

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
GENERAL ANES	897			370
GEN COMPLEX ANES - 1ST 30 MIN	1,415.00			370
GEN COMPLEX ANES - ADDL 15 MIN	625			370
REGIONAL ANES - 1ST 30 MIN	1,838.00			370
REGIONAL ANES - ADDL 15 MIN	461			370
GENERAL ANES - 1ST 30 MIN	2,419.00			370
GENERAL ANES - ADDL 15 MIN	608			370
MAC ANES - 1ST 30 MIN	1,265.00			370
MAC ANES - ADDL 15 MIN	316			370
BLD CPP ISSUE	179	86922		300
RBC CROSSMATCH EA	334	86922		302
BLD VOLUME RED PLTS EACH UNIT	84	86960		390
BLD WASHED RBC/CROSSMATCH	179	86922		300
BLD RH PHENOTYPING COMPLETE	176	86906		302
BLD RBC ANTGN TYPING IN-HOUSE	81	86905		300
BLD UBS RBC ATGN TYPING (CENKS)	81	86905		302
BLD UBS RBC ATGN TYPG (ESCFY)	81	86905		302
BLD UBS ATGN TYPING (CENKS) A	81	86905		302
BLD UBS ATGN TYPG (ESCETC) A	81	86905		302
BLD RBC PHENOTYPING PT INHOUSE	87	86905		300
BLD ANTIBODY SCREEN RBC EACH	101	86850		302
BLD ANTIBODY ELUTION RBC EACH	130	86860		302
BLD ANTIBODY ELUTION	140	86860		302
BLD AB IDRBC ANTIB EA PANEL	188	86870		302
BLD ANTIBODY IDENTIFICATION	188	86870		302
BLD ANTGN SCREEN EACH UNIT	87	86902		302
BLD ANTIBODY SCREEN	126.55	86850		302
BLD ABO TYPING 2	94	86900		302
BLD RH TYPING 2	195	86906		302
BLD ANTIBODY TITER	109	86886		302
BLD RBC AG TYPING NON ABO/RH	87	86905		302

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BLD BLOOD TYPING ABO	120	86900		302
BLD RH (DU) TYPING	86	86901		300
BLD COMPARABILITY TEST EA UNIT	114	86921		302
FBLD FETAL-MATERNAL BLD SCRIN	87	85461		390
BLD DIRECT COOMBS/DIRECT	90	86880		302
FFP THAWING EA	63	86927		302
BLD INDIRECT COOMBS	59	86885		300
BLD RH (D)	86	86901		302
PLITTING BLOOD PRODUCTS EA	50	86985		302
BLD TRANSFUSION RX W/ RPT	168	86078		302
BLD RBC LEUKORED IRRAD ISSUE	965	P9040		390
RBC LEUKORED CMV IRRAD ISSUE	864	P9058		390
BLD PLT LEUK CMV NEG IRRAD I	2,438.00	P9053		390
BLD RBC LEUKORED AUTOLOG ISSUE	692	P9016		390
RBC LEUKORED DIRECTED ISSUE	692	P9016		390
BLD FFP DIRECTED DONOR ISSUE	271	P9017		390
BLD RBC LEUK IRRAD PEDI ISSU	965	P9040		390
BLD ALIQUOTSPLIT UT/ISSUE	97	86985		302
BLD RBC WASH LEUKRED RAD ISSUE	1,489.00	P9057		390
RBC WASH LEUK RAD CMV ISSUE	864	P9058		390
RBC LEUKO-POOR DEGLYCEROLIZED	1,186.00	P9039		390
BLD COMPONENT POOLING	47	86965		302
BLD COMPT IRRADIATION PER UNIT	103	86945		302
BLD CRYOPOOR PLASMA ISSUE	290	P9044		390
BLD CRYOPRECIPITATE ISSUE	367	P9012		390
BLD PLTS POOLED LUEKOREDUC	434	P9031		390
BLD PLTS POOLED LR IRRAD	600	P9033		390
BLD FRESH FROZEN PLASMA/ISSUE	233	P9059		390
GRANULOCYTES/ISSUE	4,760.00	P9050		390
BLD LEUKODEPLETED RBC ISSUE	732	P9016		390

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BLD FFP DONOR RETESTED	102	P9060		390
BLD PLT LEUKOREDUC APHER/PHER	2,039.00	P9035		390
BLD PLT LEUKORED IRRAD ISSUE	3,502.00	P9037		390
BLD PLTS DIRECTED DONOR ISSUE	1,905.00	P9035		390
BLD RED BLOOD CELLS AUTOLOGOUS	960	86890		390
BLD LEUKORED CMV NEG RBC ISSUE	825	P9051		390
BLD RHOGAM/RHIG/ISSUE	270.75	J2790		636
BLD LEUKORED WASHED RBC ISSUE	982	P9022		390
BLD RBC PRETREAT ABSOR	137	86978		302
BLD BLOOD TYPING ABO	86	86900		302
BLD RBC PRETREAT CHEMICAL	92	86970		302
RBC AG SCREEN PATIENT SERUM	63	86904		302
BLD PLATELET ANTIBODY ID	213	86022		302
BLD COLD AGGLUTININ SCRIN	81	86156		302
BLD RBC PRETREAT SERUM INHIBIT	108	86977		302
BLD PLATELET ANTIBODY ID	213	86022		302
BLD COLD AGGLUTININ TITER	77	86157		302
BLD TRANSFUSION UNLSTD PROC	446	86999		302
BLD THERAPEUTIC PHLEBOTOMY	194	99195		300
SEL CATH PLMT VENOUS 2ND ORDER	1,654.00	36012		361
ARTERIOGRAM PULMONARY BILAT SI	6,743.00	75743		323
INTRODUCTION CATHETER AORTA	1,724.00	36200		481
1ST ORD ABD/PELV/LOWER EXT	1,405.00	36245		481
ANGIOGRAPHY PELVIS SLCTV S&I	3,415.00	75736		323
ARTERIOGRAM AORTA W/RUNOFF	3,476.00	75630		323
INTRO OF CATHETER AORTA	1,724.00	36200		361
SEL CATH ART 1ST ABD/PEL LL	1,503.00	36245		361
CCI ARTERIOGRAM AORTA FLUSH SI	3,533.00	75625		323
ARTERIOGRAM AORTIC ARCH	3,273.00	75605		323

