ 38.49	\$ 45.21	\$ 38.49	79.84%	\$ 30.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2214	Pneumatic caster tire each	NU	DRR	DME Rural	\$ 33.83	\$ 38.49	\$ 45.21	\$ 45.21	74.83%	\$ 33.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2219	Foam caster tire any size ea	NU	DRN	DME Non-Rural	\$ 35.17	\$ 46.34	\$ 49.40	\$ 46.34	75.90%	\$ 35.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2219	Foam caster tire any size ea	NU	DRR	DME Rural	\$ 37.10	\$ 46.34	\$ 49.40	\$ 49.40	75.10%	\$ 37.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2220	Solid propuls tire, repl, ea	NU	DRN	DME Non-Rural	\$ 26.40	\$ 34.16	\$ 37.87	\$ 34.16	77.28%	\$ 26.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2220	Solid propuls tire, repl, ea	NU	DRR	DME Rural	\$ 28.33	\$ 34.16	\$ 37.87	\$ 37.87	74.81%	\$ 28.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2221	Solid caster tire repl, each	NU	DRN	DME Non-Rural	\$ 23.53	\$ 30.40	\$ 34.21	\$ 30.40	77.40%	\$ 23.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2222	Solid caster integ whl, repl	NU	DRN	DME Non-Rural	\$ 19.37	\$ 25.00	\$ 28.39	\$ 25.00	77.48%	\$ 19.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2222	Solid caster integ whl, repl	NU	DRR	DME Rural	\$ 21.24	\$ 25.00	\$ 28.39	\$ 28.39	74.82%	\$ 21.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2224	Propulsion whl excl tire rep	NU	DRN	DME Non-Rural	\$ 85.98	\$ 108.89	\$ 126.48	\$ 108.89	78.96%	\$ 85.98	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2224	Propulsion whl excl tire rep	NU	DRR	DME Rural	\$ 94.64	\$ 108.89	\$ 126.48	\$ 126.48	74.83%	\$ 94.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2225	Caster wheel excludes tire	NU	DRR	DME Rural	\$ 17.73	\$ 21.57	\$ 23.70	\$ 23.70	74.81%	\$ 17.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2225	Caster wheel excludes tire	NU	DRN	DME Non-Rural	\$ 16.51	\$ 21.57	\$ 23.70	\$ 21.57	76.54%	\$ 16.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2226	Caster fork replacement only	NU	DRN	DME Non-Rural	\$ 34.70	\$ 44.70	\$ 50.68	\$ 44.70	77.63%	\$ 34.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E2231	Solid seat support base	NU	DRN	DME Non-Rural	\$ 130.60	\$ 161.42	\$ 192.54	\$ 161.42	80.91%	\$ 130.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2231	Solid seat support base	NU	DRR	DME Rural	\$ 144.08	\$ 161.42	\$ 192.54	\$ 192.54	74.83%	\$ 144.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2323	Special joystick handle	NU	DRN	DME Non-Rural	\$ 70.65	\$ 80.27	\$ 80.81	\$ 80.27	88.02%	\$ 70.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2340	W/c wdth 20-23 in seat frame	NU	DRN	DME Non-Rural	\$ 434.85	\$ 488.95	\$ -	\$ 488.95	88.94%	\$ 434.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2351	Electronic sgd interface	NU	DRN	DME Non-Rural	\$ 730.67	\$ 821.90	\$ 821.90	\$ 821.90	88.90%	\$ 730.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2359	Gr34 sealed leadacid battery	NU	DRN	DME Non-Rural	\$ 161.18	\$ 190.51	\$ 224.45	\$ 190.51	84.60%	\$ 161.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2359	Gr34 sealed leadacid battery	NU	DRR	DME Rural	\$ 167.94	\$ 190.51	\$ 224.45	\$ 224.45	74.82%	\$ 167.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2361	22nf sealed leadacid battery	NU	DRN	DME Non-Rural	\$ 137.48	\$ 127.91	\$ 154.86	\$ 127.91	107.48%	\$ 121.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2361	22nf sealed leadacid battery	NU	DRR	DME Rural	\$ 137.48	\$ 127.91	\$ 154.86	\$ 154.86	88.78%	\$ 137.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2363	Gr24 sealed leadacid battery	NU	DRN	DME Non-Rural	\$ 197.92	\$ 163.94	\$ 201.48	\$ 163.94	120.73%	\$ 155.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2363	Gr24 sealed leadacid battery	NU	DRR	DME Rural	\$ 197.92	\$ 163.94	\$ 201.48	\$ 201.48	98.23%	\$ 191.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2365	U1 sealed leadacid battery	NU	DRN	DME Non-Rural	\$ 115.34	\$ 88.26	\$ 114.52	\$ 88.26	130.68%	\$ 83.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2365	U1 sealed leadacid battery	NU	DRR	DME Rural	\$ 115.34	\$ 88.26	\$ 114.52	\$ 114.52	100.72%	\$ 108.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2366	Battery charger, single mode	NU	DRN	DME Non-Rural	\$ 267.56	\$ 170.82	\$ 254.08	\$ 170.82	156.63%	\$ 162.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2366	Battery charger, single mode	NU	DRR	DME Rural	\$ 267.56	\$ 170.82	\$ 254.08	\$ 254.08	105.31%	\$ 241.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2371	Gr27 sealed leadacid battery	NU	DRN	DME Non-Rural	\$ 123.19	\$ 160.87	\$ 177.05	\$ 160.87	76.58%	\$ 123.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2381	Pneum drive wheel tire	NU	DRN	DME Non-Rural	\$ 64.32	\$ 71.17	\$ 83.31	\$ 71.17	90.38%	\$ 64.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2383	Insert, pneum wheel drive	NU	DRN	DME Non-Rural	\$ 122.92	\$ 153.07	\$ 170.14	\$ 153.07	80.30%	\$ 122.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2384	Pneumatic caster tire	NU	DRN	DME Non-Rural	\$ 65.48	\$ 75.33	\$ 86.43	\$ 75.33	86.92%	\$ 65.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2386	Foam filled drive wheel tire	NU	DRN	DME Non-Rural	\$ 119.89	\$ 122.45	\$ 153.31	\$ 122.45	97.91%	\$ 116.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E2386	Foam filled drive wheel tire	NU	DRR	DME Rural	\$ 121.81	\$ 122.45	\$ 153.31	\$ 153.31	79.45%	\$ 121.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2387	Foam filled caster tire	NU	DRN	DME Non-Rural	\$ 54.63	\$ 59.44	\$ 70.79	\$ 59.44	91.91%	\$ 54.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2388	Foam drive wheel tire	NU	DRN	DME Non-Rural	\$ 42.57	\$ 56.27	\$ 57.75	\$ 56.27	75.65%	\$ 42.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2389	Foam caster tire	NU	DRN	DME Non-Rural	\$ 23.62	\$ 31.45	\$ 31.82	\$ 31.45	75.10%	\$ 23.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2390	Solid drive wheel tire	NU	DRN	DME Non-Rural	\$ 36.66	\$ 48.69	\$ 49.50	\$ 48.69	75.29%	\$ 36.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2391	Solid caster tire	NU	DRN	DME Non-Rural	\$ 16.59	\$ 20.52	\$ 23.21	\$ 20.52	80.85%	\$ 16.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2391	Solid caster tire	NU	DRR	DME Rural	\$ 17.37	\$ 20.52	\$ 23.21	\$ 23.21	74.84%	\$ 17.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2392	Solid caster tire, integrate	NU	DRN	DME Non-Rural	\$ 50.35	\$ 47.67	\$ 58.37	\$ 47.67	105.62%	\$ 45.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2392	Solid caster tire, integrate	NU	DRR	DME Rural	\$ 51.51	\$ 47.67	\$ 58.37	\$ 58.37	88.25%	\$ 51.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2394	Drive wheel excludes tire	NU	DRN	DME Non-Rural	\$ 62.11	\$ 65.80	\$ 81.95	\$ 65.80	94.39%	\$ 62.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2394	Drive wheel excludes tire	NU	DRR	DME Rural	\$ 62.11	\$ 65.80	\$ 81.95	\$ 81.95	75.79%	\$ 62.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2395	Caster wheel excludes tire	NU	DRN	DME Non-Rural	\$ 44.14	\$ 51.75	\$ 59.64	\$ 51.75	85.29%	\$ 44.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2395	Caster wheel excludes tire	NU	DRR	DME Rural	\$ 44.63	\$ 51.75	\$ 59.64	\$ 59.64	74.83%	\$ 44.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2396	Caster fork	NU	DRN	DME Non-Rural	\$ 46.64	\$ 61.11	\$ 66.38	\$ 61.11	76.32%	\$ 46.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2402	Neg press wound therapy pump	RR	DRN	DME Non-Rural	\$ 776.76	\$ 711.74	\$ 1,434.91	\$ 711.74	109.14%	\$ 676.15	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2402	Neg press wound therapy pump	RR	DRR	DME Rural	\$ 1,267.78	\$ 711.74	\$ 1,434.91	\$ 1,434.91	88.35%	\$ 1,267.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2500	Sgd digitized pre-rec <=8min	NU	DRN	DME Non-Rural	\$ 472.47	\$ 533.56	\$ -	\$ 533.56	88.55%	\$ 472.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2510	Sgd w multi methods msg/accs	NU	DRN	DME Non-Rural	\$ 8,177.52	\$ 9,234.92	\$ -	\$ 9,234.92	88.55%	\$ 8,177.52	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2601	Gen w/c cushion wdth < 22 in	NU	DRN	DME Non-Rural	\$ 101.18	\$ 42.94	\$ 60.60	\$ 42.94	235.63%	\$ 40.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2601	Gen w/c cushion wdth < 22 in	NU	DRR	DME Rural	\$ 101.18	\$ 42.94	\$ 60.60	\$ 60.60	166.96%	\$ 57.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E2602	Gen w/c cushion wdth >=22 in	NU	DRN	DME Non-Rural	\$ 133.53	\$ 100.25	\$ 123.35	\$ 100.25	133.20%	\$ 95.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2603	Skin protect wc cus wd <22in	NU	DRN	DME Non-Rural	\$ 170.98	\$ 118.73	\$ 154.26	\$ 118.73	144.01%	\$ 112.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2603	Skin protect wc cus wd <22in	NU	DRR	DME Rural	\$ 170.98	\$ 118.73	\$ 154.26	\$ 154.26	110.84%	\$ 146.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2604	Skin protect wc cus wd>=22in	NU	DRN	DME Non-Rural	\$ 210.69	\$ 180.49	\$ 203.02	\$ 180.49	116.73%	\$ 171.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2605	Position wc cush wdth <22 in	NU	DRN	DME Non-Rural	\$ 289.31	\$ 246.80	\$ 291.19	\$ 246.80	117.22%	\$ 234.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2605	Position wc cush wdth <22 in	NU	DRR	DME Rural	\$ 289.31	\$ 246.80	\$ 291.19	\$ 291.19	99.35%	\$ 276.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2607	Skin pro/pos wc cus wd <22in	NU	DRN	DME Non-Rural	\$ 338.59	\$ 243.29	\$ 299.12	\$ 243.29	139.17%	\$ 231.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2607	Skin pro/pos wc cus wd <22in	NU	DRR	DME Rural	\$ 338.59	\$ 243.29	\$ 299.12	\$ 299.12	113.20%	\$ 284.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2608	Skin pro/pos wc cus wd>=22in	NU	DRN	DME Non-Rural	\$ 392.62	\$ 294.33	\$ 366.80	\$ 294.33	133.39%	\$ 279.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2611	Gen use back cush wdth <22in	NU	DRN	DME Non-Rural	\$ 349.28	\$ 175.99	\$ 282.71	\$ 175.99	198.47%	\$ 167.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2611	Gen use back cush wdth <22in	NU	DRR	DME Rural	\$ 349.28	\$ 175.99	\$ 282.71	\$ 282.71	123.55%	\$ 268.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2612	Gen use back cush wdth>=22in	NU	DRN	DME Non-Rural	\$ 472.51	\$ 357.22	\$ 441.76	\$ 357.22	132.27%	\$ 339.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2613	Position back cush wd <22in	NU	DRN	DME Non-Rural	\$ 439.50	\$ 368.41	\$ 426.73	\$ 368.41	119.30%	\$ 349.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2613	Position back cush wd <22in	NU	DRR	DME Rural	\$ 439.50	\$ 368.41	\$ 426.73	\$ 426.73	102.99%	\$ 405.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2614	Position back cush wd>=22in	NU	DRN	DME Non-Rural	\$ 608.25	\$ 523.72	\$ 608.47	\$ 523.72	116.14%	\$ 497.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2615	Pos back post/lat wdth <22in	NU	DRN	DME Non-Rural	\$ 545.48	\$ 407.57	\$ 489.10	\$ 407.57	133.84%	\$ 387.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2615	Pos back post/lat wdth <22in	NU	DRR	DME Rural	\$ 545.48	\$ 407.57	\$ 489.10	\$ 489.10	111.53%	\$ 464.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2619	Replace cover w/c seat cush	NU	DRN	DME Non-Rural	\$ 51.54	\$ 57.93	\$ 59.14	\$ 57.93	88.97%	\$ 51.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2619	Replace cover w/c seat cush	NU	DRR	DME Rural	\$ 52.17	\$ 57.93	\$ 59.14	\$ 59.14	88.21%	\$ 52.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2620	Wc planar back cush wd <22in	NU	DRN	DME Non-Rural	\$ 612.47	\$ 448.65	\$ 561.22	\$ 448.65	136.51%	\$ 426.22	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	E2620	Wc planar back cush wd <22in	NU	DRR	DME Rural	\$ 612.47	\$ 448.65	\$ 561.22	\$ 561.22	109.13%	\$ 533.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2621	Wc planar back cush wd >=22in	NU	DRN	DME Non-Rural	\$ 642.73	\$ 510.33	\$ 621.26	\$ 510.33	125.94%	\$ 484.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2622	Adj skin pro w/c cus wd <22in	NU	DRN	DME Non-Rural	\$ 369.83	\$ 367.50	\$ 378.65	\$ 367.50	100.63%	\$ 349.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2622	Adj skin pro w/c cus wd <22in	NU	DRR	DME Rural	\$ 369.83	\$ 367.50	\$ 378.65	\$ 378.65	97.67%	\$ 359.72	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2623	Adj skin pro wc cus wd >=22in	NU	DRN	DME Non-Rural	\$ 352.87	\$ 464.74	\$ 480.37	\$ 464.74	75.93%	\$ 352.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2623	Adj skin pro wc cus wd >=22in	NU	DRR	DME Rural	\$ 359.40	\$ 464.74	\$ 480.37	\$ 480.37	74.82%	\$ 359.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2624	Adj skin pro/pos cus <22in	NU	DRN	DME Non-Rural	\$ 390.67	\$ 373.45	\$ 383.23	\$ 373.45	104.61%	\$ 354.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2624	Adj skin pro/pos cus <22in	NU	DRR	DME Rural	\$ 390.67	\$ 373.45	\$ 383.23	\$ 383.23	101.94%	\$ 364.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2625	Adj skin pro/pos wc cus >=22	NU	DRR	DME Rural	\$ 359.02	\$ 462.17	\$ 479.85	\$ 479.85	74.82%	\$ 359.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2625	Adj skin pro/pos wc cus >=22	NU	DRN	DME Non-Rural	\$ 351.72	\$ 462.17	\$ 479.85	\$ 462.17	76.10%	\$ 351.72	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2627	Arm supp att to wc rancho ty	NU	DRN	DME Non-Rural	\$ 939.05	\$ 1,206.49	\$ 1,305.86	\$ 1,206.49	77.83%	\$ 939.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2628	Mobile arm supports reclinin	NU	DRN	DME Non-Rural	\$ 707.42	\$ 928.66	\$ 998.51	\$ 928.66	76.18%	\$ 707.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	E2631	Elevat proximal arm support	NU	DRN	DME Non-Rural	\$ 250.43	\$ 321.32	\$ 353.13	\$ 321.32	77.94%	\$ 250.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0001	Standard wheelchair	RR	DRN	DME Non-Rural	\$ 28.32	\$ 26.26	\$ 51.17	\$ 26.26	107.84%	\$ 24.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0001	Standard wheelchair	RR	DRR	DME Rural	\$ 45.21	\$ 26.26	\$ 51.17	\$ 51.17	88.35%	\$ 45.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0002	Stnd hemi (low seat) whlchr	RR	DRN	DME Non-Rural	\$ 49.26	\$ 50.63	\$ 81.41	\$ 50.63	97.29%	\$ 48.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0003	Lightweight wheelchair	RR	DRN	DME Non-Rural	\$ 44.86	\$ 39.21	\$ 83.36	\$ 39.21	114.41%	\$ 37.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0003	Lightweight wheelchair	RR	DRR	DME Rural	\$ 73.66	\$ 39.21	\$ 83.36	\$ 83.36	88.36%	\$ 73.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0004	High strength ltwt whlchr	RR	DRN	DME Non-Rural	\$ 55.63	\$ 47.48	\$ 104.88	\$ 47.48	117.17%	\$ 45.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0004	High strength ltwt whlchr	RR	DRR	DME Rural	\$ 92.69	\$ 47.48	\$ 104.88	\$ 104.88	88.38%	\$ 92.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	K0005	Ultralightweight wheelchair	NU	DRN	DME Non-Rural	\$ 2,233.73	\$ 2,522.56	\$ -	\$ 2,522.56	88.55%	\$ 2,233.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0006	Heavy duty wheelchair	RR	DRN	DME Non-Rural	\$ 76.93	\$ 80.16	\$ 126.21	\$ 80.16	95.97%	\$ 76.15	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0007	Extra heavy duty wheelchair	RR	DRN	DME Non-Rural	\$ 104.67	\$ 105.47	\$ 178.86	\$ 105.47	99.24%	\$ 100.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0007	Extra heavy duty wheelchair	RR	DRR	DME Rural	\$ 158.00	\$ 105.47	\$ 178.86	\$ 178.86	88.34%	\$ 158.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0017	Detach adjust armrest base	NU	DRN	DME Non-Rural	\$ 47.33	\$ 55.77	\$ 57.94	\$ 55.77	84.87%	\$ 47.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0017	Detach adjust armrest base	NU	DRR	DME Rural	\$ 47.33	\$ 55.77	\$ 57.94	\$ 57.94	81.69%	\$ 47.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0018	Detach adjust armrst upper	NU	DRN	DME Non-Rural	\$ 26.46	\$ 31.53	\$ 32.55	\$ 31.53	83.92%	\$ 26.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0018	Detach adjust armrst upper	NU	DRR	DME Rural	\$ 26.46	\$ 31.53	\$ 32.55	\$ 32.55	81.29%	\$ 26.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0019	Arm pad repl, each	NU	DRN	DME Non-Rural	\$ 15.31	\$ 16.41	\$ 18.56	\$ 16.41	93.30%	\$ 15.