

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

CPT Code	DESCRIPTION OF SERVICES	CPT/HCPC Description	STD. / MIN. FEE \$20/Svc.	MCR Rate 2021-2022	FY 2018-2019
New Patient Office Visit					
99202	New Pt Office Visit Problem Focused	New Pt Office Visit Problem Focused - Office/Op Visit, New Pt, 20 Min	300.00	72.37	260.00
99203	New Pt Office Visit Expanded Problem	New Pt Office Visit Expanded Problem - Office/Op Visit, New Pt, 30 Min	325.00	102.44	220.00
99204	New Pt Office Visit Detailed	New Pt Office Visit Detailed - Office/Op Visit, New Pt, 45 Min	350.00	165.35	238.00
99205	New Pt Office Visit Comprehensive	New Pt Office Visit Comprehensive - Office/Op Visit, New Pt, 60 Min	394.00	196.76	100.00
G0438	Medicare Annual Wellness New Pt	Annual wellness visit; includes a personalized prevention plan of service (PPS), initial visit	329.00	164.28	250.00
99381	Physical, <1	Preventive visit, infant	158.00	79.11*	25.00
99382	Physical, 1-4	Preventive visit, 1-4	165.00	82.62*	160.00
99383	Physical, 5-11	Preventive visit, 5-11	173.00	86.22*	165.00
99384	Physical, 12-17	Preventive visit, 12-17	195.00	97.58*	170.00
99385	Physical, 18-39	Preventive visit, 18-39	189.00	94.69*	200.00
99386	Physical, 40-64	Preventive visit, 40-64	219.00	109.50*	200.00
99387	Preventive visit, 65 & over	Preventive visit, 65&over	238.00	118.86*	200.00
G0402	Welcome to Medicare Physical	Welcome to Medicare Physical - Preventive, Initial	319.00	159.51	250.00
	Physical - Back To School/Sport		25.00	N/C	25.00

Established Office Visit Services					
97802	Medical nutrition, initial, 15 mins	Medical nutrition therapy, initial assessment and intervention, individual, face-to-face with patient, each 15 mins	72.00	35.93	318.80
97803	Medical nutrition, re-assess, 15 min	Medical nutrition therapy, re-assessment and intervention, individual, face-to-face with patient, each 15 mins	62.00	31.06	120.00
99211	99211 E/M Low Complexity	E/M Low Complexity - Office/Op Visit, Est Pt, 5 Min	295.00	21.53	140.00
99212	99212 E/M Problem Focused	E/M Problem Focused - Office/Op Visit, Est Pt, 10 Min	300.00	42.69	165.00
99213	99213 E/M Expanded Problem Focused	E/M Expanded Problem Focused - Office/Op Visit, Est Pt, 15 Min	310.00	70.69	200.00
99214	99214 E/M Detailed	E/M Detailed - Office/Op Visit, Est Pt, 25 Min	320.00	103.78	232.00
99215	99215 E/M Comprehensive	E/M Comprehensive - Office/Op Visit, Est Pt, 40 Min	330.00	139.03	40.00
99391	Physical, <1	Preventive visit, infant	143.00	71.24*	110.00
99392	Physical, 1-4	Preventive visit, 1-4	152.00	76.14*	155.00
99393	Physical, 5-11	Preventive visit, 5-11	152.00	75.89*	155.00
99394	Physical, 12-17	Preventive visit, 12-17	167.00	83.25*	170.00
99395	Physical, 18-39	Preventive visit, 18-39	170.00	85.08*	170.00
99396	Physical, 40-64	Preventive visit, 40-64	182.00	90.77*	180.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

G0439	Medicare Annual Wellness Est. Pt	Annual wellness visit; includes a personalized prevention plan of service (PPS), subsequent visit	222.00	111.07	225.00
99397	Preventive visit, 65 & over	Preventive visit, 65&over	195.00	97.58*	170.00
G0108	Diabetes OP self-mgmt, individual	Diabetes outpatient self-management training services, individual, per 30 mins	107.00	53.52	170.00
G0109	Diabetes OP self-mgmt, group (2+)	Diabetes outpatient self-management training services, group (2+), per 30 mins	30.00	14.78	180.00