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EXTREMITY/BILAT/S&I	3,455.00	75716		323
EXTREMITY/UNILAT/S&I	3,080.00	75710		323
SEL CTH + 2ND/3RD ABD/PEL/LEXT	874	36248		361
ANGIO VISCERAL W/W/O FLUSH S&I	3,550.00	75726		323
RENAL/BIALT/INCLUDE/FLUSH	3,524.00	75724		323
US GUIDED VASCULAR ACCESS	703	76937		402
US GUID/NDL PLMT/ASPIRAT S&I	1,304.00	76942		402
INSERT CV DEVICE >5YRS	4,248.00	36561		361
REPLACE TUNNEL CV CATH	4,366.00	36582		361
TUNNEL PORT/LINE REMOVAL	1,569.00	36590		361
COMPLETE REPLCMT TUNNELED CV C	2,333.00	36581		361
REPOSITIONING CV LINE/FLUORO	982	36597		361
INST CVC NON TUNNEL >5YRS	1,566.00	36556		361
PICC/PLMT?CVP >5YRS	2,699.00	36569		361
CHEST SINGLE VIEW/DOCUMENT	548	71045		324
RIGHT HEART CATHERIZATION	6,658.61	93451		481
ABDOMEN SINGLE AP VIEW DOC	294	74018		320
INJECTION OF SINUS TRACT	633	20500		361
CHANGE GASTROSTOMY TUBE	564	43760		361
OCC/EMB TRANSCATH CNS	4,576.29	61624		481
INS TIPS	7,827.05	37182		481
REV TIPS	9,289.00	37183		361
EMBO/HEAD/NECK/BRACHIOCEP H	6,815.00	61626		361
SEL/CATH/PLMT/PULM ART/RT/LT	1,160.00	36014		361
2ND ORD/ABD/PELV/LOWER EXT	1,645.00	36246		361
3RD ORD/ABD/PELV/LOWER EXT	1,702.00	36247		361
RT & LT HEART CATH W ANOMOLIES	9,395.60	93531		481
REMOVE CVA DEVICE OBSTRUCT S&I	765	75901		320
INJ SUPRAVALVULAR AORTO S&I	1,079.00	93567		481
FLOUROSCOPY UP TO 1 HR	1,141.00	76000		320
TRANSCATH THERAPY/INF NONCORON	3,011.00	75896		320
ENDOVASC RPR THORACIC W/LT S&I	1,972.00	75956		320
E/V RPR TAA + THOR AORT EXT	5,683.00	33880		361

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ENDOVASC RPR THORACIC W/O S&I	1,843.00	75957		320
E/V RPR TAA W/O LT SUB ART	6,640.00	33881		361
ENDOVASC RPR THORACIC PROX S&I	1,157.00	75958		320
INITIAL INSERT TAA ENDO PROST	5,302.00	33883		361
ENDOVASC RPR THORACIC DIST S&I	1,142.00	75959		320
PLACE DIST EXT PRSTH DELAYED	5,606.00	33886		361
VENACAVOGRAM INFERIOR S&I	2,742.00	75825		321
ARTERIO ADRENAL UNI S&I	2,968.00	75731		323
SEL CATH ART 1ST ABD/PEL LR	1,405.00	36245		361
ARTERIO ADRENAL BILAT S&I	4,000.00	75733		323
CCI CATHETER GROUP E	3,182.70	C1887		272
CATHETER GROUP C1887 D	1,379.17	C1887		272
VENACAVOGRAM SUPERIOR S&I	2,208.00	75827		321
CCI PERCUT DRAIN ABSCESS S&I	1,418.00	75989		481
NEPHROSTOMY DRA TUBE PLACE	1,607.00	74475		320
CCI INTRO OF INTRA CATH RENAL	1,938.00	50392		481
VENOUS SMPLE W OR WO ANGIO S&I	2,485.00	75893		321
INTRO/CATH/URETER OR STENT	2,256.00	50393		481
CHG OF BILIARY DRAIN CATHETER	1,596.00	47525		481
STENT/CATH THRU RENAL TO URETE	1,441.00	74480		320
INTRO NEED/CATH CAROTID/VERTEB	1,287.00	36100		361
TRANSLUMB/AORTA STICK	1,094.00	36160		361
TRANSCATH INTRO INTRAVAS STENT	4,087.00	75960		320
STENT/NON CORO/CAROTID/VERT	13,218.00	37244		481
TRANSCATHETER BX-VASCULAR	2,166.45	75970		320
XR PORTOGRAM W/O HEMODYNAM S&I	2,472.00	75887		320
XR PORTOGRAM W/ HEMODYNAM S&I	3,371.00	75885		320
PERC PORTAL VEIN CATHERIZATION	1,492.00	36481		361