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0019	Arm pad repl, each	NU	DRR	DME Rural	\$ 15.79	\$ 16.41	\$ 18.56	\$ 18.56	85.08%	\$ 15.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0037	Hi mount flip-up footrest ea	NU	DRN	DME Non-Rural	\$ 48.84	\$ 52.47	\$ 54.55	\$ 52.47	93.08%	\$ 48.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0037	Hi mount flip-up footrest ea	NU	DRR	DME Rural	\$ 48.84	\$ 52.47	\$ 54.55	\$ 54.55	89.53%	\$ 48.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0038	Leg strap each	NU	DRN	DME Non-Rural	\$ 24.69	\$ 27.88	\$ 28.21	\$ 27.88	88.56%	\$ 24.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0038	Leg strap each	NU	DRR	DME Rural	\$ 24.89	\$ 27.88	\$ 28.21	\$ 28.21	88.23%	\$ 24.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0040	Adjustable angle footplate	NU	DRN	DME Non-Rural	\$ 85.24	\$ 61.55	\$ 77.14	\$ 61.55	138.49%	\$ 58.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0040	Adjustable angle footplate	NU	DRR	DME Rural	\$ 85.24	\$ 61.55	\$ 77.14	\$ 77.14	110.50%	\$ 73.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0041	Large size footplate each	NU	DRN	DME Non-Rural	\$ 53.71	\$ 57.20	\$ 59.71	\$ 57.20	93.90%	\$ 53.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0042	Standard size ftplate rep ea	NU	DRN	DME Non-Rural	\$ 37.24	\$ 36.74	\$ 39.79	\$ 36.74	101.36%	\$ 34.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0042	Standard size ftplate rep ea	NU	DRR	DME Rural	\$ 37.24	\$ 36.74	\$ 39.79	\$ 39.79	93.59%	\$ 37.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0043	Ftrst lowr exten tube rep ea	NU	DRN	DME Non-Rural	\$ 20.29	\$ 22.68	\$ 22.81	\$ 22.68	89.46%	\$ 20.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	K0043	Ftrst lowr exten tube rep ea	NU	DRR	DME Rural	\$ 20.29	\$ 22.68	\$ 22.81	\$ 22.81	88.95%	\$ 20.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0044	Ftrst upr hanger brac rep ea	NU	DRR	DME Rural	\$ 31.15	\$ 19.57	\$ 19.57	\$ 19.57	159.17%	\$ 18.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0045	Ftrst compl assembly repl ea	NU	DRN	DME Non-Rural	\$ 140.62	\$ 64.91	\$ 65.75	\$ 64.91	216.64%	\$ 61.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0047	Elev legrst upr hangr rep ea	NU	DRN	DME Non-Rural	\$ 80.86	\$ 80.67	\$ 85.30	\$ 80.67	100.24%	\$ 76.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0051	Cam rel asm ft/legrst rep ea	NU	DRN	DME Non-Rural	\$ 44.70	\$ 59.21	\$ 60.53	\$ 59.21	75.49%	\$ 44.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0052	Swingaway detach ftrest repl	NU	DRN	DME Non-Rural	\$ 70.29	\$ 87.30	\$ 99.35	\$ 87.30	80.52%	\$ 70.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0052	Swingaway detach ftrest repl	NU	DRR	DME Rural	\$ 74.35	\$ 87.30	\$ 99.35	\$ 99.35	74.84%	\$ 74.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0053	Elevate footrest articulate	NU	DRN	DME Non-Rural	\$ 114.07	\$ 98.47	\$ 113.55	\$ 98.47	115.84%	\$ 93.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0053	Elevate footrest articulate	NU	DRR	DME Rural	\$ 114.07	\$ 98.47	\$ 113.55	\$ 113.55	100.46%	\$ 107.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0065	Spoke protectors	NU	DRN	DME Non-Rural	\$ 47.80	\$ 54.23	\$ 60.03	\$ 54.23	88.14%	\$ 47.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0065	Spoke protectors		DRN	DME Non-Rural	\$ 47.80	\$ 54.23	\$ -	\$ 54.23	88.14%	\$ 47.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0069	Rr whl compl sol tire rep ea	NU	DRN	DME Non-Rural	\$ 103.36	\$ 111.01	\$ 128.19	\$ 111.01	93.11%	\$ 103.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0069	Rr whl compl sol tire rep ea	NU	DRR	DME Rural	\$ 107.42	\$ 111.01	\$ 128.19	\$ 128.19	83.80%	\$ 107.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0071	Fr cstr comp pne tire rep ea	NU	DRN	DME Non-Rural	\$ 122.17	\$ 122.09	\$ 143.74	\$ 122.09	100.07%	\$ 115.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0071	Fr cstr comp pne tire rep ea	NU	DRR	DME Rural	\$ 126.82	\$ 122.09	\$ 143.74	\$ 143.74	88.23%	\$ 126.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0072	Fr cstr semi-pne tire rep ea	NU	DRN	DME Non-Rural	\$ 73.54	\$ 78.24	\$ 87.87	\$ 78.24	93.99%	\$ 73.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0077	Fr cstr asmb sol tire rep ea	NU	DRN	DME Non-Rural	\$ 65.80	\$ 66.94	\$ 74.18	\$ 66.94	98.30%	\$ 63.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0105	Iv hanger	NU	DRN	DME Non-Rural	\$ 105.09	\$ 113.87	\$ 130.97	\$ 113.87	92.29%	\$ 105.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0105	Iv hanger	NU	DRR	DME Rural	\$ 106.87	\$ 113.87	\$ 130.97	\$ 130.97	81.60%	\$ 106.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0195	Elevating whlchair leg rests	RR	DRN	DME Non-Rural	\$ 11.74	\$ 12.68	\$ 19.32	\$ 12.68	92.59%	\$ 11.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

DME	K0195	Elevating whlchair leg rests	RR	DRR	DME Rural	\$ 14.47	\$ 12.68	\$ 19.32	\$ 19.32	74.90%	\$ 14.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0552	Sup/ext non-ins inf pump syr		DRN	DME Non-Rural	\$ 2.90	\$ 3.28	\$ 3.45	\$ 3.28	88.41%	\$ 2.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0552	Sup/ext non-ins inf pump syr		DRR	DME Rural	\$ 2.90	\$ 3.28	\$ 3.45	\$ 3.45	84.06%	\$ 2.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0733	12-24hr sealed lead acid	NU	DRR	DME Rural	\$ 26.67	\$ 33.96	\$ 35.53	\$ 35.53	75.06%	\$ 26.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0733	12-24hr sealed lead acid	NU	DRN	DME Non-Rural	\$ 25.65	\$ 33.96	\$ 35.53	\$ 33.96	75.53%	\$ 25.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0738	Portable gas oxygen system	RR	DRN	DME Non-Rural	\$ 40.08	\$ 47.93	\$ 51.18	\$ 47.93	83.62%	\$ 40.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0738	Portable gas oxygen system	RR	DRR	DME Rural	\$ 46.78	\$ 47.93	\$ 51.18	\$ 51.18	91.40%	\$ 46.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0800	Pov group 1 std up to 300lbs	NU	DRN	DME Non-Rural	\$ 844.84	\$ 961.62	\$ 1,294.54	\$ 961.62	87.86%	\$ 844.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0800	Pov group 1 std up to 300lbs	NU	DRR	DME Rural	\$ 1,142.75	\$ 961.62	\$ 1,294.54	\$ 1,294.54	88.27%	\$ 1,142.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0800	Pov group 1 std up to 300lbs	RR	DRR	DME Rural	\$ 84.78	\$ 96.16	\$ 129.46	\$ 129.46	65.49%	\$ 84.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0801	Pov group 1 hd 301-450 lbs	NU	DRN	DME Non-Rural	\$ 1,580.78	\$ 1,799.29	\$ 2,202.79	\$ 1,799.29	87.86%	\$ 1,580.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0801	Pov group 1 hd 301-450 lbs	NU	DRR	DME Rural	\$ 1,944.05	\$ 1,799.29	\$ 2,202.79	\$ 2,202.79	88.25%	\$ 1,944.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0806	Pov group 2 std up to 300lbs	NU	DRN	DME Non-Rural	\$ 1,452.49	\$ 1,653.26	\$ 1,746.21	\$ 1,653.26	87.86%	\$ 1,452.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0806	Pov group 2 std up to 300lbs	RR	DRN	DME Non-Rural	\$ 145.77	\$ 165.33	\$ 174.62	\$ 165.33	88.17%	\$ 145.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
DME	K0861	Pwc gp3 std mult pow opt s/b	RR	DRN	DME Non-Rural	\$ 896.48	\$ 1,002.20	\$ -	\$ 1,002.20	89.45%	\$ 896.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4216	STERILE WATER/SALINE, 10 ML		DRN	POS Non Rural	\$ 0.51	\$ 0.61	\$ -	\$ 0.61	83.37%	\$ 0.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4217	STERILE WATER/SALINE, 500 ML		DRN	POS Non Rural	\$ 3.22	\$ 4.28	\$ -	\$ 4.28	73.57%	\$ 3.22	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4221	SUPP NON-INSULIN INF CATH/WK		DRR	POS Rural	\$ 23.19	\$ 24.46	\$ 27.67	\$ 27.67	83.77%	\$ 23.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4221	SUPP NON-INSULIN INF CATH/WK		DRN	POS Non Rural	\$ 23.19	\$ 24.46	\$ 27.67	\$ 24.46	94.78%	\$ 23.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4222	INFUSION SUPPLIES WITH PUMP		DRR	POS Rural	\$ 41.29	\$ 46.39	\$ 55.08	\$ 55.08	74.92%	\$ 41.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4222	INFUSION SUPPLIES WITH PUMP		DRN	POS Non Rural	\$ 38.00	\$ 46.39	\$ 55.08	\$ 46.39	81.82%	\$ 38.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4235	LITHIUM BATT FOR GLUCOSE MON	NU	DRN	POS Non Rural	\$ 1.07	\$ 1.00	\$ -	\$ 1.00	107.00%	\$ 0.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4253	BLOOD GLUCOSE/REAGENT STRIPS	NU	DRN	POS Non Rural	\$ 8.22	\$ 8.32	\$ -	\$ 8.32	98.78%	\$ 7.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4258	LANCET DEVICE EACH		DRN	POS Non Rural	\$ 2.09	\$ 2.12	\$ -	\$ 2.12	98.41%	\$ 2.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4259	LANCETS PER BOX		DRN	POS Non Rural	\$ 1.40	\$ 1.42	\$ -	\$ 1.42	98.35%	\$ 1.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4265	PARAFFIN		DRN	POS Non Rural	\$ 3.74	\$ 4.65	\$ -	\$ 4.65	80.43%	\$ 3.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4310	INSERT TRAY W/O BAG/CATH		DRN	POS Non Rural	\$ 7.70	\$ 10.54	\$ -	\$ 10.54	72.89%	\$ 7.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4311	CATHETER W/O BAG 2-WAY LATEX		DRN	POS Non Rural	\$ 13.56	\$ 17.91	\$ -	\$ 17.91	75.43%	\$ 13.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4312	CATH W/O BAG 2-WAY SILICONE		DRN	POS Non Rural	\$ 17.18	\$ 20.92	\$ -	\$ 20.92	82.12%	\$ 17.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4314	CATH W/DRAINAGE 2-WAY LATEX		DRN	POS Non Rural	\$ 25.22	\$ 34.49	\$ -	\$ 34.49	72.92%	\$ 25.22	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4315	CATH W/DRAINAGE 2-WAY SILCNE		DRN	POS Non Rural	\$ 26.32	\$ 35.99	\$ -	\$ 35.99	71.07%	\$ 26.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4320	IRRIGATION TRAY		DRN	POS Non Rural	\$ 5.27	\$ 7.20	\$ -	\$ 7.20	73.04%	\$ 5.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4322	IRRIGATION SYRINGE		DRN	POS Non Rural	\$ 3.04	\$ 4.15	\$ -	\$ 4.15	72.92%	\$ 3.04	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4326	MALE EXTERNAL CATHETER		DRN	POS Non Rural	\$ 10.11	\$ 13.31	\$ -	\$ 13.31	75.94%	\$ 10.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4331	EXTENSION DRAINAGE TUBING		DRN	POS Non Rural	\$ 3.17	\$ 4.34	\$ -	\$ 4.34	72.97%	\$ 3.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4332	LUBE STERILE PACKET		DRN	POS Non Rural	\$ 0.13	\$ 0.15	\$ -	\$ 0.15	86.13%	\$ 0.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4333	URINARY CATH ANCHOR DEVICE		DRN	POS Non Rural	\$ 2.43	\$ 3.03	\$ -	\$ 3.03	79.76%	\$ 2.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4334	URINARY CATH LEG STRAP		DRN	POS Non Rural	\$ 5.06	\$ 6.71	\$ -	\$ 6.71	74.67%	\$ 5.06	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4338	INDWELLING CATHETER LATEX		DRN	POS Non Rural	\$ 12.24	\$ 16.74	\$ -	\$ 16.74	73.04%	\$ 12.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4340	INDWELLING CATHETER SPECIAL		DRN	POS Non Rural	\$ 31.68	\$ 43.32	\$ -	\$ 43.32	73.09%	\$ 31.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4344	CATH INDW FOLEY 2 WAY SILICN		DRN	POS Non Rural	\$ 15.82	\$ 21.63	\$ -	\$ 21.63	72.78%	\$ 15.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4349	DISPOSABLE MALE EXTERNAL CAT		DRN	POS Non Rural	\$ 2.23	\$ 2.74	\$ -	\$ 2.74	81.19%	\$ 2.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4351	STRAIGHT TIP URINE CATHETER		DRN	POS Non Rural	\$ 1.53	\$ 2.10	\$ -	\$ 2.10	72.39%	\$ 1.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4352	COUDE TIP URINARY CATHETER		DRN	POS Non Rural	\$ 6.23	\$ 8.51	\$ -	\$ 8.51	73.20%	\$ 6.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4353	INTERMITTENT URINARY CATH		DRN	POS Non Rural	\$ 7.67	\$ 9.56	\$ -	\$ 9.56	79.30%	\$ 7.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4354	CATH INSERTION TRAY W/BAG		DRN	POS Non Rural	\$ 11.78	\$ 16.11	\$ -	\$ 16.11	72.97%	\$ 11.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4356	EXT URETH CLMP OR COMPR DVC		DRN	POS Non Rural	\$ 41.76	\$ 52.92	\$ -	\$ 52.92	78.91%	\$ 41.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4357	BEDSIDE DRAINAGE BAG		DRN	POS Non Rural	\$ 9.69	\$ 13.25	\$ -	\$ 13.25	72.86%	\$ 9.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4358	URINARY LEG OR ABDOMEN BAG		DRN	POS Non Rural	\$ 6.62	\$ 9.05	\$ -	\$ 9.05	72.84%	\$ 6.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4362	SOLID SKIN BARRIER		DRN	POS Non Rural	\$ 3.46	\$ 4.74	\$ -	\$ 4.74	72.43%	\$ 3.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4363	OSTOMY CLAMP, REPLACEMENT		DRN	POS Non Rural	\$ 2.37	\$ 3.23	\$ -	\$ 3.23	72.48%	\$ 2.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4364	ADHESIVE, LIQUID OR EQUAL		DRN	POS Non Rural	\$ 2.93	\$ 4.01	\$ -	\$ 4.01	72.84%	\$ 2.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4366	OSTOMY VENT		DRN	POS Non Rural	\$ 1.48	\$ 1.76	\$ -	\$ 1.76	84.02%	\$ 1.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4367	OSTOMY BELT		DRN	POS Non Rural	\$ 8.25	\$ 10.04	\$ -	\$ 10.04	81.71%	\$ 8.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4368	OSTOMY FILTER		DRN	POS Non Rural	\$ 0.33	\$ 0.34	\$ -	\$ 0.34	97.06%	\$ 0.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4369	SKIN BARRIER LIQUID PER OZ		DRN	POS Non Rural	\$ 2.43	\$ 3.31	\$ -	\$ 3.31	73.29%	\$ 2.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4371	SKIN BARRIER POWDER PER OZ		DRN	POS Non Rural	\$ 4.08	\$ 4.98	\$ -	\$ 4.98	81.60%	\$ 4.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4373	SKIN BARRIER WITH FLANGE		DRN	POS Non Rural	\$ 6.93	\$ 8.55	\$ -	\$ 8.55	80.97%	\$ 6.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4375	DRAINABLE PLASTIC PCH W FCPL		DRN	POS Non Rural	\$ 20.85	\$ 23.43	\$ -	\$ 23.43	88.99%	\$ 20.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4385	OST SKN BARRIER SLD EXT WEAR		DRN	POS Non Rural	\$ 5.07	\$ 6.95	\$ -	\$ 6.95	72.66%	\$ 5.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4388	DRAINABLE PCH W EX WEAR BARR		DRN	POS Non Rural	\$ 4.80	\$ 5.95	\$ -	\$ 5.95	80.66%	\$ 4.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4389	DRAINABLE PCH W ST WEAR BARR		DRN	POS Non Rural	\$ 6.20	\$ 8.47	\$ -	\$ 8.47	73.17%	\$ 6.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4390	DRAINABLE PCH EX WEAR CONVEX		DRN	POS Non Rural	\$ 9.58	\$ 13.10	\$ -	\$ 13.10	73.11%	\$ 9.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4391	URINARY POUCH W EX WEAR BARR		DRN	POS Non Rural	\$ 8.60	\$ 9.64	\$ -	\$ 9.64	89.21%	\$ 8.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4393	URINE PCH W EX WEAR BAR CONV		DRN	POS Non Rural	\$ 9.38	\$ 12.33	\$ -	\$ 12.33	76.07%	\$ 9.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4394	OSTOMY POUCH LIQ DEODORANT		DRN	POS Non Rural	\$ 2.69	\$ 3.54	\$ -	\$ 3.54	75.87%	\$ 2.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4395	OSTOMY POUCH SOLID DEODORANT		DRN	POS Non Rural	\$ 0.05	\$ 0.05	\$ -	\$ 0.05	100.00%	\$ 0.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4396	PERISTOMAL HERNIA SUPPRT BLT		DRN	POS Non Rural	\$ 45.43	\$ 55.23	\$ -	\$ 55.23	82.21%	\$ 45.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4399	OSTOMY IRRIG CONE/CATH W BRS		DRN	POS Non Rural	\$ 12.24	\$ 16.74	\$ -	\$ 16.74	73.12%	\$ 12.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4400	OSTOMY IRRIGATION SET		DRN	POS Non Rural	\$ 41.45	\$ 56.68	\$ -	\$ 56.68	71.91%	\$ 41.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4402	LUBRICANT PER OUNCE		DRN	POS Non Rural	\$ 1.60	\$ 2.18	\$ -	\$ 2.18	73.34%	\$ 1.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4404	OSTOMY RING EACH		DRN	POS Non Rural	\$ 1.85	\$ 2.29	\$ -	\$ 2.29	80.79%	\$ 1.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4405	NONPECTIN BASED OSTOMY PASTE		DRN	POS Non Rural	\$ 3.76	\$ 4.66	\$ -	\$ 4.66	80.66%	\$ 3.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4406	PECTIN BASED OSTOMY PASTE		DRN	POS Non Rural	\$ 6.33	\$ 7.81	\$ -	\$ 7.81	80.94%	\$ 6.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4407	EXT WEAR OST SKN BARR <=4SQ"		DRN	POS Non Rural	\$ 9.66	\$ 11.95	\$ -	\$ 11.95	80.81%	\$ 9.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4408	EXT WEAR OST SKN BARR >4SQ"		DRN	POS Non Rural	\$ 10.87	\$ 13.47	\$ -	\$ 13.47	80.70%	\$ 10.