Mental Health Office Visit

90853	BH Group Therapy	Group Psychotherapy	53.00	26.50	12.50
90832	BH Individual Therapy	Individual Psychotherapy 30 Min	133.00	66.33	31.25
90791	BH Initial Assessment	Psychiatric Dx Eval No Medical	271.00	135.45	63.75
90847	BH Intervention Family w/ Patient	Family Conjoint Psychotherapy W/Patient	222.00	151.11	63.75
90846	BH Intervention Family w/o Patient	Family Psychotherapy W/O Patient	213.00	110.87	53.75
G0443	Medicare Alcohol Counseling	Brief face-to-face behavioral counseling for alcohol misuse, 15 minutes	51.00	106.60	51.25
99406	Medicare Tobacco Counseling <3-10 min.	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate <3 min. to 10 min	29.00	25.24	N/C
99407	Medicare Tobacco Counseling >10 min.	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive >10 min.	55.00	14.22	N/C
G0437	Medicare Tobacco Counseling >10 min.	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive >10 min.	55.00	27.18	N/C

Procedures

10040	Comedone Extraction	Acne surgery	205.00	102.47	120.00
10060	Drainage of Skin Abscess, Single/Simple		225.00	112.65	100.00
10061	Drainage of Skin Abscess, Multiple		391.00	195.73	80.00
10120	Remove Foreign Body, Simple		288.00	143.91	75.00
10121	Remove Foreign Body, Complicated		515.00	257.56	60.00
10140	Drainage of Hematoma/fluid		317.00	158.70	70.00
10160	Puncture aspiration of abscess	Puncture drainage of lesion	247.00	123.27	110.00
11000	Debridement of infected skin >10%	Debridement Of Infected Skin, <10%	106.00	52.78	100.00
11043	Debridement of skin, subcutan tissue	Debridement: Skin,subcutaneous,muscle	436.00	217.89	50.00
11200	Removal Skin Tags		167.00	83.58	180.00
11201	Removal of added Skin Tags		36.00	17.95	130.00
11400	Excise lesion,trunk arm leg <=.5cm	Skin Lesion Removal, Trunk&Limbs, <0.5cm	234.00	117.01	40.00
11401	Excise lesion,trunk arm leg .6-1cm	Skin Lesion Removal, Trunk&Limbs, .6-1cm	285.00	142.45	320.00
11402	Excise lesion,trunk arm leg 1.1-2cm	Skin Lesion Removal, Trunk&Limb 1.1-2cm	316.00	158.07	280.00
11403	Excise lesion,limbs 2.1-Three cm	Skin Lesion Removal, Trunk&Limb 2.1-3cm	365.00	182.30	110.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

11404	Excise lesion,trunk arm leg 3.1-4cm	Skin Lesion Removal, Trunk&Limbs 3.1-4cm	412.00	206.23	20.00
11406	Excise lesion,trunk arm leg >4cm	Skin Lesion Removal, Trunk&Limbs >4cm	591.00	295.39	215.00
11420	Excise lesion, extremities, <=.5cm	Skin Lesion Removal, Extremities, <.5cm	236.00	117.78	20.00
11421	Excise lesion, extremities, .6-1 cm	Skin Lesion Removal, Extremities, .6-1cm	298.00	149.11	230.00
11422	Excise lesion, extremities, 1.1-2cm	Skin Lesion Removal, Extremities 1.1-2cm	335.00	167.63	200.00
11423	Excise lesion,extremity 2.1-ThreeCM	Skin Lesion Removal, Extremities 2.1-3cm	382.00	190.89	240.00
11424	Excise lesion, extremities, 3.1-4cm	Skin Lesion Removal, Extremities 3.1-4cm	442.00	220.83	270.00
11440	Excise lesion, face, <=.5cm	Skin Lesion Removal, Face <.5cm	260.00	130.03	200.00
11441	Excise lesion, face, .6-1cm	Skin Lesion Removal, Face, .6-1.0cm	320.00	160.15	30.00
11442	Excise lesion, face, 1.1-2cm	Skin Lesion Removal, Face, 1.1-2cm	257.00	178.43	25.00
11443	Excise lesion, face, 2.1-Three cm	Skin Lesion Removal, Face 2.1-3cm	425.00	212.26	60.00
11444	Excise lesion, face, 3.1-4cm	Skin Lesion Removal, Face, 3.1-4cm	532.00	266.20	225.00
11446	Excise lesion, face, 4.1cm+	Skin Lesion Removal, Face, >4.0cm	737.00	368.65	165.00
11719	Trim nails	Trimming of nails, any number	28.00	13.88	280.00
11720	Debridement of nail by any method	Debride Nail, 1-5	63.00	31.68	370.00
11730	Avulsion of nail plate, single	Removal of nail plate	208.00	103.85	565.00
11732	Avulsion of nail plate, each addtl	Removal of additional nail plate	63.00	31.33	270.00
11765	Wedge excision of skin of nail fold	Excision of nail fold, toe	322.00	160.79	210.00
12001	Repair Superficial Wounds <2.5 cm		168.00	84.10	300.00
17000	Destruct of premalig lesion, 1st	Destruction Benign/Premal Lesion: 1st	123.00	61.50	365.00
17003	Destruct of premalig lesion, 2-14	Destruction 2-14 Lesions	11.00	5.22	465.00
17004	Destruct of premalig lesion, 15+	Destruction 15 Or More Lesions	286.00	143.05	665.00
17110	Destruction, any method, up to 14	Destruction Of Warts, Etc <14 Lesions	208.00	103.96	325.00
20605	Intermediate joint or bursa	Drain/Inject Intermediate Joint/Bursa	96.00	48.12	300.00
20610	Major joint or bursa	Drain/Inject Major Joint/Bursa	113.00	56.61	210.00
21556	Excision tumor/soft tissue neck	Remove lesion neck/chest	995.00	497.43	165.00
28190	Remove foreign body, foot subcutane	Removal of foot foreign body	492.00	245.80	505.00
29105	App of long arm splint,shoulder-hand	Apply long arm splint	155.00	77.36	235.00
29125	Applic of static short arm splint	Apply forearm splint	121.00	60.71	335.00
29126	Applic of dynamic short arm splint	Apply forearm splint	145.00	72.63	150.00
29130	Application of static finger splint	Application of finger splint	78.00	38.85	270.00
29131	Application of dynamic finger splint	Application of finger splint	97.00	48.60	1100.00
54050	Destruction of penis lesion	Destruction, penis lesion(s)	253.00	126.31	280.00
54060	Excision of penis lesion	Excision of penis lesion(s)	353.00	176.51	25.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