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GASTRO/PEG TUBE PLACEMENT	1,864.00	43246		361
INTRO/CATH/SVC/IVC	1,437.00	36010		361
INTRO OF NEEDLE/INTRACATH VEIN	167	36000		481
VENOGRAM EXTREM UNI S&I	1,249.00	75820		321
XR ANGIO EA ADD VESSEL S&I	2,185.00	75774		323
ARTERIOGRAM BRACHIAL BILAT S&I	2,565.00	75710	50	323
ARTERIOGRAM SUPERMESENTERIC	3,550.00	75726		323
ANGIO/BRACH/RETRO/S&I	3,049.00	75710		323
ARTERIOGRAM SUBCLAVIAN UNILAT	2,565.00	75710		323
ARTERIOGRAM VISCERAL	3,550.00	75726		323
CCI VENACAVA FILTER PLACEMENT	2,499.00	75940		320
UMBRELLA/IVC/PART/COMPLE	4,100.00	37620		481
DVC EMB LC BEADS	4,281.32	C1884		278
GDWIRE DEFLECTING	319.87			272
GUIDEWIRE GROUP A	93.36	C1769		272
TRANSDUCER	990.88			271
CCI DILATOR VESSEL	43.02			271
GUIDEWIRE GROUP E	237.64	C1769		272
CATHETER GUIDE GROUP B	237.64	C1887		272
CATHETER GUIDE GROUP C	530.45	C1887		272
FASTENER PERCU-STAY	58.48	A5200		272
UNCOATED STENT GROUP W/ DELIV	3,978.38	C1876		278
SHEATH GROUP E	3,182.70	C1894		272
CONTOUR MICRONS (EMBOLIZATION)	474.55			278
VENA CAVA FILTER	3,913.11	C1880		278
EMBOLIZATION COILS GROUP A	410.7			272
EMBOLIZATION COILS GROUP B	1,379.17			272
EMBOLIZATION COILS GROUP C	3,182.70			272
NDL ANGIOGRAPHIC	24.84			272
STENT S/EXP PRECISE	5,097.02	C1768		278
NEFF KIT	511.96	C1894		271
SYR INFLATION	198.1			272
LOCM IODINE 300-399/ML	3.09	Q9967		255
PL OCC DEVICE A/V	625	G0269		481
BALLOONS/CORO/PERIPH	1,290.75	C1725		272

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BALLOON GROUP A	477.41	C1725		272
CATH DIALYSIS	1,250.00	C1750		278
SHEATH GROUP C	530.45	C1894		272
PICC 4F SINGLE LUMEN	360	C1751		278
PICC 5F DUAL LUMEN	468.65	C1751		272
MULTIPURPOSE DRNG CATH	287	C1729		272
INSERT CVC NON TUNNEL <5YRS	1,637.00		36555	361
PUNC SHUNT TUBE ASP/INJ	678.87		61070	481
CATHETER GUIDE GROUP A	93.36	C1887		272
GUIDEWIRE GROUP D	1,379.17	C1769		272
CCI GUIDEWIRE GROUP- C	530.45	C1769		272
GUIDEWIRE GROUP B	237.64	C1769		272
PTA BALLOON GROUP B	1,379.17	C1725		272
CCI DEVICE INFLATION	245.26			272
INFLATION DEVICE/ABBOTT	245.26			270
PLEUR DRAIN W/INSRT CATH W/IMG	1,730.00		32557	360
VRTPLS PERC INJ CRVT W/IMG	3,564.00		22510	361
VRTPLS PERC INJ LMBSAC W/IMG	3,492.00		22511	361
VRTPLS PERC INJ ADD W/IMG	2,525.00		22512	361
KYPHOPLASTY PERC THOR W/IMG	7,353.00		22513	361
KYPHOPLASTY PERC T/L W/IMG	6,485.00		22515	361
KYPHOPLASTY PERC LUMB W/IMG	7,968.00		22514	361
SEL ART 1ST THOR/BRACH/CAR	1,664.24		36215	481
CCI PL CATH THOR/BRAC 2ND	1,988.00		36216	361
SEL CATH ART 2ND THOR/BRACH L	1,786.00		36216	LT 481
SEL ART 3RD THOR/BRACH/CAR	1,694.35		36217	481
SEL ART 1ST ABD/PEL/LEXT BILAT	1,405.00		36245	50 361
TRANSCATHETER BIOPSY	2,223.44		37200	481
CAROTID/CERV/BILAT/S&I	3,724.00		75680	323
ARTERIOGRAM PULMONARY UNI S&I	4,930.00		75741	323
ANGIO EA ADD AFTER BASIC	2,185.00		75774	323
VENOGRAPHY HEPATIC WO HEMO S&I	2,898.00		75891	321
TRANSCATH EMBOLIZATION	3,803.00		75894	320
SHEATH GROUP A	93.36	C1894		272

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DVC VASC CLSR	800	C1760		278
STENT, NON-COATED/NON-COVERED	3,989.68	C1876		278
FLUORO CV ACCESS PLMT S&I	771	77001		320
PRIMARY/THROMBECT/ART/NON CORO	5,795.00	37184		361
MECH/VEIN/THROMBECTOMY	5,760.64	37187		481
CCI CHG GTB TO GJTB PERC FLRO	2,035.00	49446		361
RPLC DUODEN/JEJUN TB FLUORO	1,092.00			361
PLUG AMPLATZER II	2,472.00			278
LT HRT ART/VENTRIC ANGIO S&I	19,430.00	93458		481
FEMPOP PTA	12,265.00	37224		361
ANGIOGRAM SPINAL S&I	3,483.21	75705		323
LUMBAR PUNCTURE DRAIN CSF	1,680.00	62272		361
SNARE RETRIEVAL GROUP A	1,722.90	C1773		272
EMBOLIZATION COILS GROUP D	6,365.40			272
SYSTEM EMBOLIC LIQUID ONYX	6,229.00			278
BALLOON GROUP E	7,161.08	C1725		272
CATHETER GROUP C1757 D	1,379.17	C1757		278
PICC/PLMT/CVP <5YRS	2,743.00	36568		361
SHEATH GROUP/ C1892 B	237.64	C1892		278
SHEATH GROUP C1892 C	530.45	C1892		278
REPL PICC W/O PORT/PUMP	1,534.00	36584		361
REPL CATH N-TNL W/O PORT	2,870.80	36580		481
INJ SCLERO SOLN VEIN LIMB/TRNK	240	36468		361
CCI INJ SCLERO SOLN VEIN SGL	355	36470		361
INJ SCLERO SOLN VEIN MULTI LEG	341	36471		361
FLUORO GUIDE BX/ NDL PLACE	646	77002		481
INST VENA CAVA FILTER S&I	6,475.00	37191		361
PLACE CATH RENAL 1ST ORDER UNI	2,948.00	36251		361
REMOVAL VENA CAVA FILTER ENDO	3,179.00	37193		360
CATH THROMBECTOMY/EMBOLETOMY	1,567.62	C1757		278
PLACE CATH ARTERY PULM SEG	1,149.00	36015		361
SLCTV CATH CARTID/INNM ART S&I	2,398.00	36222		361
SLCTV CATH CAROTID/INNM AR	2,220.00	36223		361