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4409	OST SKN BARR CONVEX <=4 SQ I		DRN	POS Non Rural	\$ 6.90	\$ 8.47	\$ -	\$ 8.47	81.36%	\$ 6.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4410	OST SKN BARR EXTND >4 SQ		DRN	POS Non Rural	\$ 9.99	\$ 12.33	\$ -	\$ 12.33	81.01%	\$ 9.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4411	OST SKN BARR EXTND =4SQ		DRN	POS Non Rural	\$ 5.07	\$ 6.95	\$ -	\$ 6.95	72.37%	\$ 5.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4412	OST POUCH DRAIN HIGH OUTPUT		DRN	POS Non Rural	\$ 2.70	\$ 3.69	\$ -	\$ 3.69	72.96%	\$ 2.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4413	2 PC DRAINABLE OST POUCH		DRN	POS Non Rural	\$ 6.07	\$ 7.52	\$ -	\$ 7.52	61.89%	\$ 6.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4414	OST SKNBAR W/O CONV<=4 SQ IN		DRN	POS Non Rural	\$ 5.44	\$ 6.71	\$ -	\$ 6.71	80.98%	\$ 5.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4415	OST SKN BARR W/O CONV >4 SQI		DRN	POS Non Rural	\$ 6.59	\$ 8.18	\$ -	\$ 8.18	80.52%	\$ 6.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4416	OST PCH CLSD W BARRIER/FILTR		DRN	POS Non Rural	\$ 3.03	\$ 3.76	\$ -	\$ 3.76	80.57%	\$ 3.03	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4417	OST PCH W BAR/BLTINCONV/FLTR		DRN	POS Non Rural	\$ 4.10	\$ 5.09	\$ -	\$ 5.09	80.55%	\$ 4.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4418	OST PCH CLSD W/O BAR W FILTR		DRN	POS Non Rural	\$ 1.99	\$ 2.47	\$ -	\$ 2.47	80.38%	\$ 1.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4419	OST PCH FOR BAR W FLANGE/FLT		DRN	POS Non Rural	\$ 1.90	\$ 2.35	\$ -	\$ 2.35	80.78%	\$ 1.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4422	OST POUCH ABSORBENT MATERIAL		DRN	POS Non Rural	\$ 0.13	\$ 0.15	\$ -	\$ 0.15	86.67%	\$ 0.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4423	OST PCH FOR BAR W LK FL/FLTR		DRN	POS Non Rural	\$ 2.25	\$ 2.53	\$ -	\$ 2.53	88.91%	\$ 2.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4424	OST PCH DRAIN W BAR & FILTER		DRN	POS Non Rural	\$ 5.23	\$ 6.49	\$ -	\$ 6.49	80.57%	\$ 5.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4425	OST PCH DRAIN FOR BARRIER FL		DRN	POS Non Rural	\$ 3.96	\$ 4.88	\$ -	\$ 4.88	80.98%	\$ 3.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4426	OST PCH DRAIN 2 PIECE SYSTEM		DRN	POS Non Rural	\$ 2.78	\$ 3.72	\$ -	\$ 3.72	74.73%	\$ 2.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4427	OST PCH DRAIN/BARR LK FLNG/F		DRN	POS Non Rural	\$ 2.77	\$ 3.81	\$ -	\$ 3.81	72.68%	\$ 2.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4428	URINE OST POUCH W FAUCET/TAP		DRN	POS Non Rural	\$ 7.14	\$ 8.90	\$ -	\$ 8.90	80.22%	\$ 7.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4430	OST URINE PCH W B/BLTIN CONV		DRN	POS Non Rural	\$ 9.34	\$ 11.62	\$ -	\$ 11.62	80.38%	\$ 9.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4432	OS PCH URINE W BAR/FANGE/TAP		DRN	POS Non Rural	\$ 3.96	\$ 4.89	\$ -	\$ 4.89	80.98%	\$ 3.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4433	URINE OST PCH BAR W LOCK FLN		DRN	POS Non Rural	\$ 3.66	\$ 4.58	\$ -	\$ 4.58	79.90%	\$ 3.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4455	ADHESIVE REMOVER PER OUNCE		DRN	POS Non Rural	\$ 1.60	\$ 1.94	\$ -	\$ 1.94	82.22%	\$ 1.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4456	ADHESIVE REMOVER, WIPES		DRN	POS Non Rural	\$ 0.23	\$ 0.33	\$ -	\$ 0.33	69.57%	\$ 0.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4461	SURGICL DRESS HOLD NON-REUSE		DRN	POS Non Rural	\$ 3.28	\$ 4.50	\$ -	\$ 4.50	72.89%	\$ 3.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4481	TRACHEOSTOMA FILTER		DRN	POS Non Rural	\$ 0.46	\$ 0.50	\$ -	\$ 0.50	91.56%	\$ 0.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4556	ELECTRODES, PAIR		DRN	POS Non Rural	\$ 12.13	\$ 16.57	\$ -	\$ 16.57	72.94%	\$ 12.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4557	LEAD WIRES, PAIR		DRR	POS Rural	\$ 15.76	\$ 11.44	\$ 21.04	\$ 21.04	74.67%	\$ 15.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4557	LEAD WIRES, PAIR		DRN	POS Non Rural	\$ 14.03	\$ 11.44	\$ 21.04	\$ 11.44	122.87%	\$ 10.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4561	PESSARY RUBBER, ANY TYPE		DRN	POS Non Rural	\$ 22.73	\$ 28.19	\$ -	\$ 28.19	80.63%	\$ 22.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4562	PESSARY, NON RUBBER,ANY TYPE		DRN	POS Non Rural	\$ 51.36	\$ 70.21	\$ -	\$ 70.21	73.15%	\$ 51.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4565	SLINGS		DRN	POS Non Rural	\$ 9.67	\$ 10.51	\$ -	\$ 10.51	91.90%	\$ 9.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4595	TENS SUPPL 2 LEAD PER MONTH		DRR	POS Rural	\$ 19.71	\$ 12.26	\$ 26.29	\$ 26.29	74.79%	\$ 19.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4595	TENS SUPPL 2 LEAD PER MONTH		DRN	POS Non Rural	\$ 14.23	\$ 12.26	\$ 26.29	\$ 12.26	116.25%	\$ 11.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4604	TUBING WITH HEATING ELEMENT	NU	DRR	POS Rural	\$ 49.34	\$ 47.82	\$ 65.49	\$ 65.49	74.87%	\$ 49.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4604	TUBING WITH HEATING ELEMENT	NU	DRN	POS Non Rural	\$ 48.98	\$ 47.82	\$ 65.49	\$ 47.82	102.49%	\$ 45.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4605	TRACH SUCTION CATH CLOSE SYS	NU	DRN	POS Non Rural	\$ 16.80	\$ 22.38	\$ -	\$ 22.38	74.21%	\$ 16.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4608	TRANSTRACHEAL OXYGEN CATH		DRN	POS Non Rural	\$ 55.18	\$ 68.40	\$ -	\$ 68.40	80.67%	\$ 55.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4614	HAND-HELD PEFR METER		DRN	POS Non Rural	\$ 23.74	\$ 32.45	\$ -	\$ 32.45	73.02%	\$ 23.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4615	CANNULA NASAL		DRN	POS Non Rural	\$ 0.78	\$ 1.00	\$ -	\$ 1.00	77.30%	\$ 0.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4616	TUBING (OXYGEN) PER FOOT		DRN	POS Non Rural	\$ 0.07	\$ 0.08	\$ -	\$ 0.08	87.36%	\$ 0.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4617	MOUTH PIECE		DRN	POS Non Rural	\$ 3.10	\$ 4.23	\$ -	\$ 4.23	73.29%	\$ 3.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4618	BREATHING CIRCUITS	NU	DRN	POS Non Rural	\$ 9.53	\$ 12.14	\$ -	\$ 12.14	76.93%	\$ 9.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4620	VARIABLE CONCENTRATION MASK		DRN	POS Non Rural	\$ 0.68	\$ 0.87	\$ -	\$ 0.87	78.16%	\$ 0.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4623	TRACHEOSTOMY INNER CANNULA		DRN	POS Non Rural	\$ 6.54	\$ 8.95	\$ -	\$ 8.95	73.06%	\$ 6.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A4624	TRACHEAL SUCTION TUBE	NU	DRN	POS Non Rural	\$ 2.70	\$ 3.60	\$ -	\$ 3.60	74.93%	\$ 2.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4625	TRACH CARE KIT FOR NEW TRACH		DRN	POS Non Rural	\$ 6.92	\$ 9.45	\$ -	\$ 9.45	73.18%	\$ 6.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4628	OROPHARYNGEAL SUCTION CATH	NU	DRN	POS Non Rural	\$ 3.84	\$ 5.11	\$ -	\$ 5.11	74.92%	\$ 3.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4629	TRACHEOSTOMY CARE KIT		DRN	POS Non Rural	\$ 4.64	\$ 6.35	\$ -	\$ 6.35	72.12%	\$ 4.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4630	REPL BAT T.E.N.S. OWN BY PT	NU	DRN	POS Non Rural	\$ 6.90	\$ 8.51	\$ -	\$ 8.51	81.08%	\$ 6.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4637	REPL TIP CANE/CRUTCH/WALKER	NU	DRR	POS Rural	\$ 1.95	\$ 2.08	\$ 2.30	\$ 2.30	84.78%	\$ 1.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4637	REPL TIP CANE/CRUTCH/WALKER	NU	DRN	POS Non Rural	\$ 1.93	\$ 2.08	\$ 2.30	\$ 2.08	92.79%	\$ 1.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A4640	ALTERNATING PRESSURE PAD	NU	DRN	POS Non Rural	\$ 60.63	\$ 62.75	\$ 77.45	\$ 62.75	96.62%	\$ 59.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5054	CLSD OSTOMY POUCH W/FLANGE		DRN	POS Non Rural	\$ 1.79	\$ 2.45	\$ -	\$ 2.45	72.91%	\$ 1.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5055	STOMA CAP		DRN	POS Non Rural	\$ 1.41	\$ 1.92	\$ -	\$ 1.92	73.41%	\$ 1.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5056	1 PC OST POUCH W FILTER		DRN	POS Non Rural	\$ 4.66	\$ 6.38	\$ -	\$ 6.38	73.03%	\$ 4.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5057	1 PC OST POU W BUILT-IN CONV		DRN	POS Non Rural	\$ 9.58	\$ 13.10	\$ -	\$ 13.10	73.12%	\$ 9.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5061	POUCH DRAINABLE W BARRIER AT		DRN	POS Non Rural	\$ 4.05	\$ 4.82	\$ -	\$ 4.82	83.99%	\$ 4.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5062	DRNBLE OSTOMY POUCH W/O BARR		DRN	POS Non Rural	\$ 2.45	\$ 3.05	\$ -	\$ 3.05	80.33%	\$ 2.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5063	DRAIN OSTOMY POUCH W/FLANGE		DRN	POS Non Rural	\$ 2.70	\$ 3.69	\$ -	\$ 3.69	73.16%	\$ 2.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5071	URINARY POUCH W/BARRIER		DRN	POS Non Rural	\$ 5.99	\$ 8.20	\$ -	\$ 8.20	73.05%	\$ 5.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5073	URINARY POUCH ON BARR W/FLNG		DRN	POS Non Rural	\$ 3.35	\$ 4.15	\$ -	\$ 4.15	80.72%	\$ 3.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5105	URINARY SUSPENSORY		DRN	POS Non Rural	\$ 39.69	\$ 49.21	\$ -	\$ 49.21	80.65%	\$ 39.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5112	URINARY LEG BAG		DRN	POS Non Rural	\$ 32.96	\$ 40.85	\$ -	\$ 40.85	80.52%	\$ 32.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5114	FOAM/FABRIC LEG STRAP		DRN	POS Non Rural	\$ 8.95	\$ 12.21	\$ -	\$ 12.21	73.20%	\$ 8.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A5121	SOLID SKIN BARRIER 6X6		DRN	POS Non Rural	\$ 8.16	\$ 10.17	\$ -	\$ 10.17	80.15%	\$ 8.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5131	APPLIANCE CLEANER		DRN	POS Non Rural	\$ 15.82	\$ 21.63	\$ -	\$ 21.63	73.13%	\$ 15.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5200	PERCUTANEOUS CATHETER ANCHOR		DRN	POS Non Rural	\$ 12.70	\$ 15.43	\$ -	\$ 15.43	82.31%	\$ 12.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5500	DIAB SHOE FOR DENSITY INSERT		DRN	POS Non Rural	\$ 68.20	\$ 86.77	\$ -	\$ 86.77	78.52%	\$ 68.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5501	DIABETIC CUSTOM MOLDED SHOE		DRN	POS Non Rural	\$ 204.61	\$ 260.22	\$ -	\$ 260.22	78.62%	\$ 204.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5503	DIABETIC SHOE W/ROLLER/ROCKR		DRN	POS Non Rural	\$ 31.73	\$ 44.25	\$ -	\$ 44.25	71.64%	\$ 31.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5504	DIABETIC SHOE WITH WEDGE		DRN	POS Non Rural	\$ 31.73	\$ 44.25	\$ -	\$ 44.25	71.71%	\$ 31.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5505	DIAB SHOE W/METATARSAL BAR		DRN	POS Non Rural	\$ 31.73	\$ 44.25	\$ -	\$ 44.25	71.71%	\$ 31.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5506	DIABETIC SHOE W/OFF SET HEEL		DRN	POS Non Rural	\$ 31.73	\$ 44.25	\$ -	\$ 44.25	71.71%	\$ 31.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5507	MODIFICATION DIABETIC SHOE		DRN	POS Non Rural	\$ 31.73	\$ 44.25	\$ -	\$ 44.25	71.71%	\$ 31.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5512	MULTI DEN INSERT DIRECT FORM		DRN	POS Non Rural	\$ 25.88	\$ 35.39	\$ -	\$ 35.39	73.06%	\$ 25.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A5513	MULTI DEN INSERT CUSTOM MOLD		DRN	POS Non Rural	\$ 38.62	\$ 52.81	\$ -	\$ 52.81	73.09%	\$ 38.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6010	COLLAGEN BASED WOUND FILLER		DRN	POS Non Rural	\$ 34.74	\$ 42.26	\$ -	\$ 42.26	82.20%	\$ 34.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6011	COLLAGEN GEL/PASTE WOUND FIL		DRN	POS Non Rural	\$ 2.54	\$ 3.12	\$ -	\$ 3.12	81.41%	\$ 2.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6021	COLLAGEN DRESSING <=16 SQ IN		DRN	POS Non Rural	\$ 23.23	\$ 28.69	\$ -	\$ 28.69	80.97%	\$ 23.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6022	COLLAGEN DRSG>16<=48 SQ IN		DRN	POS Non Rural	\$ 23.23	\$ 28.69	\$ -	\$ 28.69	80.77%	\$ 23.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6154	WOUND POUCH EACH		DRN	POS Non Rural	\$ 15.81	\$ 19.62	\$ -	\$ 19.62	80.58%	\$ 15.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6196	ALGINATE DRESSING <=16 SQ IN		DRN	POS Non Rural	\$ 7.35	\$ 10.04	\$ -	\$ 10.04	73.19%	\$ 7.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6197	ALGINATE DRSG >16 <=48 SQ IN		DRN	POS Non Rural	\$ 18.93	\$ 22.44	\$ -	\$ 22.44	84.36%	\$ 18.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6199	ALGINATE DRSG WOUND FILLER		DRN	POS Non Rural	\$ 6.27	\$ 7.20	\$ -	\$ 7.20	87.08%	\$ 6.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A6203	COMPOSITE DRSG <= 16 SQ IN		DRN	POS Non Rural	\$ 3.68	\$ 4.60	\$ -	\$ 4.60	79.95%	\$ 3.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6204	COMPOSITE DRSG >16<=48 SQ IN		DRN	POS Non Rural	\$ 6.21	\$ 8.49	\$ -	\$ 8.49	73.14%	\$ 6.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6207	CONTACT LAYER >16<= 48 SQ IN		DRN	POS Non Rural	\$ 8.45	\$ 10.02	\$ -	\$ 10.02	82.63%	\$ 8.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6209	FOAM DRSG <=16 SQ IN W/O BDR		DRN	POS Non Rural	\$ 7.46	\$ 10.20	\$ -	\$ 10.20	72.97%	\$ 7.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6210	FOAM DRG >16<=48 SQ IN W/O B		DRN	POS Non Rural	\$ 19.89	\$ 27.19	\$ -	\$ 27.19	73.13%	\$ 19.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6211	FOAM DRG > 48 SQ IN W/O BRDR		DRN	POS Non Rural	\$ 35.64	\$ 40.08	\$ -	\$ 40.08	88.90%	\$ 35.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6212	FOAM DRG <=16 SQ IN W/BORDER		DRN	POS Non Rural	\$ 9.69	\$ 13.25	\$ -	\$ 13.25	72.80%	\$ 9.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6214	FOAM DRG > 48 SQ IN W/BORDER		DRN	POS Non Rural	\$ 11.55	\$ 14.05	\$ -	\$ 14.05	82.21%	\$ 11.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6216	NON-STERILE GAUZE<=16 SQ IN		DRN	POS Non Rural	\$ 0.05	\$ 0.05	\$ -	\$ 0.05	100.00%	\$ 0.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6219	GAUZE <= 16 SQ IN W/BORDER		DRN	POS Non Rural	\$ 3.00	\$ 1.30	\$ -	\$ 1.30	230.86%	\$ 1.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6220	GAUZE >16 <=48 SQ IN W/BORDR		DRN	POS Non Rural	\$ 9.57	\$ 3.54	\$ -	\$ 3.54	270.44%	\$ 3.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6222	GAUZE <=16 IN NO W/SAL W/O B		DRN	POS Non Rural	\$ 2.12	\$ 2.91	\$ -	\$ 2.91	72.84%	\$ 2.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6223	GAUZE >16<=48 NO W/SAL W/O B		DRN	POS Non Rural	\$ 2.43	\$ 3.31	\$ -	\$ 3.31	73.41%	\$ 2.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6224	GAUZE > 48 IN NO W/SAL W/O B		DRN	POS Non Rural	\$ 3.60	\$ 4.91	\$ -	\$ 4.91	73.32%	\$ 3.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6229	GAUZE >16<=48 SQ IN WATR/SAL		DRN	POS Non Rural	\$ 3.60	\$ 4.91	\$ -	\$ 4.91	73.32%	\$ 3.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6231	HYDROGEL DSG<=16 SQ IN		DRN	POS Non Rural	\$ 5.66	\$ 6.40	\$ -	\$ 6.40	88.44%	\$ 5.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6234	HYDROCOLLD DRG <=16 W/O BDR		DRN	POS Non Rural	\$ 6.97	\$ 8.94	\$ -	\$ 8.94	77.76%	\$ 6.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6235	HYDROCOLLD DRG >16<=48 W/O B		DRN	POS Non Rural	\$ 16.78	\$ 22.95	\$ -	\$ 22.95	73.11%	\$ 16.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6237	HYDROCOLLD DRG <=16 IN W/BDR		DRN	POS Non Rural	\$ 7.91	\$ 10.79	\$ -	\$ 10.79	73.30%	\$ 7.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6238	HYDROCOLLD DRG >16<=48 W/BDR		DRN	POS Non Rural	\$ 22.75	\$ 31.11	\$ -	\$ 31.11	73.13%	\$ 22.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A6240	HYDROCOLLD DRG FILLER PASTE		DRN	POS Non Rural	\$ 12.23	\$ 16.71	\$ -	\$ 16.71	73.16%	\$ 12.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6242	HYDROGEL DRG <=16 IN W/O BDR		DRN	POS Non Rural	\$ 6.66	\$ 8.26	\$ -	\$ 8.26	80.63%	\$ 6.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6243	HYDROGEL DRG >16<=48 W/O BDR		DRN	POS Non Rural	\$ 12.30	\$ 16.82	\$ -	\$ 16.82	73.13%	\$ 12.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6244	HYDROGEL DRG >48 IN W/O BDR		DRN	POS Non Rural	\$ 44.08	\$ 53.60	\$ -	\$ 53.60	82.24%	\$ 44.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6245	HYDROGEL DRG <= 16 IN W/BDR		DRN	POS Non Rural	\$ 8.35	\$ 9.92	\$ -	\$ 9.92	84.14%	\$ 8.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6246	HYDROGEL DRG >16<=48 IN W/B		DRN	POS Non Rural	\$ 11.42	\$ 13.55	\$ -	\$ 13.55	84.25%	\$ 11.