56501	Destruction of vulva lesion	Destruction, vulva lesion(s)	273.00	136.51	75.00
57061	Destruction of vaginal lesion	Destruction vagina lesion(s)	234.00	117.07	95.00
57500	Excision of cervical lesion	Biopsy of cervix	253.00	126.44	15.00
69210	Removal of impacted cerumen	Remove impacted ear wax	90.00	44.80	35.00
81002	Urine Dipstick	Urinalysis nonauto w/o scope	7.00	3.48*	50.00
81003	Urinalysis, auto, w/o scope	Urinalysis, by dip stick automated, w/o microscopy	5.00	2.49*	75.00
81025	Urine pregnancy test	Urine Pregnancy test, visual color comparison methods	17.00	8.61*	100.00
87070	Wound Culture	Culture specimem, bacteria	19.00	9.57*	120.00
87205	Cervical Culture	Smear, staim & interpret	9.00	4.27*	150.00
88112	Cytopathology	Cytopathology	128.00	64.17*	275.00
92551	Hearing test, pure tone, air only	Pure tone hearing test, air	16.00	8.09	25.00
93005	EKG without Interpretation	Electrocardiogram tracing	16.00	7.75	70.00
93010	EKG for initial prevent	Electrocardiogram report	16.00	8.25	N/C
93923	Extremity study		250.00	125.14	150.00
94760	Measure blood oxygen level		5.00	2.12	275.00
94761	Measure blood oxygen level		8.00	3.78	140.00
98925	OMT 1-2 Regions	Osteopathic manipulation	61.00	30.24	125.00
98926	OMT 3-4 Regions	Osteopathic manipulation	88.00	43.69	50.00
98927	OMT 5-6 Regions	Osteopathic manipulation	115.00	57.47	75.00
98928	OMT 7-8 Regions	Osteopathic manipulation	140.00	69.93	150.00
98929	OMT 9-10 Regions	Osteopathic manipulation	167.00	83.71	15.00
G0102	Screen, Prostate Cancer	Screen, Prostrate Cancer	42.00	21.17	25.00
G0403	EKG Welcome to Medicare	Welcome to Medicare	32.00	16.00	20.00
Q0091	Screening pap smear, obtaining	Screening pap smear, obtaining	82.00	41.04	180.00