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SLCTV CATH XTRNL CAROTID ANGIO	2,301.00	36227		361
SLCTV CATH INTRCRNL BRNCH ANGI	2,234.00	36228		361
TRANSCTH RET PERC INTRV FB S&I	1,468.00	37197		361
SLCTV CATH INTRNL CAROTID ART	2,446.00	36224		361
SLCTV CATH VERTEBRAL ART ANGIO	2,650.00	36226		361
CCI THORACENTESIS W/IMAGE GUID	561	32555		481
LIGATION OF INF VENA CAVA	4,236.00	37619		361
CCI INS CECOS/OTHR TBE FLUORO	1,069.00	49442		361
CCI RPLC G/CEC TB UNDER FLUORO	903	49450		361
PICC/PLMT/CVP <5YRS	2,743.00	36568		761
VASC EMBLZ/OCCL VEN NO HEMO SI	14,255.00	37241		361
CCI VASC EMBLZ/OCCL ART S&I	12,356.00	37242		361
VASC EMBLZ/OCCL OR S&I	12,356.00	37243		361
VASC EMBLZ/OCCL ART/VEN HM S&I	13,218.00	37244		361
TRANSCTH INTRV STNT OPN/PER SI	8,657.00	37236		361
TRANSCATH INTRVSC STNT OPN/PRC	8,657.00	37238		480
CATH CECOSTOMY PERCUTANEOUS CH	586.6	C1769		278
TUBE GASTRO JEJENO LOW PROFILE	450	B4088		278
POWER PICC DUAL LUMEN 4FR	365	C1751		278
MINI STICK 5FR	115	C1894		272
CCI DELOT PORT W/THROMB AGENT	524	36593		361
EXCH BIL DRN CATH PERC RAD	4,300.00	47536		361
CCI PICC 3F SNGL LUM	360	C1751		278
DRAIN SUC SET 500ML	90	A7048		272
CATH MAHURKAR ACUTE	300	C1752		278
THRMBC/NFS DIALYSIS CIRCUIT	10,320.00	36905		481
TRLUML BALO ANGIOP 1ST VEIN	5,110.00	37248		481
TRLUML BALO ANGIOP 1ST ART	5,110.00	37246		481
REM PERICATHETER MAT CV DEV	2,500.00	36595		761

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SCLERO LYMPHATIC FLUID COL.	1,450.00	49185		761
INJECT L/SPINE W/IMG	510	62323		361
CCI INJ EPID BLOOD/CLOT PATCH	1,700.00	62273		360
PERQ ARTERIAL TRANSLUM THROMECS	5,300.00	61645		361
PTC W/IMPLNT ATRIAL	19,580.00	93580		360
CCI CONSC SED 5+YR 1ST 15 MIN	296.04	99152		370
PTC CLOS PAT DUCT ARTERIOUSUS	22,000.00	93582		481
INJ RT ATRIAL/VENTRIC ANGIO	2,200.00	93566		481
INJ CONGENITAL CARD CATH	2,330.00	93563		481
CCI INJ CONGEN HRT ART/GRAFT	1,625.00	93564		481
CCI REM URETERAL STENT TRANSUR	3,475.00	50386		360
CHEST TUBE FOR EMPYEMA A	834	32551		361
ANGIOPLAST BLLN TRNSL ADDL ART	4,800.00	37247		481
ANGIOPLASTY BALLN DIALY CIRC	5,900.00	36907		481
ANGIOPLAST BLLN TRNS ADDL VEIN	4,800.00	37249		481
20501 FISTULA OR SINUS TRACT	450	20501		361
*TUBE UNCUFFED FEN 7	156.53			272
*CATH VIP 7.0	317.86			272
TUBE ENTERAL	36.75			272
*SPLINT RITE BOOT SM	106.09			271
*SPLINT RITE BOOT MED	106.09			271
*SPLINT RITE BOOT LG	106.09			271
*KNEE IMOBILIZERS 16	65.92			271
*KNEE IMOBILIZERS 20	136.92			271
DRESSING PRESSURE ASSISTE	257.5			270
12239 PARANCHYMAL BOLT 110-4B	1,154.63			272
12241 CRANIAL ACCS KIT INS-HI	275.01			272
12242 VENTRICLR BOLT KIT 110-	1,724.01			272
SCREW 218.045	92.63			278
SET PTUERMAN PLEURAL C-PPD-85	215.27			272
L1832 KO ADJ JNT POS RIGID SUP	1,193.77	L1832		274
CATH PACK - 13531	503.67			272