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6248	HYDROGEL DRSG GEL FILLER		DRN	POS Non Rural	\$ 15.90	\$ 22.17	\$ -	\$ 22.17	71.71%	\$ 15.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6251	ABSORPT DRG <=16 SQ IN W/O B		DRN	POS Non Rural	\$ 2.20	\$ 2.71	\$ -	\$ 2.71	73.51%	\$ 2.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6252	ABSORPT DRG >16 <=48 W/O BDR		DRN	POS Non Rural	\$ 3.58	\$ 4.44	\$ -	\$ 4.44	80.63%	\$ 3.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6253	ABSORPT DRG > 48 SQ IN W/O B		DRN	POS Non Rural	\$ 6.99	\$ 8.64	\$ -	\$ 8.64	80.90%	\$ 6.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6254	ABSORPT DRG <=16 SQ IN W/BDR		DRN	POS Non Rural	\$ 1.33	\$ 1.63	\$ -	\$ 1.63	81.60%	\$ 1.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6257	TRANSPARENT FILM <= 16 SQ IN		DRN	POS Non Rural	\$ 1.53	\$ 2.09	\$ -	\$ 2.09	72.78%	\$ 1.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6258	TRANSPARENT FILM >16<=48 IN		DRN	POS Non Rural	\$ 4.29	\$ 5.88	\$ -	\$ 5.88	72.95%	\$ 4.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6259	TRANSPARENT FILM > 48 SQ IN		DRN	POS Non Rural	\$ 13.23	\$ 14.92	\$ -	\$ 14.92	88.67%	\$ 13.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6266	IMPREG GAUZE NO H2O/SAL/YARD		DRN	POS Non Rural	\$ 2.20	\$ 2.61	\$ -	\$ 2.61	84.29%	\$ 2.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6402	STERILE GAUZE <= 16 SQ IN		DRN	POS Non Rural	\$ 0.13	\$ 0.15	\$ -	\$ 0.15	86.25%	\$ 0.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6403	STERILE GAUZE>16 <= 48 SQ IN		DRN	POS Non Rural	\$ 0.53	\$ 0.56	\$ -	\$ 0.56	94.64%	\$ 0.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6407	PACKING STRIPS, NON-IMPREG		DRN	POS Non Rural	\$ 2.09	\$ 2.55	\$ -	\$ 2.55	81.95%	\$ 2.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6441	PAD BAND W>=3" <5"/YD		DRN	POS Non Rural	\$ 0.81	\$ 0.93	\$ -	\$ 0.93	87.08%	\$ 0.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6442	CONFORM BAND N/S W<3"/YD		DRN	POS Non Rural	\$ 0.19	\$ 0.22	\$ -	\$ 0.22	86.36%	\$ 0.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A6443	CONFORM BAND N/S W>=3"<5"/YD		DRN	POS Non Rural	\$ 0.35	\$ 0.38	\$ -	\$ 0.38	92.09%	\$ 0.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6444	CONFORM BAND N/S W>=5"/YD		DRN	POS Non Rural	\$ 0.69	\$ 0.76	\$ -	\$ 0.76	90.79%	\$ 0.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6445	CONFORM BAND S W <3"/YD		DRN	POS Non Rural	\$ 0.39	\$ 0.43	\$ -	\$ 0.43	89.94%	\$ 0.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6446	CONFORM BAND S W>=3" <5"/YD		DRN	POS Non Rural	\$ 0.49	\$ 0.53	\$ -	\$ 0.53	92.45%	\$ 0.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6447	CONFORM BAND S W >=5"/YD		DRN	POS Non Rural	\$ 0.81	\$ 0.93	\$ -	\$ 0.93	87.10%	\$ 0.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6448	LT COMPRES BAND <3"/YD		DRN	POS Non Rural	\$ 1.41	\$ 1.57	\$ -	\$ 1.57	89.81%	\$ 1.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6449	LT COMPRES BAND >=3" <5"/YD		DRN	POS Non Rural	\$ 2.14	\$ 2.39	\$ -	\$ 2.39	89.53%	\$ 2.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6450	LT COMPRES BAND >=5"/YD		DRN	POS Non Rural	\$ 1.74	\$ 2.39	\$ -	\$ 2.39	72.79%	\$ 1.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6452	HIGH COMPRES BAND W>=3"<5"YD		DRN	POS Non Rural	\$ 7.13	\$ 8.05	\$ -	\$ 8.05	88.57%	\$ 7.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6453	SELF-ADHER BAND W <3"/YD		DRN	POS Non Rural	\$ 0.74	\$ 0.86	\$ -	\$ 0.86	86.04%	\$ 0.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6454	SELF-ADHER BAND W>=3" <5"/YD		DRN	POS Non Rural	\$ 0.95	\$ 1.07	\$ -	\$ 1.07	88.78%	\$ 0.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6455	SELF-ADHER BAND >=5"/YD		DRN	POS Non Rural	\$ 1.70	\$ 1.90	\$ -	\$ 1.90	89.47%	\$ 1.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6456	ZINC PASTE BAND W >=3"<5"/YD		DRN	POS Non Rural	\$ 1.56	\$ 1.71	\$ -	\$ 1.71	91.23%	\$ 1.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A6457	TUBULAR DRESSING		DRN	POS Non Rural	\$ 1.13	\$ 1.55	\$ -	\$ 1.55	72.87%	\$ 1.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7000	DISPOSABLE CANISTER FOR PUMP	NU	DRR	POS Rural	\$ 8.25	\$ 10.33	\$ 11.02	\$ 11.02	74.82%	\$ 8.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7000	DISPOSABLE CANISTER FOR PUMP	NU	DRN	POS Non Rural	\$ 7.88	\$ 10.33	\$ 11.02	\$ 10.33	76.25%	\$ 7.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7001	NONDISPOSABLE PUMP CANISTER	NU	DRN	POS Non Rural	\$ 30.38	\$ 40.47	\$ -	\$ 40.47	74.27%	\$ 30.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7002	TUBING USED W SUCTION PUMP	NU	DEF	Default	\$ 3.34	\$ 4.45	\$ -	\$ 4.45	74.67%	\$ 3.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7003	NEBULIZER ADMINISTRATION SET	NU	DRR	POS Rural	\$ 2.14	\$ 1.76	\$ 2.86	\$ 2.86	74.45%	\$ 2.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7003	NEBULIZER ADMINISTRATION SET	NU	DRN	POS Non Rural	\$ 1.99	\$ 1.76	\$ 2.86	\$ 1.76	113.54%	\$ 1.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A7004	DISPOSABLE NEBULIZER SML VOL	NU	DRR	POS Rural	\$ 1.41	\$ 1.43	\$ 1.87	\$ 1.87	75.24%	\$ 1.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7004	DISPOSABLE NEBULIZER SML VOL	NU	DRN	POS Non Rural	\$ 1.40	\$ 1.43	\$ 1.87	\$ 1.43	97.89%	\$ 1.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7005	NONDISPOSABLE NEBULIZER SET	NU	DRR	POS Rural	\$ 19.18	\$ 15.43	\$ 25.59	\$ 25.59	74.76%	\$ 19.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7005	NONDISPOSABLE NEBULIZER SET	NU	DRN	POS Non Rural	\$ 18.08	\$ 15.43	\$ 25.59	\$ 15.43	117.21%	\$ 14.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7006	FILTERED NEBULIZER ADMIN SET	NU	DRR	POS Rural	\$ 8.38	\$ 9.07	\$ 11.20	\$ 11.20	74.82%	\$ 8.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7006	FILTERED NEBULIZER ADMIN SET	NU	DRN	POS Non Rural	\$ 7.51	\$ 9.07	\$ 11.20	\$ 9.07	82.80%	\$ 7.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7010	DISPOSABLE CORRUGATED TUBING	NU	DRR	POS Rural	\$ 17.72	\$ 18.80	\$ 23.68	\$ 23.68	74.83%	\$ 17.72	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7010	DISPOSABLE CORRUGATED TUBING	NU	DRN	POS Non Rural	\$ 15.64	\$ 18.80	\$ 23.68	\$ 18.80	83.14%	\$ 15.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7012	NEBULIZER WATER COLLEC DEVIC	NU	DRR	POS Rural	\$ 3.30	\$ 3.40	\$ 4.41	\$ 4.41	74.83%	\$ 3.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7012	NEBULIZER WATER COLLEC DEVIC	NU	DRN	POS Non Rural	\$ 2.87	\$ 3.40	\$ 4.41	\$ 3.40	84.37%	\$ 2.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7013	DISPOSABLE COMPRESSOR FILTER	NU	DRR	POS Rural	\$ 0.64	\$ 0.64	\$ 0.84	\$ 0.84	76.07%	\$ 0.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7013	DISPOSABLE COMPRESSOR FILTER	NU	DRN	POS Non Rural	\$ 0.63	\$ 0.64	\$ 0.84	\$ 0.64	98.38%	\$ 0.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7015	AEROSOL MASK USED W NEBULIZE	NU	DRR	POS Rural	\$ 1.57	\$ 1.56	\$ 2.11	\$ 2.11	74.36%	\$ 1.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7015	AEROSOL MASK USED W NEBULIZE	NU	DRN	POS Non Rural	\$ 1.35	\$ 1.56	\$ 2.11	\$ 1.56	86.53%	\$ 1.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7016	NEBULIZER DOME & MOUTHPIECE	NU	DRN	POS Non Rural	\$ 7.41	\$ 9.45	\$ -	\$ 9.45	78.41%	\$ 7.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7018	WATER DISTILLED W/NEBULIZER		DRR	POS Rural	\$ 0.35	\$ 0.37	\$ 0.43	\$ 0.43	81.40%	\$ 0.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7018	WATER DISTILLED W/NEBULIZER		DRN	POS Non Rural	\$ 0.35	\$ 0.37	\$ 0.43	\$ 0.37	94.34%	\$ 0.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7027	COMBINATION ORAL/NASAL MASK	NU	DRN	POS Non Rural	\$ 150.96	\$ 144.34	\$ 205.88	\$ 144.34	104.60%	\$ 137.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7028	REPL ORAL CUSHION COMBO MASK	NU	DRN	POS Non Rural	\$ 39.80	\$ 39.37	\$ 55.87	\$ 39.37	101.09%	\$ 37.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7030	CPAP FULL FACE MASK	NU	DRR	POS Rural	\$ 126.97	\$ 106.80	\$ 169.53	\$ 169.53	74.47%	\$ 126.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A7030	CPAP FULL FACE MASK	NU	DRN	POS Non Rural	\$ 119.70	\$ 106.80	\$ 169.53	\$ 106.80	112.37%	\$ 101.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7031	REPLACEMENT FACEMASK INTERFA	NU	DRR	POS Rural	\$ 47.41	\$ 40.68	\$ 63.31	\$ 63.31	74.30%	\$ 47.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7031	REPLACEMENT FACEMASK INTERFA	NU	DRN	POS Non Rural	\$ 45.05	\$ 40.68	\$ 63.31	\$ 40.68	110.90%	\$ 38.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7032	REPLACEMENT NASAL CUSHION	NU	DRR	POS Rural	\$ 27.18	\$ 22.63	\$ 36.29	\$ 36.29	74.65%	\$ 27.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7032	REPLACEMENT NASAL CUSHION	NU	DRN	POS Non Rural	\$ 25.51	\$ 22.63	\$ 36.29	\$ 22.63	113.18%	\$ 21.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7033	REPLACEMENT NASAL PILLOWS	NU	DRR	POS Rural	\$ 20.16	\$ 18.59	\$ 26.92	\$ 26.92	74.02%	\$ 20.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7033	REPLACEMENT NASAL PILLOWS	NU	DRN	POS Non Rural	\$ 19.68	\$ 18.59	\$ 26.92	\$ 18.59	106.04%	\$ 17.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7034	NASAL APPLICATION DEVICE	NU	DRR	POS Rural	\$ 79.27	\$ 68.04	\$ 105.83	\$ 105.83	74.63%	\$ 79.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7034	NASAL APPLICATION DEVICE	NU	DRN	POS Non Rural	\$ 75.59	\$ 68.04	\$ 105.83	\$ 68.04	111.44%	\$ 64.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7035	POS AIRWAY PRESS HEADGEAR	NU	DRR	POS Rural	\$ 25.34	\$ 22.09	\$ 33.84	\$ 33.84	74.60%	\$ 25.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7035	POS AIRWAY PRESS HEADGEAR	NU	DRN	POS Non Rural	\$ 24.22	\$ 22.09	\$ 33.84	\$ 22.09	109.93%	\$ 20.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7036	POS AIRWAY PRESS CHINSTRAP	NU	DRR	POS Rural	\$ 12.38	\$ 12.37	\$ 16.26	\$ 16.26	75.91%	\$ 12.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7036	POS AIRWAY PRESS CHINSTRAP	NU	DRN	POS Non Rural	\$ 12.29	\$ 12.37	\$ 16.26	\$ 12.37	99.31%	\$ 11.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7037	POS AIRWAY PRESSURE TUBING	NU	DRR	POS Rural	\$ 23.89	\$ 14.73	\$ 31.88	\$ 31.88	74.47%	\$ 23.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7037	POS AIRWAY PRESSURE TUBING	NU	DRN	POS Non Rural	\$ 20.38	\$ 14.73	\$ 31.88	\$ 14.73	140.25%	\$ 13.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7038	POS AIRWAY PRESSURE FILTER	NU	DRR	POS Rural	\$ 3.42	\$ 2.52	\$ 4.56	\$ 4.56	73.93%	\$ 3.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7038	POS AIRWAY PRESSURE FILTER	NU	DRN	POS Non Rural	\$ 3.07	\$ 2.52	\$ 4.56	\$ 2.52	123.02%	\$ 2.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7039	FILTER, NON DISPOSABLE W PAP	NU	DRR	POS Rural	\$ 8.73	\$ 7.31	\$ 11.65	\$ 11.65	74.37%	\$ 8.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7039	FILTER, NON DISPOSABLE W PAP	NU	DRN	POS Non Rural	\$ 8.22	\$ 7.31	\$ 11.65	\$ 7.31	112.93%	\$ 6.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7045	REPL EXHALATION PORT FOR PAP	NU	DRR	POS Rural	\$ 14.50	\$ 13.34	\$ 19.38	\$ 19.38	74.82%	\$ 14.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	A7045	REPL EXHALATION PORT FOR PAP	NU	DRN	POS Non Rural	\$ 13.88	\$ 13.34	\$ 19.38	\$ 13.34	104.42%	\$ 12.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7046	REPL WATER CHAMBER, PAP DEV	NU	DRR	POS Rural	\$ 15.73	\$ 15.97	\$ 20.22	\$ 20.22	77.56%	\$ 15.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7046	REPL WATER CHAMBER, PAP DEV	NU	DRN	POS Non Rural	\$ 15.62	\$ 15.97	\$ 20.22	\$ 15.97	97.75%	\$ 15.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7501	TRACHEOSTOMA VALVE W DIAPHRA		DRN	POS Non Rural	\$ 117.87	\$ 143.29	\$ -	\$ 143.29	82.26%	\$ 117.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7504	TRACHEOSTOMA HMES FILTER		DRN	POS Non Rural	\$ 0.75	\$ 0.93	\$ -	\$ 0.93	72.16%	\$ 0.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7506	HMES/TRACHVALVE ADHESIVEDISK		DRN	POS Non Rural	\$ 0.40	\$ 0.44	\$ -	\$ 0.44	90.91%	\$ 0.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7507	INTEGRATED FILTER & HOLDER		DRN	POS Non Rural	\$ 2.78	\$ 3.41	\$ -	\$ 3.41	81.44%	\$ 2.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7508	HOUSING & INTEGRATED ADHESIV		DRN	POS Non Rural	\$ 3.20	\$ 3.92	\$ -	\$ 3.92	81.61%	\$ 3.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7509	HEAT & MOISTURE EXCHANGE SYS		DRN	POS Non Rural	\$ 1.60	\$ 1.92	\$ -	\$ 1.92	83.32%	\$ 1.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7522	TRACH/LARYN TUBE STAINLESS		DRN	POS Non Rural	\$ 50.67	\$ 61.62	\$ -	\$ 61.62	82.14%	\$ 50.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7524	TRACHEOSTOMA STENT/STUD/BTTN		DRN	POS Non Rural	\$ 86.86	\$ 105.63	\$ -	\$ 105.63	82.22%	\$ 86.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7525	TRACHEOSTOMY MASK		DRN	POS Non Rural	\$ 2.28	\$ 2.81	\$ -	\$ 2.81	80.59%	\$ 2.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7526	TRACHEOSTOMY TUBE COLLAR		DRN	POS Non Rural	\$ 3.78	\$ 4.63	\$ -	\$ 4.63	80.99%	\$ 3.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A7527	TRACH/LARYN TUBE PLUG/STOP		DRN	POS Non Rural	\$ 4.02	\$ 4.88	\$ -	\$ 4.88	82.29%	\$ 4.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A8000	SOFT PROTECT HELMET PREFAB	NU	DRN	POS Non Rural	\$ 153.05	\$ 209.26	\$ -	\$ 209.26	72.86%	\$ 153.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	A8001	HARD PROTECT HELMET PREFAB	NU	DRN	POS Non Rural	\$ 153.05	\$ 209.26	\$ -	\$ 209.26	73.13%	\$ 153.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0113	CRANIAL CERVICAL TORTICOLLIS		DEF	Default	\$ 275.42	\$ 339.24	\$ -	\$ 339.24	81.19%	\$ 275.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0120	CERV FLEX N/ADJ FOAM PRE OTS		DEF	Default	\$ 21.36	\$ 29.20	\$ -	\$ 29.20	72.84%	\$ 21.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0140	CERVICAL SEMI-RIGID ADJUSTAB		DEF	Default	\$ 58.16	\$ 79.52	\$ -	\$ 79.52	73.07%	\$ 58.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0150	CERV SEMI-RIG ADJ MOLDED CHN		DEF	Default	\$ 86.94	\$ 118.89	\$ -	\$ 118.89	73.13%	\$ 86.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L0160	CERV SR WIRE OCC/MAN PRE OTS		DEF	Default	\$ 126.02	\$ 172.31	\$ -	\$ 172.31	73.06%	\$ 126.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0172	CERV COL SR FOAM 2PC PRE OTS		DEF	Default	\$ 106.12	\$ 145.10	\$ -	\$ 145.10	72.84%	\$ 106.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0174	CERV SR 2PC THOR EXT PRE OTS		DEF	Default	\$ 258.54	\$ 353.50	\$ -	\$ 353.50	72.75%	\$ 258.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0180	CER POST COL OCC/MAN SUP ADJ		DEF	Default	\$ 298.14	\$ 407.64	\$ -	\$ 407.64	73.12%	\$ 298.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0190	CERV COLLAR SUPP ADJ CERV BA		DEF	Default	\$ 413.88	\$ 565.88	\$ -	\$ 565.88	73.12%	\$ 413.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0200	CERV COL SUPP ADJ BAR & THOR		DEF	Default	\$ 449.49	\$ 614.56	\$ -	\$ 614.56	73.13%	\$ 449.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0450	TLSO FLEX TRUNK/THOR PRE OTS		DEF	Default	\$ 116.67	\$ 90.05	\$ 164.19	\$ 90.05	129.56%	\$ 85.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0454	TLSO TRNK SJ-T9 PRE CST		DEF	Default	\$ 334.93	\$ 412.54	\$ -	\$ 412.54	80.46%	\$ 334.93	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0456	TLSO FLEX TRNK SJ-SS PRE CST		DEF	Default	\$ 960.53	\$ 1,183.09	\$ -	\$ 1,183.09	80.77%	\$ 960.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0457	TLSO FLEX TRNK SJ-SS PRE OTS		DEF	Default	\$ 659.38	\$ 479.36	\$ 956.66	\$ 479.36	137.81%	\$ 455.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0460	TLSO 2 SHL SYMPHYS-STERN CST		DEF	Default	\$ 969.46	\$ 1,194.10	\$ -	\$ 1,194.10	81.18%	\$ 969.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0464	TLSO 4MOD SACRO-SCAP PRE		DEF	Default	\$ 1,435.49	\$ 1,768.15	\$ -	\$ 1,768.15	81.18%	\$ 1,435.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0467	TLSO R FRAM SOFT PRE OTS		DEF	Default	\$ 250.18	\$ 187.47	\$ 357.53	\$ 187.47	133.45%	\$ 178.