Injections					
0074A	BSTR ADM SARSCOV2 VAC10 Mcg/0.2 ml	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
91311	SARS-COV-2 Moderna	mRNA-LNP, spike protein, preservative free, 25 mcg/0.25 mL	0.00	0.00	0.00
0111A	SARS-COV-2 Moderna - administration 1st Dose	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
0112A	SARS-COV-2 Moderna - administration 2nd Dose	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
91308	SARS-COV-2 Pfizer	mRNA-LNP, spike protein, preservative free, 3 mcg/0.2 mL	0.00	0.00	0.00
0081A	SARS-COV-2 Pfizer - administration 1st Dose	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
0082A	SARS-COV-2 Pfizer - administration 2nd Dose	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
0083A	SARS-COV-2 Pfizer - administration 3rd Dose	Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00

Regional Health Clinic
Fee Schedule FY 2019-2020
Effective:

91310		SARS-COV-2 Sanofi Pasteur	Monovalent, preservative free, 5 mcg/0.5mL	0.00	0.00	0.00
0104A		SARS-COV-2 Sanofi Pasteur - administration	age >17 Immunization admin by intermusclar injection of severe acute respiratory syndrome	42.00	0.00	0.00
20526		Injection, therapeutic,carpal tunnel	Injection, therapeutic, carpal tunnel	145.00	72.49	25.00
20550		Inject,single tendon sheath/ligamnt	Injection Tendon Sheath	101.00	50.45	50.00
20551		Injection, single tendon origin	Injection(s); Single Tendon Origin/Insertion	103.00	51.31	50.00
20552		Injection; single/multiple trigger point(s) 1 or 2 muscles		105.00	52.56	30.00
20553		Injection trigger pt 3> muscles	Injection trigger pt 3> muscles	121.00	60.58	92.00
20600		Arthrocentesis, aspiration/injection	Drain/Inject Small Joint/Bursa	92.00	46.08	70.00
36415		Lab Blood Draw	Lab Draw	6.00	3.00*	10.00
64450		Inj of Anesth periph nerve or branch	Injection for nerve block	147.00	73.36	800.00
80162		Digoxin Therapeutic Drug Assay	Assay for digoxin	27.00	13.28*	N/C
82626		Dehydroepiandrosterone (DHEA)	Dehydroepiandrosterone	51.00	25.27*	75.00
82947		Glucose,blood (except reagent strip)	Assay quantitative, glucose	8.00	3.93*	N/C
82948		Glucose, blood, reagent strip	Reagent strip/blood glucose	9.00	4.31*	N/C
83001		Gonadotropin,foll stim hormone (FSH)	Gonadotropin (fsh)	37.00	18.58*	N/C
83002		Gonadotropin,luteinizing hormone(LH)	Gonadotropin (lh)	37.00	18.52*	70.00
85730		APTT-Thromboplastin time, partial	Thromboplastin time, partial	12.00	6.01*	40.00
86580		Tb intradermal test	Tuberculosis, intradermal	15.00	7.75	60.00
86787		Varicella titer	Varicella-zoster immunization	26.00	12.88*	15.00
90460		Vaccine admin-with counsel-1st comp	Immunization admin through 18yo via any route of admin, with counseling by physician or oth	32.00	15.87	50.00
90461		Vaccine admin-with counsel-each addl	Each additional vaccine/toxoid component (list separately in addition to code for primary procedure)	25.00	12.17	35.00
90471		Admin, Immunization	Immunization Admin	32.00	15.87	45.00
90472		Admin,Immunization each additional	each additional vaccine	25.00	12.17	36.00
90473		Admin, Immunization intranasal or oral	Immunization Admin, intranasal or oral	31.00	15.87	36.00
90474		Admin Immun intranasal/oral each add	Immunization Admin, intranasal or oral, each additional	24.00	12.17	125.00
90632	✓	Hepatitis A Vaccine, adult, intramuscula	Hepatitis A Vaccine, adult, intramuscular	145.00	72.25**	60.00
90634		Hepatitis A Vaccine,pediatric/adolescent 3 Dose	Hepatitis A Vaccine,pediatric/adolescent 3 dose intramuscular	69.00	34.17	110.00
90648		Hib Vaccine, 4 Dose, Intramuscular	Hemophilus influenza b vaccine (Hib), PRP-T conjugate (4 dose schedule) for intramuscular use	22.00	10.61*	200.00
90649		HPV4 Vaccine (Gardasil)	Human Papilloma virus (HPV) vaccine, types 6, 11, 16, 18 (quadrivalent), 3 dose schedule, for intramuscular use	335.00	167.39*	225.00
90650		HPV2 Vaccine (Cervarix)	Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, 3 dose schedule, for intramuscular use	269.00	134.40*	90.00
90651	✓	VFC - HPV9	HPV9 - types 6,11,16,18,31,33,45,52 & 58 nonavalent - 3 dose - intramuscular	477.00	238.54**	406.00
90658		Flu Vaccine,trivalent, intramuscular	Flu Vaccine,trivalent, intramuscular	32.00	16.14*	95.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