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TUBE TRACH OPEDI	173.06			272
TUBE TRACH PEDI	173.06			272
TUBE TRACH 3PEDI	173.06			272
CATH FOLEY 8FR 5CC BAL	41.2			272
*CATH FOLEY 16FR 5CC BAL	50			272
TUBE TRACH PORTEX ID 9.0 FEN	194.67			272
TUBE TRACH PORTEX ID 8.0 LPC	224.98			272
*CATH PICC SNGL-LUM KIT 2	439.72	C1751		278
*TUBE CHEST 16FR	45.32			278
TUBE CHEST 20FR	56.97			272
TUBE CHEST 28FR	56.97			272
SUSPENSORY, LG	16.24			271
TRACH TUBE CUFF DIC 8.0	236.84			271
SLINGS	10.3	A4565		271
*CHEST TUBE 12FR	45.32			278
20481 BIOFLO MIDLINE DUAL LUM	2,550.00	C1751		278
80344 - PICC LINE 4FR BIOFLO	3,150.00			272
63766 - WAYNE PNEUMO TRAY	718			278
70728 - GVL 3 STAT	750			271
70137 - GVL 4 STAT	640			271
KT MICROSENSOR SKULL BOLT	4,096.00			278
KT MICROSENSOR 3T BASIC	3,960.00			270
80517- EXT DRAIN SYSTEM CODMN	908	C1751		272
80518-DRAINAL ACCESSKT CODMN	1,488.00	C1751		272
52588-EXT DRAIN BAG CODMAN	278	C1751		272
CTH DBLE LUMEN 3.5FR	596			278
CATH POLLACK	67	C1758		272
ENDOSHEAR 176645 OR	545.35			271
BLADE DERMATONE	158.23			272
POST OP HINGED KNEE BRACE	393.57			271
CATH BALLOON TAMPONADE	653.02	C1726		278
15348 CTH TRIP LUMEN 5FR 15CM	601.85	C1751		278
15373 CTH ANGIO 22G	121.54			272
15349 CTH DBLE LUMEN 4FR 5CM	334.75	C1751		278
CSC 15370 BBWRE .012 18 CM	321.88			272
15350 CTH TRIP LUMEN 7FR 20CM	308.31	C1751		278

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
15351 CTH TRIP LUMEN 7FR 15CM	308.31	C1751		278
15352 CTH TRIP LUMEN 5FR 12CM	339.9	C1751		278
15354 CTH DBLE LUMEN 4FR 12CM	601.85	C1751		278
15355 CTH DBLE LUMEN 4FR 8CM	334.75	C1751		278
15356 CTH SINGLE LUMEN 3FR 5CM	601.85	C1751		278
15357 CTH PLEURA/PNEUMO 5FR 8C	75.95	C1751		278
15360 CTH FUHRMAN 8.5FR 15CM	198.28			272
15361 CTH PERITONEAL DIAL 8.5 F	504.05			272
15365 CTH SINGLE LUMEN 2.5FR 5	99.5	C1751		278
15367 CTH SGLE LUMEN 2.5F 2.5	145.23	C1751		278
*MEDITRACE ADULT	100.06			272
15334 PICC INSERTION TRAY UNI	299.73	C1751		278
*PREMX /DEX 5% 1/2NS 250CC	32.65			270
*PREMX /DEX 10 % 1/2 NS 250CC	6.64			270
*PREMX /DEX 5%-DW 250CC	39.35			250
PREMX /DEX 5%-DW 500CC	39.35			250
*PREMX /DEX 5%-L R 500CC	66.2	J7121		636
*PREMX /DEX 5%-NS 1000CC	37.9	J7042		270
*PREMX /DEX 5%-1/4% NS 1000CC	43.26			270
*PREMX /DEX 5%-1/2% NS 500CC	32.65			270
*PREMX /DEX 5%-1/2% NS 1000CC	39.04			258
PREMX /DEX 10%-DW 250CC	33.09			270
PREMX /LACT RING SOL 500CC	60.77			270
*PREMX /NORM SAL INJ 250CC	32.75			250
RX PREMIX /NORM SAL INJ 500CC	40.92			270
*NORMAL SALINE 45%	33.63			270
*PREMX /DEX 5% 1/4 NS 250CC	33.01			270
*KNEE IMOBILIZER	51.5			271
*PLEUREVAC A-6001	89.61	A7048		278
PLEUREVAC DRAIN AND BT.KIT.	163.52			272
CV VISIT ESTAB LEVEL V	327	G0463		510
CV VISIT NEW LEVEL 5	468	G0463		510
TRNS CARE MGMT 7 DAY DSCH	211		99496	510
TRNS CARE MGMT 14 DAY DSCH	166		99495	510