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0472	TLSO RIGID FRAME HYPEREX PRE		DEF	Default	\$ 361.13	\$ 444.85	\$ -	\$ 444.85	81.17%	\$ 361.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0480	TLSO RIGID PLASTIC CUSTOM FA		DEF	Default	\$ 1,580.49	\$ 1,946.71	\$ -	\$ 1,946.71	79.04%	\$ 1,580.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0482	TLSO RIGID LINED CUSTOM FAB		DEF	Default	\$ 1,767.27	\$ 2,176.77	\$ -	\$ 2,176.77	80.77%	\$ 1,767.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0486	TLSO RIGIDLINED CUST FAB TWO		DEF	Default	\$ 1,932.61	\$ 2,380.39	\$ -	\$ 2,380.39	80.62%	\$ 1,932.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0488	TLSO RIGID LINED PRE ONE PIE		DEF	Default	\$ 982.27	\$ 1,194.10	\$ -	\$ 1,194.10	82.25%	\$ 982.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0621	SIO FLEX PELVIC/SACR PRE OTS		DEF	Default	\$ 67.23	\$ 47.47	\$ 98.92	\$ 47.47	141.76%	\$ 45.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0625	LO FLEX L1-BELOW L5 PRE OTS		DEF	Default	\$ 41.69	\$ 26.56	\$ 53.07	\$ 26.56	157.52%	\$ 25.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L0626	LO SAG RIG PNL STAYS PRE CST		DEF	Default	\$ 67.94	\$ 92.89	\$ -	\$ 92.89	73.07%	\$ 67.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0627	LO SAG RI AN/POS PNL PRE CST		DEF	Default	\$ 358.33	\$ 489.93	\$ -	\$ 489.93	72.96%	\$ 358.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0628	LSO FLEX NO RI STAYS PRE OTS		DEF	Default	\$ 63.45	\$ 40.44	\$ 80.79	\$ 40.44	157.09%	\$ 38.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0630	LSO R POST PNL SJ-T9 PRE CST		DEF	Default	\$ 141.16	\$ 193.01	\$ -	\$ 193.01	73.11%	\$ 141.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0631	LSO SAG R AN/POS PNL PRE CST		DEF	Default	\$ 894.90	\$ 1,223.58	\$ -	\$ 1,223.58	73.13%	\$ 894.90	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0635	LSO SAGIT RIGID PANEL PREFAB		DEF	Default	\$ 770.20	\$ 1,053.09	\$ -	\$ 1,053.09	73.13%	\$ 770.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0636	LSO SAGITTAL RIGID PANEL CUS		DEF	Default	\$ 1,340.32	\$ 1,832.58	\$ -	\$ 1,832.58	73.14%	\$ 1,340.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0637	LSO SC R ANT/POS PNL PRE CST		DEF	Default	\$ 902.33	\$ 1,233.72	\$ -	\$ 1,233.72	73.13%	\$ 902.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0638	LSO SAG-CORONAL PANEL CUSTOM		DEF	Default	\$ 1,147.49	\$ 1,568.91	\$ -	\$ 1,568.91	73.14%	\$ 1,147.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0640	LSO S/C SHELL/PANEL CUSTOM		DEF	Default	\$ 910.36	\$ 1,244.70	\$ -	\$ 1,244.70	73.14%	\$ 910.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0641	LO RIG POS PNL L1-L5 PRE OTS		DEF	Default	\$ 51.72	\$ 37.58	\$ 75.07	\$ 37.58	137.63%	\$ 35.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0642	LO SAG RI AN/POS PNL PRE OTS		DEF	Default	\$ 272.78	\$ 198.17	\$ 395.90	\$ 198.17	137.69%	\$ 188.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0643	LSO SAG CTR RIGI POS PRE OTS		DEF	Default	\$ 107.47	\$ 78.07	\$ 155.97	\$ 78.07	137.87%	\$ 74.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0648	LSO SAG R AN/POS PNL PRE OTS		DEF	Default	\$ 681.24	\$ 494.90	\$ 988.74	\$ 494.90	138.27%	\$ 470.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0650	LSO SC R ANT/POS PNL PRE OTS		DEF	Default	\$ 746.05	\$ 572.62	\$ 1,053.02	\$ 572.62	130.73%	\$ 543.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0710	CTL SO A-P-L CONTROL W/ INTER		DEF	Default	\$ 1,920.44	\$ 2,625.74	\$ -	\$ 2,625.74	73.14%	\$ 1,920.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0861	HALO REPL LINER/INTERFACE		DEF	Default	\$ 210.91	\$ 256.39	\$ -	\$ 256.39	82.19%	\$ 210.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0976	LSO FULL CORSET		DEF	Default	\$ 163.25	\$ 223.20	\$ -	\$ 223.20	73.08%	\$ 163.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L0984	PROTECT BODY SOCK EA PRE OTS		DEF	Default	\$ 53.61	\$ 73.31	\$ -	\$ 73.31	72.93%	\$ 53.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1005	TENSION BASED SCOLIOSIS ORTH		DEF	Default	\$ 3,131.88	\$ 3,807.25	\$ -	\$ 3,807.25	82.26%	\$ 3,131.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L1010	CTLISO AXILLA SLING		DEF	Default	\$ 54.00	\$ 73.84	\$ -	\$ 73.84	73.13%	\$ 54.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1020	KYPHOSIS PAD		DEF	Default	\$ 69.55	\$ 95.10	\$ -	\$ 95.10	73.13%	\$ 69.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1030	LUMBAR BOLSTER PAD		DEF	Default	\$ 51.19	\$ 69.99	\$ -	\$ 69.99	73.14%	\$ 51.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1040	LUMBAR OR LUMBAR RIB PAD		DEF	Default	\$ 62.77	\$ 85.83	\$ -	\$ 85.83	72.55%	\$ 62.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1050	STERNAL PAD		DEF	Default	\$ 66.99	\$ 91.60	\$ -	\$ 91.60	73.13%	\$ 66.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1060	THORACIC PAD		DEF	Default	\$ 76.97	\$ 105.21	\$ -	\$ 105.21	73.16%	\$ 76.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1080	OUTRIGGER		DEF	Default	\$ 57.21	\$ 78.22	\$ -	\$ 78.22	73.14%	\$ 57.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1090	LUMBAR SLING		DEF	Default	\$ 79.66	\$ 108.93	\$ -	\$ 108.93	73.13%	\$ 79.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1200	FURNISH INITIAL ORTHOSIS ONLY		DEF	Default	\$ 1,511.91	\$ 2,067.17	\$ -	\$ 2,067.17	72.95%	\$ 1,511.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1210	LATERAL THORACIC EXTENSION		DEF	Default	\$ 280.73	\$ 383.83	\$ -	\$ 383.83	72.71%	\$ 280.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1220	ANTERIOR THORACIC EXTENSION		DEF	Default	\$ 185.87	\$ 254.13	\$ -	\$ 254.13	73.14%	\$ 185.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1240	LUMBAR DEROTATION PAD		DEF	Default	\$ 62.48	\$ 85.43	\$ -	\$ 85.43	72.79%	\$ 62.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1250	ANTERIOR ASIS PAD		DEF	Default	\$ 58.14	\$ 79.48	\$ -	\$ 79.48	73.15%	\$ 58.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1260	ANTERIOR THORACIC DEROTATION		DEF	Default	\$ 60.88	\$ 83.23	\$ -	\$ 83.23	70.65%	\$ 60.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1270	ABDOMINAL PAD		DEF	Default	\$ 62.34	\$ 85.24	\$ -	\$ 85.24	73.05%	\$ 62.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1280	RIB GUSSET (ELASTIC) EACH		DEF	Default	\$ 69.42	\$ 94.91	\$ -	\$ 94.91	73.14%	\$ 69.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1290	LATERAL TROCHANTERIC PAD		DEF	Default	\$ 63.25	\$ 86.47	\$ -	\$ 86.47	72.96%	\$ 63.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1300	BODY JACKET MOLD TO PATIENT		DEF	Default	\$ 1,670.41	\$ 2,283.88	\$ -	\$ 2,283.88	71.48%	\$ 1,670.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1620	HO FLEX PAVLIK HARNS PRE CST		DEF	Default	\$ 107.81	\$ 147.40	\$ -	\$ 147.40	72.21%	\$ 107.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1630	ABDUCT CONTROL HIP SEMI-FLEX		DEF	Default	\$ 153.35	\$ 186.43	\$ -	\$ 186.43	82.21%	\$ 153.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L1650	HO ABDUCTION HIP ADJUSTABLE		DEF	Default	\$ 209.94	\$ 287.04	\$ -	\$ 287.04	73.14%	\$ 209.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1652	HO BI THIGHCUFFS W SPRDR BAR		DEF	Default	\$ 344.27	\$ 424.03	\$ -	\$ 424.03	81.15%	\$ 344.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1686	HO POST-OP HIP ABDUCTION		DEF	Default	\$ 827.29	\$ 1,131.13	\$ -	\$ 1,131.13	73.13%	\$ 827.29	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1690	COMBINATION BILATERAL HO		DEF	Default	\$ 1,682.36	\$ 2,300.22	\$ -	\$ 2,300.22	73.14%	\$ 1,682.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1810	KO ELASTIC WITH JOINTS		DEF	Default	\$ 81.25	\$ 111.09	\$ -	\$ 111.09	72.93%	\$ 81.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1812	KO ELASTIC W/JOINTS PRE OTS		DEF	Default	\$ 75.92	\$ 67.54	\$ 96.05	\$ 67.54	112.54%	\$ 64.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1820	KO ELAS W/ CONDYLE PADS & JO		DEF	Default	\$ 114.11	\$ 156.01	\$ -	\$ 156.01	72.95%	\$ 114.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1830	KO IMMOB CANVAS LONG PRE OTS		DEF	Default	\$ 68.97	\$ 60.86	\$ 87.32	\$ 60.86	113.43%	\$ 57.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1831	KNEE ORTH POS LOCKING JOINT		DEF	Default	\$ 284.25	\$ 350.10	\$ -	\$ 350.10	81.17%	\$ 284.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1832	KO ADJ JNT POS R SUP PRE CST		DEF	Default	\$ 489.21	\$ 668.88	\$ -	\$ 668.88	72.51%	\$ 489.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1833	KO ADJ JNT POS R SUP PRE OTS		DEF	Default	\$ 473.39	\$ 438.37	\$ 597.39	\$ 438.37	108.02%	\$ 416.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1834	KO W/O JOINT RIGID MOLDED TO		DEF	Default	\$ 732.41	\$ 902.15	\$ -	\$ 902.15	81.18%	\$ 732.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1836	KO RIGID W/O JOINTS PRE OTS		DEF	Default	\$ 105.95	\$ 86.05	\$ 130.99	\$ 86.05	123.18%	\$ 81.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1843	KO SINGLE UPRIGHT PRE CST		DEF	Default	\$ 780.64	\$ 1,067.34	\$ -	\$ 1,067.34	71.98%	\$ 780.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1844	KO W/ADJ JT ROT CNTRL MOLDED		DEF	Default	\$ 1,444.35	\$ 1,974.80	\$ -	\$ 1,974.80	73.14%	\$ 1,444.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1845	KO DOUBLE UPRIGHT PRE CST		DEF	Default	\$ 679.28	\$ 928.75	\$ -	\$ 928.75	73.05%	\$ 679.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1846	KO W ADJ FLEX/EXT ROTAT MOLD		DEF	Default	\$ 1,015.78	\$ 1,234.82	\$ -	\$ 1,234.82	82.10%	\$ 1,015.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1848	KO DBL UPRIGHT W/AIR PRE OTS		DEF	Default	\$ 500.39	\$ 684.17	\$ -	\$ 684.17	73.14%	\$ 500.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1850	KO SWEDISH TYPE PRE OTS		DEF	Default	\$ 242.83	\$ 198.18	\$ 299.20	\$ 198.18	122.54%	\$ 188.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1851	KO SINGLE UPRIGHT PREFAB OTS		DEF	Default	\$ 712.33	\$ 578.62	\$ 880.74	\$ 578.62	123.12%	\$ 549.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L1852	KO DOUBLE UPRIGHT PREFAB OTS		DEF	Default	\$ 628.15	\$ 551.99	\$ 795.47	\$ 551.99	113.88%	\$ 524.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1902	AFO ANKLE GAUNTLET PRE OTS		DEF	Default	\$ 64.23	\$ 87.83	\$ -	\$ 87.83	72.99%	\$ 64.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1904	AFO MOLDED ANKLE GAUNTLET		DEF	Default	\$ 378.38	\$ 517.35	\$ -	\$ 517.35	73.14%	\$ 378.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1906	AFO MULTILIG ANK SUP PRE OTS		DEF	Default	\$ 129.03	\$ 176.41	\$ -	\$ 176.41	72.91%	\$ 129.03	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1907	AFO SUPRAMALLEOLAR CUSTOM		DEF	Default	\$ 543.41	\$ 669.32	\$ -	\$ 669.32	80.15%	\$ 543.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1930	AFO PLASTIC		DEF	Default	\$ 207.75	\$ 284.06	\$ -	\$ 284.06	72.90%	\$ 207.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1932	AFO RIG ANT TIB PREFAB TCF/=		DEF	Default	\$ 861.77	\$ 1,061.44	\$ -	\$ 1,061.44	80.78%	\$ 861.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1940	AFO MOLDED TO PATIENT PLASTI		DEF	Default	\$ 397.94	\$ 544.10	\$ -	\$ 544.10	72.53%	\$ 397.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1945	AFO MOLDED PLAS RIG ANT TIB		DEF	Default	\$ 766.42	\$ 1,047.88	\$ -	\$ 1,047.88	71.88%	\$ 766.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1950	AFO SPIRAL MOLDED TO PT PLAS		DEF	Default	\$ 648.45	\$ 886.61	\$ -	\$ 886.61	73.13%	\$ 648.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1951	AFO SPIRAL PREFABRICATED		DEF	Default	\$ 811.06	\$ 999.01	\$ -	\$ 999.01	80.93%	\$ 811.06	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1960	AFO POS SOLID ANK PLASTIC MO		DEF	Default	\$ 446.03	\$ 609.82	\$ -	\$ 609.82	72.19%	\$ 446.03	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1970	AFO PLASTIC MOLDED W/ANKLE J		DEF	Default	\$ 601.53	\$ 822.44	\$ -	\$ 822.44	72.46%	\$ 601.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1971	AFO W/ANKLE JOINT, PREFAB		DEF	Default	\$ 452.66	\$ 557.54	\$ -	\$ 557.54	81.19%	\$ 452.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L1990	AFO DOUB SOLID STIRRUP CALF		DEF	Default	\$ 358.67	\$ 490.41	\$ -	\$ 490.41	73.12%	\$ 358.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2005	KAFO SNG/DBL MECHANICAL ACT		DEF	Default	\$ 3,965.32	\$ 4,884.12	\$ -	\$ 4,884.12	77.56%	\$ 3,965.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2020	KAFO DBL SOLID STIRRUP BAND/		DEF	Default	\$ 939.57	\$ 1,284.63	\$ -	\$ 1,284.63	73.14%	\$ 939.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2034	KAFO PLA SIN UP W/WO K/A CUS		DEF	Default	\$ 2,009.98	\$ 2,475.71	\$ -	\$ 2,475.71	80.90%	\$ 2,009.98	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2036	KAFO PLAS DOUB FREE KNEE MOL		DEF	Default	\$ 1,638.79	\$ 2,240.65	\$ -	\$ 2,240.65	72.47%	\$ 1,638.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2037	KAFO PLAS SING FREE KNEE MOL		DEF	Default	\$ 1,340.24	\$ 1,832.46	\$ -	\$ 1,832.46	73.14%	\$ 1,340.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L2040	HKAFO TORSION BIL ROT STRAPS		DEF	Default	\$ 185.63	\$ 253.81	\$ -	\$ 253.81	71.22%	\$ 185.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2060	HKAFO TORSION BALL BEARING J		DEF	Default	\$ 492.55	\$ 651.14	\$ -	\$ 651.14	75.64%	\$ 492.55	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2070	HKAFO TORSION UNILAT ROT STR		DEF	Default	\$ 108.21	\$ 147.96	\$ -	\$ 147.96	73.13%	\$ 108.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2112	AFO TIBIAL FRACTURE SOFT		DEF	Default	\$ 375.43	\$ 513.30	\$ -	\$ 513.30	73.14%	\$ 375.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2114	AFO TIB FX SEMI-RIGID		DEF	Default	\$ 470.89	\$ 643.82	\$ -	\$ 643.82	73.13%	\$ 470.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2134	KAFO FEM FX CAST SEMI-RIGID		DEF	Default	\$ 778.26	\$ 1,064.08	\$ -	\$ 1,064.08	73.14%	\$ 778.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2184	LIMITED MOTION KNEE JOINT		DEF	Default	\$ 109.19	\$ 149.29	\$ -	\$ 149.29	73.14%	\$ 109.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2192	PELVIC BAND & BELT THIGH FLA		DEF	Default	\$ 286.91	\$ 392.28	\$ -	\$ 392.28	73.14%	\$ 286.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2200	LIMITED ANKLE MOTION EA JNT		DEF	Default	\$ 51.01	\$ 69.74	\$ -	\$ 69.74	72.42%	\$ 51.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2210	DORSIFLEXION ASSIST EACH JOI		DEF	Default	\$ 72.12	\$ 98.60	\$ -	\$ 98.60	73.14%	\$ 72.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2220	DORSI & PLANTAR FLEX ASS/RES		DEF	Default	\$ 85.37	\$ 116.74	\$ -	\$ 116.74	72.58%	\$ 85.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2232	ROCKER BOTTOM, CONTACT AFO		DEF	Default	\$ 92.81	\$ 114.30	\$ -	\$ 114.30	81.20%	\$ 92.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2250	FOOT PLATE MOLDED STIRRUP AT		DEF	Default	\$ 338.48	\$ 462.78	\$ -	\$ 462.78	72.80%	\$ 338.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2260	REINFORCED SOLID STIRRUP		DEF	Default	\$ 184.46	\$ 252.19	\$ -	\$ 252.19	73.14%	\$ 184.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2265	LONG TONGUE STIRRUP		DEF	Default	\$ 94.77	\$ 129.57	\$ -	\$ 129.57	73.14%	\$ 94.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2270	VARUS/VALGUS STRAP PADDED/LI		DEF	Default	\$ 47.46	\$ 64.87	\$ -	\$ 64.87	72.95%	\$ 47.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2275	PLASTIC MOD LOW EXT PAD/LINE		DEF	Default	\$ 119.87	\$ 163.88	\$ -	\$ 163.88	72.11%	\$ 119.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2280	MOLDED INNER BOOT		DEF	Default	\$ 364.35	\$ 498.18	\$ -	\$ 498.18	72.45%	\$ 364.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2300	ABDUCTION BAR JOINTED ADJUST		DEF	Default	\$ 216.66	\$ 296.22	\$ -	\$ 296.22	73.14%	\$ 216.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2320	NON-MOLDED LACER		DEF	Default	\$ 211.27	\$ 288.87	\$ -	\$ 288.87	73.14%	\$ 211.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L2330	LACER MOLDED TO PATIENT MODE		DEF	Default	\$ 348.25	\$ 476.15	\$ -	\$ 476.15	73.02%	\$ 348.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2340	PRE-TIBIAL SHELL MOLDED TO P		DEF	Default	\$ 359.63	\$ 491.71	\$ -	\$ 491.71	72.60%	\$ 359.