90662		Flu Vaccine, intramuscular	Flu Vaccine, intramuscular	102.00	50.93*	5.00
90670	✓	Pneumococcal conjugate vaccine	Pneumococcal conjugate vaccine	334.00	188.26**	90.00
90680	✓	Rotavirus vaccine, 3 Dose schedule	Rotavirus vaccine, 3 Dose schedule	170.00	87.97**	10.00
90685	✓	Flu Vaccine, Quad, child 6-36 mos., preserve free	Flu Vaccine, Quad, child 6-36 mos., preserve free	95.00	18.08**	95.00
90686	✓	Flu Vaccine, Quad, preserve free	Flu Vaccine, Quad, preserve free	40.00	16.87*	90.00
90688	✓	Flu Vaccine, Quad, child >3, intramuscular	Flu Vaccine, Quad, child >3, intramuscular	36.00	15.77**	5.00
90698	✓	Pentacel (DTaP-Hib-IPV)	diphtheria, tetanus, pertussis, Haemophilus influenzae type b, inactivated polio (DTaP-Hib-IPV) (Pentacel)	35.00	97.01*	35.00
90707	✓	MMR titer	MMR virus immunization	250.00	80.25*	250.00
90710	✓	ProQuad (MMRV), live, subcut	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	125.00	209.38*	125.00
90713	✓	Poliomyelitis immunization	Poliomyelitis immunization	40.00	34.41*	40.00
90714	✓	Td immunization, 7 years or older	Typhoid immunization	50.00	18.89*	40.00
90715	✓	Tdap, 7 years or older & adult	Tetanus, diptheria toxoids and acellular pertussis vaccine (Tdap) 7 years or older	64.00	40.89*	85.00
90716	✓	Varicella (chicken pox) vaccine, live	Chicken pox vaccine	236.00	141.72*	20.00
90732	✓	Pneumococcal immunization	Pneumococcal immunization	200.00	107.22*	200.00
90733	✓	Meningococcal immunization	Meningococcal immunization	252.00	126.08*	260.00
90734	✓	Meningococcal Conjugate Vaccine, MCV4	Meningococcal Conjugate Vaccine, Serogroups A,C,Y & W-135	325.00	102.50*	325.00
90736		Herpes Zoster (shingles), live, subcut	Herpes Zoster (shingles), live, subcut	324.00	161.63*	25.00
90744	✓	Hepatitis B Vaccine, pediatric/adoles 3 d	Hepatitis B Vaccine, pediatric/adoles 3 dose, intramuscular	47.00	23.42**	75.00
90746	✓	Hepatitis B Vaccine, adult 3 dose, intra	Hepatitis B Vaccine, adult 3 dose, intramuscular	122.00	61.11**	124.00
G0008		Administration, Flu Vaccine	Administration of influenza virus vaccine	N/C	N/C	15.00
G0009		Admin, Pneumococcal Vaccine	Administration of Pneumococcal Vaccine	N/C	N/C	15.00
G0010		Administration, Hepatitis B Vaccine	Administration of hepatitis B vaccine	N/C	N/C	15.00
J0290		Injection, ampicillin 500mg	Injection, ampicillin	0.00	1.84*	10.00
J0500		Injection, dicyclomine 20mg	Injection, dicyclomine	128.00	9.87*	100.00
J0696		Injection, ceftriaxone sodium 250mg	Injection, ceftriaxone sodium	2.00	.79*	26.70
J0780		Injection, prochlorperazine 10mg	Injection, prochlorperazine	10.00	4.88*	25.00
J1050		Depo-Provera Injection	Injection, medroxyprogesterone	0.00	.32*	165.00
J1670		Adult T-Dap Injection Code	Injection, tetanus immune globulin	1113.00	556.40*	495.00
J1940		Injection, furosemide 20mg	Injection, furosemide	2.00	.67*	10.00
J3250		Inject, trimethobenzamide hcl 200mg	Injection, trimethobenzamide hcl	52.00	34.69*	52.00
J3420		Injection, vitamin B12 up to 1000mcg	Injection, vitamin b-12	2.00	1.05*	10.00

Labs						
82043		Urine, microalbumin, quantitative	Microalbumin, quantitative	12.00	5.78*	12.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