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
TEAM CNF WO PAT BY MD >30MIN	237	99367		510
ANOGENITAL EXAM CHILD W-IMG	277	99170		510
TEAM CONF W-PAT HC PROF >30MIN	166	99366		510
CMPLX CHRON CARE ADDL 30 MIN	70	99489		510
CMPLX CHRON CARE W/O PT VISIT	135	99487		510
CV VISIT ESTAB LEVEL IV	312	G0463		510
CV VISIT ESTAB LEVEL I	126	G0463		510
CV VISIT ESTAB LEVEL II	171	G0463		510
CV VISIT ESTAB LEVEL III	237	G0463		510
CV VISIT NEW LEVEL 1	146	G0463		510
CV VISIT NEW LEVEL 2	211	G0463		510
CV VISIT NEW LEVEL 3	312	G0463		510
CV VISIT NEW LEVEL 4	347	G0463		510
PARATHORMONE (PTH)	428	83970		301
1 25 DIHYDROXY INC FRACTION	195	82652		301
TROPONIN QN	344	84484		301
HEMOGLOBIN GLYCOSYLATED (A1C)	95.07	83036		301
BETAHYDROXYBUTYRATE SR QN UMC	79	82010		301
POST DOSE GLUCOSE	53	82950		301
IRON BINDING CAPACITY	84.62	83550		301
DRUG TEST DEF 1-7 CLASSES	118	G0480		301
AMMONIA	166	82140		301
CHEM AMYLASE SERUM	153	82150		301
HIV 1 HIV 2 ANTIBODY SGL RESUL	152	86703		302
BILIRUBIN CONJUGATED (DIRECT)	28	82248		301
BILIRUBIN NEONATAL	62.43	82247		301
CAFFEINE	113	80155		301
INSULIN LEVEL	69	83525		301
GGT (GAMMA-GLUTAMYL TRANSFRA)	119	82977		301
EXTEM CLOTTING ASSAY	210	85396		305
INTEM CLOTTING ASSAY	210	85396	59	305
FBTEM CLOTTING ASSAY	210	85396	59	305
GPT (ALT)	55	84460		301
HDL-CHOLESTEROL	86	83718		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
IRON SERUM	72.08	83540		301
LACTIC ACID PLASMA	118	83605		301
TRANSFERRIN	28	84466		301
MAGNESIUM	156	83735		301
OSMOLALITY SERUM	91	83930		301
LIPASE	30	83690		301
TRIGLYCERIDES SERUM	67	84478		301
ALBUMIN BLD	27	82040		301
ALKALINE PHOSPHATASE	140	84075		301
BILIRUBIN TOTAL	60	82247		301
BUN SERUM	43	84520		301
CALCIUM SERUM TTL	82	82310		301
CARBON DIOXIDE	49	82374		301
LIPID PROFILE (HDL-LDL)	246	80061		301
BASIC METABOLIC PROFILE	192	80048		301
CHLORIDE SERUM	44	82435		301
CHOLESTEROL SERUM	18	82465		301
CK (CREATINE KINASE) TTL	107	82550		301
CREATININE	33	82565		301
ELECTROLYTES SERUM	80	80051		301
CLIN CHEM ELECTROLYTE PANEL	115.72	80051		301
COMP METABOLIC PROFILE	272	80053		301
GLUCOSE SERUM	54	82947		301
GOT (AST)	60	84450		301
GEN HEALTH PROFILE	617	80050		301
BLOOD GASES	218	82803		301
LD SERUM	107	83615		301
PHOSPHORUS SERUM	59	84100		301
POTASSIUM SERUM	35	84132		301
PROTEIN TOTAL SERUM	106	84155		301
RENAL FUNCTION PANEL	116	80069		301
SODIUM SERUM	61	84295		301
URIC ACID SERUM	93	84550		301
ADA GTT 100 GRAM	53	82950		301
CHEM GLUCOSE 1 H PP	66.95	82950		301
GLUCOSE TOLUERANCE ADA 2 HR	54	82947		301
GLUCOSE 2 HR POST PRANDIAL	54	82950		301
GTT ADDITIONAL SPECIMEN	42	82952		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
COMPLEMENT C4	270	86160		302
C-REACTIVE PROTEIN	79.31	86140		302
CORTISOL TOTAL (PLASMA)	288	82533		301
CK-MB FRACTION	247	82553		301
CARCINOEMBRYONIC ANTIGEN	179	82378		301
ALPHA-FETO PROTEIN ONCO SERUM	105	82105		301
TSH	261	84443		301
T3 UPTAKE	73	84479		301
T3 TOTAL	142	84480		301
FERRITIN	129.74	82728		301
FSH FOLLICULAR STIMULATING HOR	151.58	83001		301
PROLACTIN	240	84146		301
CHEM PSA TOTAL	131.84	84153		301
LH LEUTENIZING HORMONE	153.43	83002		301
HCG QUANTITATIVE	134	84702		301
HCG QUALITATIVE	53	84703		301
T4 TOTAL	97	84436		301
T4 FREE	129	84439		301
FOLIC ACID SERUM	154	82746		301
SALICYLATE	264	80329		301
PHENYTOIN TOTAL (DILANTIN)	105	80185		301
PHENOBARBITAL	157	80184		301
PRE-ALBUMIN SERUM	52	84134		301
C-REACTIVE PROTEIN HIGH SENSI	98	86141		302
MYOGLOBIN SERUM	65	83874		301
IGM SERUM	164	82784		301
VITAMIN B-12	50	82607		301
IGG IMMUNOGLOBULIN G	86.81	82784		301
IMMUNO TUMR AG CA 125	312	86304		302
IMMUNO TUMR AG CA 15-3(27-29)	354	86300		302
TRIIODOTHYRONINE (T-3) FREE	165	84481		301
RHEUMATOID FACTOR QL	106	86430		302
HEPATITIS C ANTIBODY	121.54	86803		302
COMPLEMENT C3	270	86160		302
B-TYPE NATRIURETIC PEPTIDE (BN	124	83880		301
PSA, FREE	105.71	84154		301
HEPATIC PROFILE	63	80076		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
LDL CHOLESTEROL DIRECT	76	83721		301
LITHIUM	107	80178		301
GENTAMICIN SERUM	164	80170		301
GENTAMICIN TROUGH	89	80170		301
GENTAMICIN PEAK	89	80170		301
DIGOXIN	142	80162		301
TOBRAMYCIN PEAK	100	80200		301
TOBRAMYCIN TROUGH	100	80200		301
TOBRAMYCIN SERUM	173.04	80200		301
ACETAMINOPHEN SERUM	264	G0480		301
URINE DRUG SCREEN	200	80307		301
THEOPHYLLINE	69	80198		301
CARBAMAZEPINE (TEGRATOL)	168	80156		301
NEONATAL URINE DRUG SCREEN	200	80307		301
VANCOMYCIN PEAK	68	80202		301
VANCOMYCIN TROUGH	68	80202		301
VANCOMYCIN SERUM	68	80202		301
VALPROIC ACID (DEPAKANE)	89	80164		301
ALBUMIN BODY FLUID	56	82042		301
AMYLASE FLUID	153	82150		301
CHEM BILI TTL BODY FLD	59	82247		301
CHEM CHLORIDE BODY FLD	65.1	82438		301
CHEM CHOLESTEROL BDY FLD TTL	98.66	84999		301
LIPASE BODY FLUID	105	83690		301
GLUCOSE BODY FLUID	12	82945		301
GLUCOSE C.S.F.	12	82945		301
LACTIC ACID BODY FLUID	82	83605		301
LACTIC ACID-CSF	118	83605		301
LD BODY FLUID	107	83615		301
LDH-CSF	107	83615		301
PROTEIN BODY FLUID	116	84157		301
PROTEIN C.S.F.	116	84157		301
CHEM SODIUM BODY FLD	54.66	84302		301
SODIUM CSF	18	84302		301
TRIGLYCERIDES BODY FLUID	67	84478		301
CHEM URIC ACID BODY FLD	112	84560		301
MICROALBUMIN RANDOM URINE QT	77	82043		301
MICROALBUMIN 24 HR URINE QT	141	82043		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
URIC ACID RANDOM URINE	114	84560		301
CALCIUM RANDOM URINE TTL	82	82310		301
URINE UREA NITROGEN 24HR URINE	66.95	84540		301
CALCIUM 24 HR URINE	71	82340		301
CHLORIDE RANDOM URINE	26	82436		301
CHLORIDE 24 HR URINE	26	82436		301
CREATININE RANDOM URINE	71	82570		301
CREATININE 24 HR. URINE	71	82570		301
CREATININE CLEARENCE 24HR URIN	144	82575		301
UREA NITROGEN URINE 24 HR	66.95	84540		301
URINE MAGNESIUM	77.38	83735		301
PROTEIN TOTAL URINE 24 HR	61.4	84156		301
MAGNESIUM 24 HR URINE	146	83735		301
OSMOLALITY URINE	62	83935		301
PHOSPHORUS URINE RANDOM	48	84105		301
POTASSIUM RANDOM URINE	17	84133		301
POTASSIUM 24 HR. URINE	17	84133		301
PROTEIN 24 HR. URINE	116	84156		301
PROTEIN TOTAL URINE RANDOM	116	84156		301
SODIUM RANDOM URINE	14	84300		301
RETICULOCYTE AUTO	111	85046		305
CHEM RETICULATED PLATE ASSAY	63	85055		305
EOSINOPHIL CNT TOTAL OTHER	164	89050		309
SED RATE NON AUTO	119	85651		305
PLATELET AGGREGATION ADP	119	85576	59	305
PLATELET AGGREGATION COLLAGEN	119	85576	59	305
PLATELET AGGRE ARACHADONIC ACD	119	85576	59	305
CBC COMPLETE BLOOD COUNT AUTO	109	85025		305
CBC - NO DIFF	103	85027		305
DIFFERENTIAL MANUAL	52	85007		305
CSF CYTOSPIN PREP	25.5	88161		311
HEMOGLOBIN	35	85018		305
HEMATOCRIT SPUN	27	85013		305
HEMATOCRIT	40	85014		305
RBC COUNT ONLY CSF TUBE #1	28	85041		305
RBC COUNT ONLY CSF TUBE #4	28	85041		305