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2350	PROSTHETIC TYPE SOCKET MOLDE		DEF	Default	\$ 837.45	\$ 1,145.02	\$ -	\$ 1,145.02	73.14%	\$ 837.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2360	EXTENDED STEEL SHANK		DEF	Default	\$ 46.27	\$ 63.25	\$ -	\$ 63.25	73.05%	\$ 46.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2370	PATTEN BOTTOM		DEF	Default	\$ 206.56	\$ 282.42	\$ -	\$ 282.42	73.14%	\$ 206.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2380	TORSION STRAIGHT KNEE JOINT		DEF	Default	\$ 143.75	\$ 180.60	\$ -	\$ 180.60	79.60%	\$ 143.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2385	STRAIGHT KNEE JOINT HEAVY DU		DEF	Default	\$ 143.70	\$ 196.48	\$ -	\$ 196.48	73.14%	\$ 143.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2387	ADD LE POLY KNEE CUSTOM KAFO		DEF	Default	\$ 147.82	\$ 182.07	\$ -	\$ 182.07	81.19%	\$ 147.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2390	OFFSET KNEE JOINT EACH		DEF	Default	\$ 117.43	\$ 160.58	\$ -	\$ 160.58	73.13%	\$ 117.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2395	OFFSET KNEE JOINT HEAVY DUTY		DEF	Default	\$ 149.58	\$ 204.52	\$ -	\$ 204.52	70.98%	\$ 149.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2397	SUSPENSION SLEEVE LOWER EXT		DEF	Default	\$ 103.62	\$ 141.67	\$ -	\$ 141.67	73.06%	\$ 103.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2405	KNEE JOINT DROP LOCK EA JNT		DEF	Default	\$ 75.86	\$ 103.70	\$ -	\$ 103.70	73.15%	\$ 75.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2415	KNEE JOINT CAM LOCK EACH JOI		DEF	Default	\$ 115.05	\$ 144.55	\$ -	\$ 144.55	79.59%	\$ 115.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2425	KNEE DISC/DIAL LOCK/ADJ FLEX		DEF	Default	\$ 135.74	\$ 170.54	\$ -	\$ 170.54	79.59%	\$ 135.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2430	KNEE JNT RATCHET LOCK EA JNT		DEF	Default	\$ 138.47	\$ 170.54	\$ -	\$ 170.54	79.36%	\$ 138.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2492	KNEE LIFT LOOP DROP LOCK RIN		DEF	Default	\$ 102.74	\$ 140.48	\$ -	\$ 140.48	73.13%	\$ 102.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2510	TH/WGHT BEAR QUAD-LAT BRIM M		DEF	Default	\$ 584.49	\$ 799.15	\$ -	\$ 799.15	73.14%	\$ 584.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2525	TH/WGHT BEAR NAR M-L BRIM MO		DEF	Default	\$ 1,102.85	\$ 1,507.90	\$ -	\$ 1,507.90	73.14%	\$ 1,102.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2530	THIGH/WGHT BEAR LACER NON-MO		DEF	Default	\$ 252.08	\$ 344.66	\$ -	\$ 344.66	73.14%	\$ 252.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2540	THIGH/WGHT BEAR LACER MOLDED		DEF	Default	\$ 386.14	\$ 527.94	\$ -	\$ 527.94	73.14%	\$ 386.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L2550	THIGH/WGHT BEAR HIGH ROLL CU		DEF	Default	\$ 347.40	\$ 421.31	\$ -	\$ 421.31	82.46%	\$ 347.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2570	HIP CLEVIS TYPE 2 POSIT JNT		DEF	Default	\$ 383.27	\$ 524.03	\$ -	\$ 524.03	73.14%	\$ 383.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2620	PELVIC CONTROL HIP HEAVY DUT		DEF	Default	\$ 215.15	\$ 294.16	\$ -	\$ 294.16	71.90%	\$ 215.15	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2622	HIP JOINT ADJUSTABLE FLEXION		DEF	Default	\$ 246.76	\$ 337.38	\$ -	\$ 337.38	73.13%	\$ 246.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2624	HIP ADJ FLEX EXT ABDUCT CONT		DEF	Default	\$ 266.45	\$ 364.32	\$ -	\$ 364.32	73.14%	\$ 266.45	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2628	METAL FRAME RECIPRO HIP & CA		DEF	Default	\$ 1,797.51	\$ 2,457.65	\$ -	\$ 2,457.65	73.14%	\$ 1,797.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2630	PELVIC CONTROL BAND & BELT U		DEF	Default	\$ 265.68	\$ 363.24	\$ -	\$ 363.24	73.14%	\$ 265.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2660	THORACIC CONTROL THORACIC BA		DEF	Default	\$ 220.50	\$ 273.40	\$ -	\$ 273.40	80.65%	\$ 220.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2750	PLATING CHROME/NICKEL PR BAR		DEF	Default	\$ 67.26	\$ 91.95	\$ -	\$ 91.95	73.15%	\$ 67.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2755	CARBON GRAPHITE LAMINATION		DEF	Default	\$ 113.65	\$ 155.38	\$ -	\$ 155.38	72.63%	\$ 113.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2760	EXTENSION PER EXTENSION PER		DEF	Default	\$ 65.19	\$ 89.13	\$ -	\$ 89.13	73.14%	\$ 65.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2768	ORTHO SIDEBAR DISCONNECT		DEF	Default	\$ 125.83	\$ 154.99	\$ -	\$ 154.99	81.10%	\$ 125.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2780	NON-CORROSIVE FINISH		DEF	Default	\$ 54.47	\$ 74.46	\$ -	\$ 74.46	73.11%	\$ 54.47	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2785	DROP LOCK RETAINER EACH		DEF	Default	\$ 25.51	\$ 34.87	\$ -	\$ 34.87	72.92%	\$ 25.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2795	KNEE CONTROL FULL KNEECAP		DEF	Default	\$ 68.37	\$ 93.49	\$ -	\$ 93.49	73.09%	\$ 68.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2800	KNEE CAP MEDIAL OR LATERAL P		DEF	Default	\$ 94.15	\$ 128.71	\$ -	\$ 128.71	73.13%	\$ 94.15	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2810	KNEE CONTROL CONDYLAR PAD		DEF	Default	\$ 62.84	\$ 85.93	\$ -	\$ 85.93	73.13%	\$ 62.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2820	SOFT INTERFACE BELOW KNEE SE		DEF	Default	\$ 93.17	\$ 127.39	\$ -	\$ 127.39	72.67%	\$ 93.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2830	SOFT INTERFACE ABOVE KNEE SE		DEF	Default	\$ 100.80	\$ 137.81	\$ -	\$ 137.81	72.85%	\$ 100.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L2840	TIBIAL LENGTH SOCK FX OR EQU		DEF	Default	\$ 35.16	\$ 48.07	\$ -	\$ 48.07	72.92%	\$ 35.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L2850	FEMORAL LGTH SOCK FX OR EQUA		DEF	Default	\$ 63.97	\$ 87.48	\$ -	\$ 87.48	72.62%	\$ 63.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3000	FT INSERT UCB BERKELEY SHELL		DEF	Default	\$ 273.26	\$ 373.63	\$ -	\$ 373.63	73.09%	\$ 273.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3002	FOOT INSERT PLASTAZOTE OR EQ		DEF	Default	\$ 140.48	\$ 192.09	\$ -	\$ 192.09	73.13%	\$ 140.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3010	FOOT LONGITUDINAL ARCH SUPPO		DEF	Default	\$ 151.59	\$ 207.26	\$ -	\$ 207.26	72.80%	\$ 151.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3020	FOOT LONGITUD/METATARSAL SUP		DEF	Default	\$ 172.59	\$ 235.99	\$ -	\$ 235.99	72.95%	\$ 172.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3030	FOOT ARCH SUPPORT REMOV PREM		DEF	Default	\$ 66.37	\$ 90.74	\$ -	\$ 90.74	73.12%	\$ 66.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3031	FOOT LAMIN/PREPREG COMPOSITE		DEF	Default	\$ 133.21	\$ 145.71	\$ -	\$ 145.71	91.42%	\$ 133.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3040	FT ARCH SUPRT PREMOLD LONGIT		DEF	Default	\$ 40.95	\$ 56.00	\$ -	\$ 56.00	73.12%	\$ 40.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3050	FOOT ARCH SUPP PREMOLD METAT		DEF	Default	\$ 40.95	\$ 56.00	\$ -	\$ 56.00	73.13%	\$ 40.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3060	FOOT ARCH SUPP LONGITUD/META		DEF	Default	\$ 64.18	\$ 87.75	\$ -	\$ 87.75	73.01%	\$ 64.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3100	HALLUS-VALGUS NT DYN PRE OTS		DEF	Default	\$ 37.61	\$ 51.42	\$ -	\$ 51.42	73.13%	\$ 37.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3150	ABDUCT ROTATION BAR W/O SHOE		DEF	Default	\$ 70.81	\$ 96.81	\$ -	\$ 96.81	72.88%	\$ 70.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3170	FOOT PLAS HEEL STABI PRE OTS		DEF	Default	\$ 48.20	\$ 60.52	\$ -	\$ 60.52	79.28%	\$ 48.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3224	WOMAN'S SHOE OXFORD BRACE		DEF	Default	\$ 49.19	\$ 67.27	\$ -	\$ 67.27	73.12%	\$ 49.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3225	MAN'S SHOE OXFORD BRACE		DEF	Default	\$ 72.89	\$ 89.78	\$ -	\$ 89.78	81.19%	\$ 72.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3300	SHO LIFT TAPER TO METATARSAL		DEF	Default	\$ 45.38	\$ 62.03	\$ -	\$ 62.03	73.16%	\$ 45.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3310	SHOE LIFT ELEV HEEL/SOLE NEO		DEF	Default	\$ 70.81	\$ 96.81	\$ -	\$ 96.81	72.95%	\$ 70.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3332	SHOE LIFTS TAPERED TO ONE-HA		DEF	Default	\$ 64.18	\$ 87.75	\$ -	\$ 87.75	72.46%	\$ 64.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3334	SHOE LIFTS ELEVATION HEEL /I		DEF	Default	\$ 36.86	\$ 45.41	\$ -	\$ 45.41	81.16%	\$ 36.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3340	SHOE WEDGE SACH		DEF	Default	\$ 82.28	\$ 101.35	\$ -	\$ 101.35	81.18%	\$ 82.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L3350	SHOE HEEL WEDGE		DEF	Default	\$ 19.89	\$ 27.19	\$ -	\$ 27.19	72.16%	\$ 19.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3360	SHOE SOLE WEDGE OUTSIDE SOLE		DEF	Default	\$ 30.97	\$ 42.34	\$ -	\$ 42.34	73.15%	\$ 30.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3370	SHOE SOLE WEDGE BETWEEN SOLE		DEF	Default	\$ 43.16	\$ 59.01	\$ -	\$ 59.01	73.14%	\$ 43.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3380	SHOE CLUBFOOT WEDGE		DEF	Default	\$ 43.16	\$ 59.01	\$ -	\$ 59.01	73.14%	\$ 43.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3390	SHOE OUTFLARE WEDGE		DEF	Default	\$ 47.91	\$ 59.01	\$ -	\$ 59.01	81.19%	\$ 47.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3400	SHOE METATARSAL BAR WEDGE RO		DEF	Default	\$ 35.38	\$ 48.37	\$ -	\$ 48.37	73.14%	\$ 35.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3420	FULL SOLE/HEEL WEDGE BTWEEN		DEF	Default	\$ 52.83	\$ 65.04	\$ -	\$ 65.04	81.23%	\$ 52.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3480	SHOE HEEL PAD & DEPRESS FOR		DEF	Default	\$ 60.20	\$ 74.17	\$ -	\$ 74.17	81.16%	\$ 60.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3530	ORTHO SHOE ADD HALF SOLE		DEF	Default	\$ 31.11	\$ 37.82	\$ -	\$ 37.82	82.03%	\$ 31.11	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3540	ORTHO SHOE ADD FULL SOLE		DEF	Default	\$ 49.16	\$ 60.52	\$ -	\$ 60.52	81.23%	\$ 49.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3620	TRANS SHOE SOLID STIRRUP EXI		DEF	Default	\$ 73.68	\$ 90.74	\$ -	\$ 90.74	81.20%	\$ 73.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3650	SO 8 ABD RESTRAINT PRE OTS		DEF	Default	\$ 46.70	\$ 63.85	\$ -	\$ 63.85	73.09%	\$ 46.70	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3660	SO 8 AB RSTR CAN/WEB PRE OTS		DEF	Default	\$ 105.64	\$ 144.43	\$ -	\$ 144.43	73.04%	\$ 105.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3675	SO VEST CANVAS/WEB PRE OTS		DEF	Default	\$ 154.23	\$ 189.94	\$ -	\$ 189.94	80.72%	\$ 154.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3702	EO W/O JOINTS CF		DEF	Default	\$ 253.80	\$ 312.60	\$ -	\$ 312.60	81.18%	\$ 253.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3710	EO ELAS W/METAL JNTS PRE OTS		DEF	Default	\$ 97.34	\$ 133.09	\$ -	\$ 133.09	73.09%	\$ 97.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3720	FOREARM/ARM CUFFS FREE MOTIO		DEF	Default	\$ 571.72	\$ 704.17	\$ -	\$ 704.17	81.19%	\$ 571.72	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3730	FOREARM/ARM CUFFS EXT/FLEX A		DEF	Default	\$ 709.81	\$ 970.49	\$ -	\$ 970.49	73.14%	\$ 709.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3740	CUFFS ADJ LOCK W/ ACTIVE CON		DEF	Default	\$ 841.54	\$ 1,150.60	\$ -	\$ 1,150.60	71.43%	\$ 841.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3760	EO ADJ JT PREFAB CUSTOM FIT		DEF	Default	\$ 439.53	\$ 541.39	\$ -	\$ 541.39	80.63%	\$ 439.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L3761	EO, ADJ LOCK JOINT PREFAB OT		DEF	Default	\$ 495.39	\$ 541.39	\$ -	\$ 541.39	91.50%	\$ 495.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3762	EO RIGID W/O JOINTS PRE OTS		DEF	Default	\$ 94.49	\$ 116.38	\$ -	\$ 116.38	80.68%	\$ 94.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3763	EWHO RIGID W/O JNTS CF		DEF	Default	\$ 590.40	\$ 727.19	\$ -	\$ 727.19	81.19%	\$ 590.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3764	EWHO W/JOINT(S) CF		DEF	Default	\$ 674.85	\$ 831.27	\$ -	\$ 831.27	81.18%	\$ 674.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3765	EWHFO RIGID W/O JNTS CF		DEF	Default	\$ 1,141.89	\$ 1,388.14	\$ -	\$ 1,388.14	82.26%	\$ 1,141.89	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3766	EWHFO W/JOINT(S) CF		DEF	Default	\$ 1,193.41	\$ 1,469.93	\$ -	\$ 1,469.93	81.18%	\$ 1,193.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3806	WHFO W/JOINT(S) CUSTOM FAB		DEF	Default	\$ 359.65	\$ 491.75	\$ -	\$ 491.75	73.13%	\$ 359.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3807	WHFO W/O JOINTS PRE CST		DEF	Default	\$ 219.74	\$ 270.66	\$ -	\$ 270.66	80.94%	\$ 219.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3808	WHFO, RIGID W/O JOINTS		DEF	Default	\$ 287.34	\$ 392.87	\$ -	\$ 392.87	73.14%	\$ 287.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3809	WHFO W/O JOINTS PRE OTS		DEF	Default	\$ 197.95	\$ 270.66	\$ -	\$ 270.66	72.99%	\$ 197.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3900	HINGE EXTENSION/FLEX WRIST/F		DEF	Default	\$ 1,018.86	\$ 1,393.05	\$ -	\$ 1,393.05	73.14%	\$ 1,018.86	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3905	WHO W/NONTORSION JNT(S) CF		DEF	Default	\$ 871.64	\$ 1,073.60	\$ -	\$ 1,073.60	81.19%	\$ 871.64	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3906	WHO W/O JOINTS CF		DEF	Default	\$ 321.99	\$ 440.26	\$ -	\$ 440.26	73.06%	\$ 321.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3908	WHO COCK-UP NONMOLDE PRE OTS		DEF	Default	\$ 47.18	\$ 64.50	\$ -	\$ 64.50	73.03%	\$ 47.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3912	HFO FLEXION GLOVE PRE OTS		DEF	Default	\$ 84.39	\$ 102.10	\$ -	\$ 102.10	82.63%	\$ 84.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3913	HFO W/O JOINTS CF		DEF	Default	\$ 238.05	\$ 293.20	\$ -	\$ 293.20	81.18%	\$ 238.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3915	WHO NONTORSION JNTS PRE CST		DEF	Default	\$ 420.91	\$ 575.48	\$ -	\$ 575.48	73.13%	\$ 420.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3917	METACARP FX ORTHOSIS PRE CST		DEF	Default	\$ 92.84	\$ 114.33	\$ -	\$ 114.33	81.10%	\$ 92.84	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3918	METACARP FX ORTHOSIS PRE OTS		DEF	Default	\$ 83.62	\$ 114.33	\$ -	\$ 114.33	73.14%	\$ 83.62	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3919	HO W/O JOINTS CF		DEF	Default	\$ 241.19	\$ 293.20	\$ -	\$ 293.20	82.11%	\$ 241.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L3921	HFO W/JOINT(S) CF		DEF	Default	\$ 282.27	\$ 347.70	\$ -	\$ 347.70	81.18%	\$ 282.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3923	HFO WITHOUT JOINTS PRE CST		DEF	Default	\$ 76.04	\$ 93.65	\$ -	\$ 93.65	80.98%	\$ 76.04	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3924	HFO WITHOUT JOINTS PRE OTS		DEF	Default	\$ 68.49	\$ 93.65	\$ -	\$ 93.65	72.97%	\$ 68.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3925	FO PIP DIP JNT/SPRNG PRE OTS		DEF	Default	\$ 38.87	\$ 53.14	\$ -	\$ 53.14	73.10%	\$ 38.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3927	FO PIP DIP NO JT SPR PRE OTS		DEF	Default	\$ 30.74	\$ 37.87	\$ -	\$ 37.87	81.11%	\$ 30.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3929	HFO NONTORSION JNTS PRE CST		DEF	Default	\$ 61.56	\$ 84.16	\$ -	\$ 84.16	73.07%	\$ 61.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3931	WHFO NONTORSION JOINT PREFAB		DEF	Default	\$ 152.05	\$ 207.90	\$ -	\$ 207.90	73.11%	\$ 152.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3933	FO W/O JOINTS CF		DEF	Default	\$ 187.57	\$ 230.98	\$ -	\$ 230.98	81.20%	\$ 187.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3935	FO NONTORSION JOINT CF		DEF	Default	\$ 196.77	\$ 239.23	\$ -	\$ 239.23	82.25%	\$ 196.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3960	SEWHO AIRPLAN DESIG ABDU POS		DEF	Default	\$ 578.69	\$ 791.22	\$ -	\$ 791.22	72.95%	\$ 578.69	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3973	SEWHO AIRPLANE W/JNT(S) CF		DEF	Default	\$ 1,743.48	\$ 2,147.46	\$ -	\$ 2,147.46	81.19%	\$ 1,743.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3980	UP EXT FX ORTHOS HUMERAL NOS		DEF	Default	\$ 243.42	\$ 332.82	\$ -	\$ 332.82	73.13%	\$ 243.