82044	Urine, microalbumin, semiquantitative	Microalbumin, semiquant	8.00	3.95*	25.00
82270	Fecal occult blood, neoplasm screen	Blood Occult, Feces, 1-3 Times	9.00	4.38*	35.00
82272	Fecal occult blood, non neoplasm scr	Blood occult, fecal, non colorectal neoplasm screening	9.00	4.23*	15.00
82274	Fecal occult blood, by immunoassay	Blood occult, by fecal hemoglobin determination by immunosassy	32.00	15.92	N/C
82947	Assay quantitative, glucose	Glucose, quantitative, blood (except reagent strip)	8.00	3.93*	N/C
82950	Glucose, post glucose dose	Glucose test	10.00	4.75*	N/C
82951	Glucose tolerance (GTT) 3 specimens	Glucose tolerance test (gtt)	26.00	12.87*	N/C
82952	GTT each over 3 - use with 381	Gtt-added samples	8.00	3.92*	N/C
82977	Glutamyltransferase, gamma (GGT)	Assay of ggt	15.00	7.20*	N/C
83020	Hemoglobin, electrophoresis	Assay hemoglobin	26.00	12.87*	N/C
83036	Glycated Hemoglobin A1C	Glycated Hemoglobin A1C	20.00	9.71*	25.00
83037	Rapid A1C		20.00	9.71*	35.00
85210	Clotting;fac II,prothrombin,specific	Blood clot factor ii test	26.00	12.98*	N/C
85610	Prothrombin time	Prothrombin time	9.00	4.29*	N/C
85611	Prothrombin time,subst,plasma fract	Prothrombin test	8.00	3.94*	30.00
86003	Allergen specific IgE, each allergen	Allergen specific ige	11.00	5.22*	N/C
86361	CD4 T-lymphocyte count	T cells; absolute CD4 count	54.00	26.78*	N/C
86480	Quantifuron, TB blood test	Tuberculosis test, cell mediated immunity antigen response measurement; gamma interferon	124.00	61.98*	N/C
86644	CMV IgG (cytomegalovirus)	Cmv antibody	29.00	14.39*	N/C
86777	Toxoplasma IgG	Toxoplasma	29.00	14.39*	N/C
86900	ABO Only	Blood typing, abo	6.00	2.99*	N/C
86901	Rh (D)	Blood typing, rh (d)	6.00	2.99*	N/C
86904	Antigen Screen	Blood typing, patient serum	26.00	12.94*	30.00
87110	Chlamydia Culture	Culture, chlamydia	32.00	15.84*	N/C
87536	HIV RNA level	Hiv-1, Quantification	170.00	85.10*	N/C
87590	Gonorrhea Culture	Neisseria Gonorrhoeae, Direct Probe	54.00	26.88*	40.00
87636	SARSCIV2 & INF A&B AMP PRB		143.00	142.63	
87880	Streptococcus A, Optical	Steptococcus, group A	33.00	16.32*	34.00
88738	Non-Invasive Hemoglobin	Hemoglobin Hgb, quantitative, transcutaneous	10.00	5.02*	N/C
99000	Urine Specimen	Specimen handling	6.00	2.97*	20.00
	THC Drug Screen				

Treatments					
94640	Nebulizer Treatment		26.00	12.80*	26.00

Regional Health Clinic
 Fee Schedule FY 2019-2020
 Effective:

Education					
94664	Nebulizer Education		24.00	11.81	95.00
99406	Smoking Cessation Education 3-10 min	Smoking and tobacco use cessation counseling visit >3 up to 10 mins	29.00	14.22	30.00
99407	Smoking Cessation Education >10 min	Smoking and tobacco use cessation counseling intensive >10 mins	55.00	27.18	35.00
99408	Drug and Alcohol Use Educat 15-30 mi	Alcohol and/or Substance Abuse structured screening 15-30 mins	55.00	27.26*	68.00
99409	Drug and Alcohol Use Educat >30 min.	Alcohol and/or Substance Abuse structured screening >30 mins	106.00	53.20*	130.00
	Educ - Pt dressing chgs/wound care				
	Educ -Heart Disease,daily weight/BP				
	Educ -Vaccination info sheet review				
	Educat- Depression follow-up plan				
	Education - Colorectal screening				
	Education - Diabetic daily care				
	Education - Hypertension				
	Education - Infection control				
	Education - Lipid therapy				
	Education - Medication training				
	Education - Nutrition				
	Education - Rescue meds/inhalers				
	Education - Signs + Symptoms to rpt				25.00
	Education - STD				50.00
	Education on Exercise/Physical Activity				25.00