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PLATELET COUNT UBS	67	85049		305
HEXAGONAL PHOSPHOLIPID SCR	177	85730		305
RUSSELL VIPER VENOM UNDILUTED	236	85612		305
LUPUS ANTICOAGULANT (RV)	87	85613		305
PLATELET NEUTRALIZATION	222	85597		305
PLATELET NEUTRALIZATION (PTT)	222	85597		305
THROMBIN TIME PLASMA	52	85670		305
ACTIVATED PART THROMBOPLASTIN	177	85730		305
PROTEIN C ACTIVITY	169.95	85303		305
PROTEIN S TOTAL	235	85305		305
D-DIMER QUANTITATIVE	52	85379		305
COAG SUBSTITUTUIN TEST	276	85732		305
ANTI-XA (LMWH)	116	85520		305
FACTOR IX ASSAY	145	85250		305
FDP FIBRIN DEGRADATION PROD	119	85362		305
FIBRINOGEN ASSAY	29	85384		305
PROTHROMBIN TIME W INR	123	85610		305
URINALYSIS DIPSTICK	15	81003		307
GLUCOSE URINE (QUAL)	15	81003		307
KETONES URINE	47	81003	91	307
OCCULT BLOOD URINE	22	82271		301
PH URINE	58	83986		301
URINE PROTEIN SCREEN	35	81002		307
SPECIFIC GRAVITY - URINE	35	81002		307
URINALYSYS W/ MICROSCOPE	84	81001		307
CHEM UA MICRO ONLY	38.11	81015		307
REDUCING SUBSTANCES URINE	35	81002		307
CELL COUNT BODY FLUID	291	89051		305
CELL COUNT C.S.F.	291	89051		309
CRYSTAL EXAM JOINT FLUID	126	89060		309
HEMATOCRIT BODY FLUID	32.38	85013		305
PH - BODY FLUID	58	83986		301
SEMEN ANLYS CMPL	166	89320		309
SPECIFIC GRAVITY BDY FLD	31	84315		301
ALBUMIN-ED	52	82040		301
ALKALINE PHOSPHATASE-ED	55	84075		301
GOT(AST)-ED	60	84450		301

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ED-GPT (ALT)	62	84460		301
BILIRUBIN TOTAL-ED	59	82247		301
ED-BILIRUBIN DIRECT	60	82248		301
ED-BUN SERUM	50	84520		301
ED-CALCIUM TOTAL	53	82310		301
ED-CHLORIDE SERUM	47	82435		301
ED-CO2 SERUM	49	82374		301
ED-CREATININE SERUM	58	82565		301
ED-GLUCOSE SERUM	51	82947		301
ED-HCG URINE	60	84703		301
ED-HEMOGLOBIN BLOOD	36	85018		305
LDH-ED	79	83615		301
ED-POTASSIUM SERUM	51	84132		301
ED-SODIUM SERUM	49	84295		301
TOTAL PROTEIN-ED	65	84155		301
DRUG SCREEN CLASS LIST A	71.83	80307		301
CFC VISIT NEW LEVEL IV W/PROC	325	G0463		510
CFC VISIT NEW LEVEL IV	325	G0463		510
CFC VISIT NEW LEVEL III W/PROC	250	G0463		510
CFC VISIT NEW LEVEL III	250	G0463		510
CFC VISIT NEW LEVEL II W/PROC	179	G0463		510
CFC VISIT NEW LEVEL V	465	G0463		510
CFC NASOPHARYNGOSCOPY	306	92511		510
CFC MD TM CONF NO-MD WO/PT 30M	90	99368		510
CFC MED TEAM CONF 30 M NON MD	226	99366		510
CFC VISIT NEW LEVEL V W/PROC	465	G0463		510
CFC VISIT NEW LEVEL II	179	G0463		510
CFC VISIT NEW LEVEL I W/PROC	90	G0463		510
CFC VISIT NEW LEVEL I	90	G0463		510
CFC VISIT ESTAB LEVEL V W/PROC	325	G0463		510
CFC VISIT ESTAB LEVEL V	325	G0463		510
CFC VISIT EST LEVEL IV W/PROC	323	G0463		510
CFC VISIT ESTAB LEVEL IV	323	G0463		510
CFC VISIT EST LEVEL III W/PROC	286	G0463		510
CFC VISIT ESTAB LEVEL III	286	G0463		510
CFC VISIT ESTAB LEV II W/PROC	207	G0463		510
CFC VISIT ESTAB LEVEL II	207	G0463		510