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3981	UE FX ORTH SHOUL CAP FOREARM		DEF	Default	\$ 798.59	\$ 1,091.90	\$ -	\$ 1,091.90	73.14%	\$ 798.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3982	UPPER EXT FX ORTHOSIS RAD/UL		DEF	Default	\$ 300.97	\$ 411.52	\$ -	\$ 411.52	72.84%	\$ 300.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3984	UPPER EXT FX ORTHOSIS WRIST		DEF	Default	\$ 311.41	\$ 425.78	\$ -	\$ 425.78	73.08%	\$ 311.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L3995	SOCK FRACTURE OR EQUAL EACH		DEF	Default	\$ 25.74	\$ 35.20	\$ -	\$ 35.20	72.76%	\$ 25.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4110	REPL LEATH CUFF KAFO-AFO CAL		DEF	Default	\$ 69.14	\$ 94.53	\$ -	\$ 94.53	72.87%	\$ 69.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4130	REPLACE PRETIBIAL SHELL		DEF	Default	\$ 458.80	\$ 627.30	\$ -	\$ 627.30	73.14%	\$ 458.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4350	ANKLE CONTROL ORTHO PRE OTS		DEF	Default	\$ 71.92	\$ 98.34	\$ -	\$ 98.34	72.99%	\$ 71.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4360	PNEUMAT WALKING BOOT PRE CST		DEF	Default	\$ 240.44	\$ 328.73	\$ -	\$ 328.73	73.02%	\$ 240.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L4361	PNEUMA/VAC WALK BOOT PRE OTS		DEF	Default	\$ 240.44	\$ 328.73	\$ -	\$ 328.73	73.04%	\$ 240.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4370	PNEUM FULL LEG SPLNT PRE OTS		DEF	Default	\$ 166.63	\$ 227.81	\$ -	\$ 227.81	73.12%	\$ 166.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4386	NON-PNEUM WALK BOOT PRE CST		DEF	Default	\$ 153.10	\$ 188.59	\$ -	\$ 188.59	80.97%	\$ 153.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4387	NON-PNEUM WALK BOOT PRE OTS		DEF	Default	\$ 137.92	\$ 188.59	\$ -	\$ 188.59	72.99%	\$ 137.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4392	REPLACE AFO SOFT INTERFACE		DEF	Default	\$ 22.57	\$ 27.51	\$ -	\$ 27.51	81.37%	\$ 22.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4396	STATIC OR DYNAMI AFO PRE CST		DEF	Default	\$ 143.37	\$ 196.03	\$ -	\$ 196.03	73.09%	\$ 143.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4398	FOOT DROP SPLINT PRE OTS		DEF	Default	\$ 73.28	\$ 90.28	\$ -	\$ 90.28	81.14%	\$ 73.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L4631	AFO, WALK BOOT TYPE, CUS FAB		DEF	Default	\$ 1,197.44	\$ 1,637.23	\$ -	\$ 1,637.23	73.14%	\$ 1,197.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5000	SHO INSERT W ARCH TOE FILLER		DEF	Default	\$ 433.13	\$ 592.22	\$ -	\$ 592.22	73.13%	\$ 433.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5010	MOLD SOCKET ANK HGT W/ TOE F		DEF	Default	\$ 1,144.97	\$ 1,565.47	\$ -	\$ 1,565.47	73.14%	\$ 1,144.97	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5020	TIBIAL TUBERCLE HGT W/ TOE F		DEF	Default	\$ 2,008.88	\$ 2,746.67	\$ -	\$ 2,746.67	73.14%	\$ 2,008.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5050	ANK SYMES MOLD SCKT SACH FT		DEF	Default	\$ 2,134.26	\$ 2,918.11	\$ -	\$ 2,918.11	73.14%	\$ 2,134.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5100	MOLDED SOCKET SHIN SACH FOOT		DEF	Default	\$ 1,992.43	\$ 2,724.16	\$ -	\$ 2,724.16	73.14%	\$ 1,992.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5160	MOLD SOCKET BENT KNEE SHIN S		DEF	Default	\$ 3,672.10	\$ 5,020.73	\$ -	\$ 5,020.73	73.14%	\$ 3,672.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5210	NO KNEE/ANKLE JOINTS W/ FT B		DEF	Default	\$ 2,242.23	\$ 3,065.70	\$ -	\$ 3,065.70	73.14%	\$ 2,242.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5301	BK MOLD SOCKET SACH FT ENDO		DEF	Default	\$ 1,984.53	\$ 2,713.38	\$ -	\$ 2,713.38	73.14%	\$ 1,984.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5312	KNEE DISART, SACH FT, ENDO		DEF	Default	\$ 3,126.51	\$ 4,274.78	\$ -	\$ 4,274.78	73.14%	\$ 3,126.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5321	AK OPEN END SACH		DEF	Default	\$ 3,059.26	\$ 3,852.38	\$ -	\$ 3,852.38	79.21%	\$ 3,059.26	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5331	HIP DISART CANADIAN SACH FT		DEF	Default	\$ 4,802.67	\$ 6,566.51	\$ -	\$ 6,566.51	73.14%	\$ 4,802.67	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5450	POSTOP APP NON-WGT BEAR DSG		DEF	Default	\$ 457.10	\$ 574.29	\$ -	\$ 574.29	79.59%	\$ 457.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L5460	POSTOP APP NON-WGT BEAR DSG		DEF	Default	\$ 542.46	\$ 672.63	\$ -	\$ 672.63	80.65%	\$ 542.46	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5530	PREP BK PTB THERMOPLS MOLDED		DEF	Default	\$ 1,723.58	\$ 2,218.23	\$ -	\$ 2,218.23	77.70%	\$ 1,723.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5540	PREP BK PTB LAMINATED SOCKET		DEF	Default	\$ 1,741.38	\$ 2,380.92	\$ -	\$ 2,380.92	73.14%	\$ 1,741.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5590	PREP AK ISCHIAL LAMINATED		DEF	Default	\$ 2,631.92	\$ 3,598.53	\$ -	\$ 3,598.53	73.14%	\$ 2,631.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5611	AK 4 BAR LINK W/FRIC SWING		DEF	Default	\$ 1,841.61	\$ 2,517.97	\$ -	\$ 2,517.97	73.14%	\$ 1,841.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5617	AK/BK SELF-ALIGNING UNIT EA		DEF	Default	\$ 546.87	\$ 664.80	\$ -	\$ 664.80	82.26%	\$ 546.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5618	TEST SOCKET SYMES		DEF	Default	\$ 241.09	\$ 329.64	\$ -	\$ 329.64	73.14%	\$ 241.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5620	TEST SOCKET BELOW KNEE		DEF	Default	\$ 238.34	\$ 325.86	\$ -	\$ 325.86	73.14%	\$ 238.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5622	TEST SOCKET KNEE DISARTICULA		DEF	Default	\$ 310.78	\$ 424.92	\$ -	\$ 424.92	73.13%	\$ 310.78	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5624	TEST SOCKET ABOVE KNEE		DEF	Default	\$ 312.63	\$ 427.46	\$ -	\$ 427.46	72.73%	\$ 312.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5626	TEST SOCKET HIP DISARTICULAT		DEF	Default	\$ 408.73	\$ 558.84	\$ -	\$ 558.84	73.14%	\$ 408.73	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5629	BELOW KNEE ACRYLIC SOCKET		DEF	Default	\$ 272.43	\$ 372.49	\$ -	\$ 372.49	73.14%	\$ 272.43	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5630	SYME TYP EXPANDABL WALL SCKT		DEF	Default	\$ 420.17	\$ 574.48	\$ -	\$ 574.48	73.14%	\$ 420.17	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5631	AK/KNEE DISARTIC ACRYLIC SOC		DEF	Default	\$ 376.68	\$ 515.00	\$ -	\$ 515.00	72.82%	\$ 376.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5632	SYMES TYPE PTB BRIM DESIGN S		DEF	Default	\$ 233.99	\$ 319.93	\$ -	\$ 319.93	73.14%	\$ 233.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5634	SYMES TYPE POSTER OPENING SO		DEF	Default	\$ 397.61	\$ 475.39	\$ -	\$ 475.39	83.64%	\$ 397.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5636	SYMES TYPE MEDIAL OPENING SO		DEF	Default	\$ 291.25	\$ 398.20	\$ -	\$ 398.20	73.14%	\$ 291.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5637	BELOW KNEE TOTAL CONTACT		DEF	Default	\$ 247.65	\$ 338.61	\$ -	\$ 338.61	73.14%	\$ 247.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5643	HIP FLEX INNER SOCKET EXT FR		DEF	Default	\$ 1,779.04	\$ 2,432.43	\$ -	\$ 2,432.43	73.14%	\$ 1,779.04	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5645	BK FLEX INNER SOCKET EXT FRA		DEF	Default	\$ 912.00	\$ 1,246.96	\$ -	\$ 1,246.96	73.14%	\$ 912.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L5647	BELOW KNEE SUCTION SOCKET		DEF	Default	\$ 832.63	\$ 1,138.41	\$ -	\$ 1,138.41	73.14%	\$ 832.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5649	ISCH CONTAINMT/NARROW M-L SO		DEF	Default	\$ 1,817.40	\$ 2,484.86	\$ -	\$ 2,484.86	72.59%	\$ 1,817.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5650	TOT CONTACT AK/KNEE DISART S		DEF	Default	\$ 558.00	\$ 762.94	\$ -	\$ 762.94	72.85%	\$ 558.00	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5651	AK FLEX INNER SOCKET EXT FRA		DEF	Default	\$ 1,372.68	\$ 1,876.81	\$ -	\$ 1,876.81	72.82%	\$ 1,372.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5652	SUCTION SUSP AK/KNEE DISART		DEF	Default	\$ 498.33	\$ 681.36	\$ -	\$ 681.36	73.14%	\$ 498.33	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5653	KNEE DISART EXPAND WALL SOCK		DEF	Default	\$ 748.21	\$ 909.56	\$ -	\$ 909.56	82.26%	\$ 748.21	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5654	SOCKET INSERT SYMES		DEF	Default	\$ 285.83	\$ 390.81	\$ -	\$ 390.81	73.14%	\$ 285.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5655	SOCKET INSERT BELOW KNEE		DEF	Default	\$ 227.37	\$ 310.89	\$ -	\$ 310.89	73.14%	\$ 227.37	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5656	SOCKET INSERT KNEE ARTICULAT		DEF	Default	\$ 364.27	\$ 448.67	\$ -	\$ 448.67	81.19%	\$ 364.27	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5658	SOCKET INSERT ABOVE KNEE		DEF	Default	\$ 357.28	\$ 488.49	\$ -	\$ 488.49	73.14%	\$ 357.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5661	MULTI-DUROMETER SYMES		DEF	Default	\$ 579.09	\$ 713.29	\$ -	\$ 713.29	81.19%	\$ 579.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5665	MULTI-DUROMETER BELOW KNEE		DEF	Default	\$ 438.94	\$ 600.15	\$ -	\$ 600.15	73.14%	\$ 438.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5666	BELOW KNEE CUFF SUSPENSION		DEF	Default	\$ 60.01	\$ 82.04	\$ -	\$ 82.04	73.15%	\$ 60.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5668	BK MOLDED DISTAL CUSHION		DEF	Default	\$ 86.57	\$ 118.36	\$ -	\$ 118.36	73.13%	\$ 86.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5670	BK MOLDED SUPRACONDYLAR SUSP		DEF	Default	\$ 310.16	\$ 424.07	\$ -	\$ 424.07	73.14%	\$ 310.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5671	BK/AK LOCKING MECHANISM		DEF	Default	\$ 631.13	\$ 777.37	\$ -	\$ 777.37	81.05%	\$ 631.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5673	SOCKET INSERT W LOCK MECH		DEF	Default	\$ 721.01	\$ 888.09	\$ -	\$ 888.09	81.01%	\$ 721.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5676	BK KNEE JOINTS SINGLE AXIS P		DEF	Default	\$ 384.19	\$ 525.30	\$ -	\$ 525.30	73.14%	\$ 384.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5678	BK JOINT COVERS PAIR		DEF	Default	\$ 44.31	\$ 60.56	\$ -	\$ 60.56	73.17%	\$ 44.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5679	SOCKET INSERT W/O LOCK MECH		DEF	Default	\$ 600.83	\$ 740.03	\$ -	\$ 740.03	81.16%	\$ 600.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L5681	INTL CUSTM CONG/LATYP INSERT		DEF	Default	\$ 1,275.38	\$ 1,570.90	\$ -	\$ 1,570.90	80.58%	\$ 1,275.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5682	BK THIGH LACER GLUT/ISCHIA M		DEF	Default	\$ 595.12	\$ 733.02	\$ -	\$ 733.02	81.19%	\$ 595.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5683	INITIAL CUSTOM SOCKET INSERT		DEF	Default	\$ 1,275.38	\$ 1,570.90	\$ -	\$ 1,570.90	81.19%	\$ 1,275.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5684	BK FORK STRAP		DEF	Default	\$ 42.08	\$ 57.53	\$ -	\$ 57.53	73.14%	\$ 42.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5685	BELOW KNEE SUS/SEAL SLEEVE		DEF	Default	\$ 111.66	\$ 152.67	\$ -	\$ 152.67	73.13%	\$ 111.66	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5688	BK WAIST BELT WEBBING		DEF	Default	\$ 58.12	\$ 71.60	\$ -	\$ 71.60	81.17%	\$ 58.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5694	AK PELVIC CONTROL BELT PAD/L		DEF	Default	\$ 173.38	\$ 237.05	\$ -	\$ 237.05	73.12%	\$ 173.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5695	AK SLEEVE SUSP NEOPRENE/EQUA		DEF	Default	\$ 169.96	\$ 232.39	\$ -	\$ 232.39	73.14%	\$ 169.96	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5696	AK/KNEE DISARTIC PELVIC JOIN		DEF	Default	\$ 158.61	\$ 216.86	\$ -	\$ 216.86	73.14%	\$ 158.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5698	AK/KNEE DISARTIC SILESIA BA		DEF	Default	\$ 89.42	\$ 122.26	\$ -	\$ 122.26	73.14%	\$ 89.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5700	REPLACE SOCKET BELOW KNEE		DEF	Default	\$ 2,432.60	\$ 3,326.01	\$ -	\$ 3,326.01	73.14%	\$ 2,432.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5701	REPLACE SOCKET ABOVE KNEE		DEF	Default	\$ 3,246.83	\$ 4,439.27	\$ -	\$ 4,439.27	72.93%	\$ 3,246.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5703	SYMES ANKLE W/O (SACH) FOOT		DEF	Default	\$ 2,181.51	\$ 2,651.96	\$ -	\$ 2,651.96	82.26%	\$ 2,181.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5704	CUSTOM SHAPE COVER BK		DEF	Default	\$ 507.63	\$ 694.07	\$ -	\$ 694.07	73.14%	\$ 507.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5705	CUSTOM SHAPE COVER AK		DEF	Default	\$ 861.94	\$ 1,178.50	\$ -	\$ 1,178.50	73.14%	\$ 861.94	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5707	CUSTOM SHAPE CVR HIP DISART		DEF	Default	\$ 1,319.75	\$ 1,604.35	\$ -	\$ 1,604.35	82.26%	\$ 1,319.75	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5781	LOWER LIMB PROS VACUUM PUMP		DEF	Default	\$ 3,922.85	\$ 4,768.80	\$ -	\$ 4,768.80	82.26%	\$ 3,922.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5782	HD LOW LIMB PROS VACUUM PUMP		DEF	Default	\$ 4,135.56	\$ 5,027.38	\$ -	\$ 5,027.38	82.26%	\$ 4,135.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5785	EXOSKELETAL BK ULTRALT MATER		DEF	Default	\$ 445.39	\$ 608.98	\$ -	\$ 608.98	73.14%	\$ 445.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5790	EXOSKELETAL AK ULTRA-LIGHT M		DEF	Default	\$ 693.28	\$ 842.77	\$ -	\$ 842.77	82.26%	\$ 693.28	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L5812	ENDO KNEE-SHIN FRCT SWG & ST		DEF	Default	\$ 596.14	\$ 815.06	\$ -	\$ 815.06	73.14%	\$ 596.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5814	ENDO KNEE-SHIN HYDRAL SWG PH		DEF	Default	\$ 3,237.40	\$ 4,426.38	\$ -	\$ 4,426.38	73.14%	\$ 3,237.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5828	ENDO KNEE-SHIN FLUID SWG/STA		DEF	Default	\$ 2,722.31	\$ 3,722.11	\$ -	\$ 3,722.11	73.14%	\$ 2,722.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5840	MULTI-AXIAL KNEE/SHIN SYSTEM		DEF	Default	\$ 3,345.54	\$ 4,574.24	\$ -	\$ 4,574.24	73.14%	\$ 3,345.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5845	KNEE-SHIN SYS STANCE FLEXION		DEF	Default	\$ 1,562.40	\$ 2,136.21	\$ -	\$ 2,136.21	73.14%	\$ 1,562.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5848	KNEE-SHIN SYS HYDRAUL STANCE		DEF	Default	\$ 1,040.50	\$ 1,281.58	\$ -	\$ 1,281.58	81.19%	\$ 1,040.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5850	ENDO AK/HIP KNEE EXTENS ASSI		DEF	Default	\$ 146.23	\$ 199.92	\$ -	\$ 199.92	73.14%	\$ 146.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5855	MECH HIP EXTENSION ASSIST		DEF	Default	\$ 389.61	\$ 479.89	\$ -	\$ 479.89	81.19%	\$ 389.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5856	ELEC KNEE-SHIN SWING/STANCE		DEF	Default	\$ 23,212.59	\$ 28,591.13	\$ -	\$ 28,591.13	81.19%	\$ 23,212.59	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5910	ENDO BELOW KNEE ALIGNABLE SY		DEF	Default	\$ 413.98	\$ 566.01	\$ -	\$ 566.01	73.14%	\$ 413.98	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5920	ENDO AK/HIP ALIGNABLE SYSTEM		DEF	Default	\$ 602.31	\$ 823.51	\$ -	\$ 823.51	73.00%	\$ 602.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5925	ABOVE KNEE MANUAL LOCK		DEF	Default	\$ 426.32	\$ 525.12	\$ -	\$ 525.12	81.19%	\$ 426.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5930	HIGH ACTIVITY KNEE FRAME		DEF	Default	\$ 3,246.81	\$ 3,999.13	\$ -	\$ 3,999.13	81.19%	\$ 3,246.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5940	ENDO BK ULTRA-LIGHT MATERIAL		DEF	Default	\$ 573.35	\$ 783.92	\$ -	\$ 783.92	73.14%	\$ 573.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5950	ENDO AK ULTRA-LIGHT MATERIAL		DEF	Default	\$ 692.99	\$ 947.50	\$ -	\$ 947.50	72.73%	\$ 692.99	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5960	ENDO HIP ULTRA-LIGHT MATERIA		DEF	Default	\$ 826.44	\$ 1,129.96	\$ -	\$ 1,129.96	73.14%	\$ 826.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5962	BELOW KNEE FLEX COVER SYSTEM		DEF	Default	\$ 641.92	\$ 877.68	\$ -	\$ 877.68	73.14%	\$ 641.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5964	ABOVE KNEE FLEX COVER SYSTEM		DEF	Default	\$ 907.16	\$ 1,240.34	\$ -	\$ 1,240.34	73.14%	\$ 907.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5966	HIP FLEXIBLE COVER SYSTEM		DEF	Default	\$ 1,297.49	\$ 1,577.30	\$ -	\$ 1,577.30	82.26%	\$ 1,297.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5968	MULTIAXIAL ANKLE W DORSIFLEX		DEF	Default	\$ 3,516.30	\$ 4,331.07	\$ -	\$ 4,331.07	81.19%	\$ 3,516.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L5970	FOOT EXTERNAL KEEL SACH FOOT		DEF	Default	\$ 194.65	\$ 266.13	\$ -	\$ 266.13	73.14%	\$ 194.65	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5972	FLEXIBLE KEEL FOOT		DEF	Default	\$ 377.41	\$ 516.02	\$ -	\$ 516.02	73.14%	\$ 377.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5976	ENERGY STORING FOOT		DEF	Default	\$ 518.34	\$ 708.73	\$ -	\$ 708.73	73.14%	\$ 518.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5979	MULTI-AXIAL ANKLE/FT PROSTH		DEF	Default	\$ 2,367.81	\$ 3,237.42	\$ -	\$ 3,237.42	73.14%	\$ 2,367.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5980	FLEX FOOT SYSTEM		DEF	Default	\$ 4,238.01	\$ 5,794.46	\$ -	\$ 5,794.46	73.14%	\$ 4,238.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5981	FLEX-WALK SYS LOW EXT PROSTH		DEF	Default	\$ 2,769.44	\$ 3,786.55	\$ -	\$ 3,786.55	73.14%	\$ 2,769.44	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5984	ENDOSKELETAL AXIAL ROTATION		DEF	Default	\$ 517.10	\$ 707.00	\$ -	\$ 707.00	73.14%	\$ 517.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5986	MULTI-AXIAL ROTATION UNIT		DEF	Default	\$ 724.31	\$ 990.33	\$ -	\$ 990.33	73.14%	\$ 724.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5987	SHANK FT W VERT LOAD PYLON		DEF	Default	\$ 6,270.79	\$ 8,573.83	\$ -	\$ 8,573.83	73.14%	\$ 6,270.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5988	VERTICAL SHOCK REDUCING PYLO		DEF	Default	\$ 1,741.34	\$ 2,380.88	\$ -	\$ 2,380.88	73.14%	\$ 1,741.34	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L5990	USER ADJUSTABLE HEEL HEIGHT		DEF	Default	\$ 1,755.50	\$ 2,162.24	\$ -	\$ 2,162.24	81.19%	\$ 1,755.50	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6020	PART HAND NO FINGERS		DEF	Default	\$ 1,201.41	\$ 1,642.64	\$ -	\$ 1,642.64	73.14%	\$ 1,201.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6026	PART HAND MYO EXCLU TERM DEV		DEF	Default	\$ 4,083.25	\$ 5,582.87	\$ -	\$ 5,582.87	73.13%	\$ 4,083.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6100	ELB MOLD SOCK FLEX HINGE PAD		DEF	Default	\$ 1,734.61	\$ 2,371.68	\$ -	\$ 2,371.68	73.14%	\$ 1,734.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6110	ELBOW MOLD SOCK SUSPENSION T		DEF	Default	\$ 1,790.20	\$ 2,447.68	\$ -	\$ 2,447.68	73.14%	\$ 1,790.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6205	ELBOW MOLDED W/ EXPAND INTER		DEF	Default	\$ 3,201.57	\$ 4,377.39	\$ -	\$ 4,377.39	73.14%	\$ 3,201.57	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6250	ELBOW INTER LOC ELBOW FORARM		DEF	Default	\$ 2,327.41	\$ 3,182.18	\$ -	\$ 3,182.18	73.14%	\$ 2,327.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6300	SHLDER DISART INT LOCK ELBOW		DEF	Default	\$ 3,412.71	\$ 4,666.06	\$ -	\$ 4,666.06	73.14%	\$ 3,412.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6320	SHOULDER PASSIVE RESTOR CAP		DEF	Default	\$ 1,561.85	\$ 2,135.45	\$ -	\$ 2,135.45	73.14%	\$ 1,561.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6615	DISCONNECT LOCKING WRIST UNI		DEF	Default	\$ 167.36	\$ 228.84	\$ -	\$ 228.84	73.13%	\$ 167.36	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L6616	DISCONNECT INSERT LOCKING WR		DEF	Default	\$ 55.61	\$ 76.03	\$ -	\$ 76.03	73.14%	\$ 55.61	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6621	FLEX/EXT WRIST W/WO FRICTION		DEF	Default	\$ 2,213.30	\$ 2,726.12	\$ -	\$ 2,726.12	81.19%	\$ 2,213.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6624	FLEX/EXT/ROTATION WRIST UNIT		DEF	Default	\$ 3,282.92	\$ 4,488.63	\$ -	\$ 4,488.63	73.14%	\$ 3,282.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6628	QUICK DISCONN HOOK ADAPTER O		DEF	Default	\$ 547.58	\$ 748.67	\$ -	\$ 748.67	73.14%	\$ 547.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6629	LAMINATION COLLAR W/ COUPLIN		DEF	Default	\$ 157.13	\$ 214.84	\$ -	\$ 214.84	73.14%	\$ 157.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6635	LIFT ASSIST FOR ELBOW		DEF	Default	\$ 177.58	\$ 242.80	\$ -	\$ 242.80	73.14%	\$ 177.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6646	MULTIPO LOCKING SHOULDER JNT		DEF	Default	\$ 3,092.24	\$ 3,759.09	\$ -	\$ 3,759.09	82.26%	\$ 3,092.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6647	SHOULDER LOCK ACTUATOR		DEF	Default	\$ 509.14	\$ 618.91	\$ -	\$ 618.91	82.26%	\$ 509.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6655	STANDARD CONTROL CABLE EXTRA		DEF	Default	\$ 64.40	\$ 88.05	\$ -	\$ 88.05	73.14%	\$ 64.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6660	HEAVY DUTY CONTROL CABLE		DEF	Default	\$ 80.58	\$ 110.17	\$ -	\$ 110.17	73.14%	\$ 80.58	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6665	TEFLON OR EQUAL CABLE LINING		DEF	Default	\$ 39.48	\$ 53.98	\$ -	\$ 53.98	73.14%	\$ 39.48	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6670	HOOK TO HAND CABLE ADAPTER		DEF	Default	\$ 41.12	\$ 56.21	\$ -	\$ 56.21	73.15%	\$ 41.12	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6672	HARNESS CHEST/SHLDR SADDLE		DEF	Default	\$ 181.41	\$ 237.03	\$ -	\$ 237.03	76.53%	\$ 181.41	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6675	HARNESS FIGURE OF 8 SING CON		DEF	Default	\$ 102.95	\$ 140.76	\$ -	\$ 140.76	73.14%	\$ 102.95	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6676	HARNESS FIGURE OF 8 DUAL CON		DEF	Default	\$ 121.38	\$ 165.96	\$ -	\$ 165.96	73.14%	\$ 121.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6677	UE TRIPLE CONTROL HARNESS		DEF	Default	\$ 290.82	\$ 353.56	\$ -	\$ 353.56	82.25%	\$ 290.82	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6680	TEST SOCK WRIST DISART/BEL E		DEF	Default	\$ 210.63	\$ 288.00	\$ -	\$ 288.00	73.14%	\$ 210.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6682	TEST SOCK ELBW DISART/ABOVE		DEF	Default	\$ 229.63	\$ 313.96	\$ -	\$ 313.96	73.14%	\$ 229.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6684	TEST SOCKET SHLDR DISART/THO		DEF	Default	\$ 326.42	\$ 446.31	\$ -	\$ 446.31	73.14%	\$ 326.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6686	SUCTION SOCKET		DEF	Default	\$ 506.10	\$ 691.97	\$ -	\$ 691.97	73.14%	\$ 506.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L6687	FRAME TYP SOCKET BEL ELBOW/W		DEF	Default	\$ 659.32	\$ 901.45	\$ -	\$ 901.45	73.14%	\$ 659.32	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6688	FRAME TYP SOCK ABOVE ELB/DIS		DEF	Default	\$ 454.13	\$ 620.92	\$ -	\$ 620.92	73.14%	\$ 454.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6689	FRAME TYP SOCKET SHOULDER DI		DEF	Default	\$ 770.16	\$ 1,053.03	\$ -	\$ 1,053.03	73.14%	\$ 770.16	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6691	REMOVABLE INSERT EACH		DEF	Default	\$ 295.91	\$ 404.60	\$ -	\$ 404.60	73.14%	\$ 295.91	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6693	LOCKINGELBOW FOREARM CNTRBAL		DEF	Default	\$ 2,638.24	\$ 3,383.65	\$ -	\$ 3,383.65	77.97%	\$ 2,638.24	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6694	ELBOW SOCKET INS USE W/LOCK		DEF	Default	\$ 721.01	\$ 888.09	\$ -	\$ 888.09	81.18%	\$ 721.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6696	CUS ELBO SKT IN FOR CON/ATYP		DEF	Default	\$ 1,275.38	\$ 1,570.90	\$ -	\$ 1,570.90	81.19%	\$ 1,275.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6697	CUS ELBO SKT IN NOT CON/ATYP		DEF	Default	\$ 1,275.38	\$ 1,570.90	\$ -	\$ 1,570.90	81.19%	\$ 1,275.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6698	BELOW/ABOVE ELBOW LOCK MECH		DEF	Default	\$ 631.13	\$ 777.37	\$ -	\$ 777.37	81.19%	\$ 631.13	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6703	TERM DEV, PASSIVE HAND MITT		DEF	Default	\$ 317.06	\$ 433.51	\$ -	\$ 433.51	73.14%	\$ 317.06	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6704	TERM DEV, SPORT/REC/WORK ATT		DEF	Default	\$ 617.18	\$ 843.85	\$ -	\$ 843.85	73.14%	\$ 617.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6706	TERM DEV MECH HOOK VOL OPEN		DEF	Default	\$ 396.72	\$ 542.42	\$ -	\$ 542.42	73.14%	\$ 396.72	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6708	TERM DEV MECH HAND VOL OPEN		DEF	Default	\$ 853.76	\$ 1,167.32	\$ -	\$ 1,167.32	73.14%	\$ 853.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6713	PED TERM DEV, HAND, VOL OPEN		DEF	Default	\$ 1,361.87	\$ 1,862.05	\$ -	\$ 1,862.05	73.14%	\$ 1,361.87	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6721	HOOK/HAND, HVY DTY, VOL OPEN		DEF	Default	\$ 2,050.20	\$ 2,803.18	\$ -	\$ 2,803.18	73.14%	\$ 2,050.20	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6881	TERM DEV AUTO GRASP FEATURE		DEF	Default	\$ 3,955.92	\$ 4,872.52	\$ -	\$ 4,872.52	81.19%	\$ 3,955.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6882	MICROPROCESSOR CONTROL UPLMB		DEF	Default	\$ 3,000.79	\$ 3,696.10	\$ -	\$ 3,696.10	81.19%	\$ 3,000.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6883	REPLC SOCKT BELOW E/W DISA		DEF	Default	\$ 1,645.08	\$ 2,008.83	\$ -	\$ 2,008.83	81.88%	\$ 1,645.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6890	PREFAB GLOVE FOR TERM DEVICE		DEF	Default	\$ 155.79	\$ 213.02	\$ -	\$ 213.02	73.13%	\$ 155.79	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L6935	BELOW ELBOW MYOELECTRONIC CT		DEF	Default	\$ 7,845.08	\$ 10,726.27	\$ -	\$ 10,726.27	73.14%	\$ 7,845.08	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L7007	ADULT ELECTRIC HAND		DEF	Default	\$ 2,949.92	\$ 4,033.31	\$ -	\$ 4,033.31	73.14%	\$ 2,949.92	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7009	ADULT ELECTRIC HOOK		DEF	Default	\$ 3,088.88	\$ 4,223.30	\$ -	\$ 4,223.30	73.13%	\$ 3,088.88	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7259	ELECTRONIC WRIST ROTATOR ANY		DEF	Default	\$ 3,305.80	\$ 4,519.89	\$ -	\$ 4,519.89	73.14%	\$ 3,305.80	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7367	REPLACEMNT LITHIUM IONBATTER		DEF	Default	\$ 376.76	\$ 464.00	\$ -	\$ 464.00	81.18%	\$ 376.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7368	LITHIUM ION BATTERY CHARGER		DEF	Default	\$ 488.38	\$ 601.51	\$ -	\$ 601.51	81.19%	\$ 488.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7400	ADD UE PROST BE/WD, ULTLITE		DEF	Default	\$ 296.60	\$ 365.30	\$ -	\$ 365.30	81.19%	\$ 296.60	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7401	ADD UE PROST A/E ULTLITE MAT		DEF	Default	\$ 332.01	\$ 408.96	\$ -	\$ 408.96	81.18%	\$ 332.01	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7402	ADD UE PROST S/D ULTLITE MAT		DEF	Default	\$ 358.56	\$ 441.61	\$ -	\$ 441.61	81.19%	\$ 358.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7403	ADD UE PROST B/E ACRYLIC		DEF	Default	\$ 356.35	\$ 438.91	\$ -	\$ 438.91	81.19%	\$ 356.35	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7404	ADD UE PROST A/E ACRYLIC		DEF	Default	\$ 537.85	\$ 662.46	\$ -	\$ 662.46	81.19%	\$ 537.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7405	ADD UE PROST S/D ACRYLIC		DEF	Default	\$ 703.38	\$ 866.36	\$ -	\$ 866.36	81.19%	\$ 703.38	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L7700	PROS SOC INSERT GASKET/SEAL		DEF	Default	\$ 128.23	\$ 140.14	\$ -	\$ 140.14	91.50%	\$ 128.23	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8000	MASTECTOMY BRA		DEF	Default	\$ 32.25	\$ 44.10	\$ -	\$ 44.10	73.03%	\$ 32.25	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8015	EXT BREASTPROSTHESIS GARMENT		DEF	Default	\$ 55.71	\$ 71.46	\$ -	\$ 71.46	77.96%	\$ 55.71	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8030	BREAST PROSTHES W/O ADHESIVE		DEF	Default	\$ 305.18	\$ 417.27	\$ -	\$ 417.27	73.12%	\$ 305.18	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8035	CUSTOM BREAST PROSTHESIS		DEF	Default	\$ 3,545.06	\$ 4,366.46	\$ -	\$ 4,366.46	81.19%	\$ 3,545.06	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8042	ORBITAL PROSTHESIS		DEF	Default	\$ 3,067.09	\$ 3,728.49	\$ -	\$ 3,728.49	82.26%	\$ 3,067.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8045	AURICULAR PROSTHESIS		DEF	Default	\$ 2,381.31	\$ 2,894.86	\$ -	\$ 2,894.86	82.26%	\$ 2,381.31	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8300	TRUSS SINGLE W/ STANDARD PAD		DEF	Default	\$ 82.51	\$ 112.81	\$ -	\$ 112.81	73.05%	\$ 82.51	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8310	TRUSS DOUBLE W/ STANDARD PAD		DEF	Default	\$ 133.07	\$ 181.95	\$ -	\$ 181.95	73.11%	\$ 133.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L8400	SHEATH BELOW KNEE		DEF	Default	\$ 13.49	\$ 18.45	\$ -	\$ 18.45	73.11%	\$ 13.49	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8410	SHEATH ABOVE KNEE		DEF	Default	\$ 18.77	\$ 25.66	\$ -	\$ 25.66	73.15%	\$ 18.77	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8415	SHEATH UPPER LIMB		DEF	Default	\$ 20.30	\$ 27.74	\$ -	\$ 27.74	73.18%	\$ 20.30	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8417	PROS SHEATH/SOCK W GEL CUSHN		DEF	Default	\$ 65.54	\$ 89.61	\$ -	\$ 89.61	73.14%	\$ 65.54	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8420	PROSTHETIC SOCK MULTI PLY BK		DEF	Default	\$ 16.68	\$ 22.79	\$ -	\$ 22.79	73.18%	\$ 16.68	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8430	PROSTHETIC SOCK MULTI PLY AK		DEF	Default	\$ 21.05	\$ 28.79	\$ -	\$ 28.79	73.12%	\$ 21.05	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8435	PROS SOCK MULTI PLY UPPER LM		DEF	Default	\$ 18.02	\$ 24.64	\$ -	\$ 24.64	73.13%	\$ 18.02	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8440	SHRINKER BELOW KNEE		DEF	Default	\$ 35.85	\$ 49.02	\$ -	\$ 49.02	73.12%	\$ 35.85	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8460	SHRINKER ABOVE KNEE		DEF	Default	\$ 57.14	\$ 78.12	\$ -	\$ 78.12	73.12%	\$ 57.14	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8465	SHRINKER UPPER LIMB		DEF	Default	\$ 41.81	\$ 57.17	\$ -	\$ 57.17	73.13%	\$ 41.81	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8470	PROS SOCK SINGLE PLY BK		DEF	Default	\$ 7.63	\$ 10.43	\$ -	\$ 10.43	73.14%	\$ 7.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8480	PROS SOCK SINGLE PLY AK		DEF	Default	\$ 10.53	\$ 14.39	\$ -	\$ 14.39	73.18%	\$ 10.53	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8485	PROS SOCK SINGLE PLY UPPER L		DEF	Default	\$ 11.42	\$ 15.63	\$ -	\$ 15.63	73.06%	\$ 11.42	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8500	ARTIFICIAL LARYNX		DEF	Default	\$ 565.76	\$ 773.54	\$ -	\$ 773.54	73.10%	\$ 565.76	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8501	TRACHEOSTOMY SPEAKING VALVE		DEF	Default	\$ 103.56	\$ 141.59	\$ -	\$ 141.59	73.14%	\$ 103.56	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8615	COCH IMPLANT HEADSET REPLACE		DEF	Default	\$ 443.07	\$ 538.64	\$ -	\$ 538.64	82.26%	\$ 443.07	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8616	COCH IMPLANT MICROPHONE REPL		DEF	Default	\$ 103.19	\$ 125.42	\$ -	\$ 125.42	82.23%	\$ 103.19	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8617	COCH IMPLANT TRANS COIL REPL		DEF	Default	\$ 90.10	\$ 109.56	\$ -	\$ 109.56	82.24%	\$ 90.10	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8618	COCH IMPLANT TRAN CABLE REPL		DEF	Default	\$ 25.74	\$ 31.31	\$ -	\$ 31.31	82.21%	\$ 25.74	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8619	COCH IMP EXT PROC/CONTR RPLC		DEF	Default	\$ 8,036.09	\$ 9,769.07	\$ -	\$ 9,769.07	81.61%	\$ 8,036.09	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.

POS	L8621	REPL ZINC AIR BATTERY		DEF	Default	\$ 0.63	\$ 0.75	\$ -	\$ 0.75	84.00%	\$ 0.63	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8624	LITH ION BATT CID, EAR LEVEL		DEF	Default	\$ 140.83	\$ 192.55	\$ -	\$ 192.55	73.14%	\$ 140.83	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8625	CHARGER COCH IMPL/AOI BATTERY		DEF	Default	\$ 206.39	\$ 225.55	\$ -	\$ 225.55	91.51%	\$ 206.39	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.
POS	L8629	CID TRANSMIT COIL AND CABLE		DEF	Default	\$ 156.40	\$ 213.82	\$ -	\$ 213.82	73.15%	\$ 156.40	The Medicare benchmark rate was selected based on the rate type (rural or non-rural) of the procedure code/modifier combination. For codes with a rate type of "Default", the non-rural Medicare rate was used.