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CFC VISIT ESTAB LEVEL I W/PROC	118	G0463		510
CFC VISIT ESTAB LEVEL I	118	G0463		510
SCANOGRAM - BONE LENGTH	366.24	77073		320
CTA LWR EXT W&W/O CONTR	2,227.00	73706		352
CTA UPR EXT W/CONTRAST	2,439.92	73206		352
CT BX BONE NEEDLE SUPERFIC	1,168.46	20220		360
CATH ABL EXTRAVASC ANY MODALIT	3,020.00	C1886		278
BX BONE MARROW NEEDLE	705	38221		361
CT FLUID COLLECT ST PERC IMAGE	1,562.00	10030		361
ABLATION BONE TUMR PERC W/IMG	10,711.00	20982		361
CT T-SPINE W&W/O CONTRAST	2,840.00	72130		352
CT VRTP PERC INJ CRVT W/IMG	4,013.00	22510		350
CT VRTS PERC INJ ADD W/IMG	3,120.00	22512		350
CT VRTP PERC INJ LMBSAC W/IMG	3,945.00	22511		350
CT KYPHOPLASTY PERC T/L W/IMG	7,330.00	22515		350
CT KYPHOPLASTY PERC LUMB W/IMG	7,968.00	22514		350
CT KYPHOPLASTY PERC THOR W/IMG	8,210.00	22513		350
BONE ABLATION KIT	495	C1894		361
CT LWR EXT W&W/O CONTRAST	2,523.00	73702		352
GASTROVIEW 350-399 PER ML	2.06	Q9963		255
CT GUIDE FOR TISSUE ABLATION	1,560.00	77013		350
ABLAT RENAL TUMOR PERC	1,667.00	50592		361
XR PERCUT CHOLECYSTOTOMY S&I	3,008.00	47490		361
ABDOMEN W/IV CONT ROUTINE	3,667.00	74160		352
ABDOMEN PELVIS WO CONTR	4,973.00	74176		352
ABDOMEN PELVIS W CONTR	6,276.00	74177		352
ABD & PELVIS W & WO CONTR	7,586.00	74178		352
ABDOMEN W/O CONT	3,441.00	74150		352
ABDOMEN W & W/O CONT	5,867.00	74170		352
FACIAL BONES W/O CONT	2,887.00	70486		351
CT SCAN MAXIL W/WO CONT	4,486.00	70488		351
FACIAL BONES IV CONT	3,366.00	70487		351
HEAD/BRAIN W CONT	3,087.00	70460		351
HEAD/BRAIN W/O CONT	2,657.00	70450		351

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HEAD/BRAIN W W/O CONT	3,481.00	70470		351
NECK SOFT TISSUE W/O CONT	2,636.00	70490		351
NECK SOFT TISSUE W/CONT ROUT	3,431.00	70491		351
CT NECK W&W/O CONTRAST	4,831.00	70492		351
PELVIS W/IV CONT (ROUTINE)	2,508.00	72193		352
PELVIS W/O CONT	3,178.00	72192		352
CTA PELVIS W/RUNOFFS	3,769.00	75635		352
CERVICAL SPINE W/CONTRAST	3,300.00	72126		352
CERVICAL W/O CONT ROUT	3,098.00	72125		352
THORACIC SPINE W/O CONT ROUT	3,609.00	72128		352
THORACIC SPINE W/CONTRAST	2,482.00	72129		352
CTA ABDOMEN W IV & POST PROCES	4,763.00	74175		352
CTA CHEST W IV & POST PROCESS	3,858.00	71275		352
CTA HEAD W IV & POST PROCESS	4,536.00	70496		351
CTA NECK W IV & POST PROCESS	3,711.00	70498		351
CT PELVIS W & WO CONTRAST	2,725.00	72194		352
CT HRT W/3D IMAGE	2,038.00	75572		352
CT ANGIO HRT W/3D IMAGE	1,813.94	75574		351
LUMBAR SPINE W/O CONT ROUTINE	3,370.00	72131		352
LUMBAR SPINE W/CONTRAST	2,641.00	72132		352
EXTREMITY UPPER W/O BONE ROUT	2,746.00	73200		352
EXT UPPER W/IV CONT (ROUT)	3,073.00	73201		352
EXT LOWER W/O CONT (BONE)	2,859.00	73700		352
EXT LOWER W/CONT ROUTINE	4,286.00	73701		352
EXTREMITY LOWER BIL W/O CONT	3,394.00	73700	50	352
ORBIT W/O CONT	2,446.00	70480		351
ORBIT W/ IV CONT	3,105.00	70481		351
CT ORB/FOS/SEL/EAR W& W/O	3,300.00	70482		351
INNER EAR (IAC) W/O CONT	2,446.00	70480		351
INNER EAR IAC W/IV CONT ROUT	3,105.00	70481		351
THORAX/CHEST IV CONT ROUT	3,803.00	71260		352
THORAX (CHEST) W/O CONT	3,158.00	71250		352
CT THORAX W & W/O CONTRAST	2,715.00	71270		352
BX MUSCLE CT GUIDE S&I	3,048.00	77012		350

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PERCUTANEOUS NDL BX MUSCLE	1,112.00	20206		361
BX NECK CT GUIDE S&I	3,048.00	77012		350
PERC BX VERTEBRAL BODY	2,961.00	20225		361
CTD BX LUNG (PLEURA) GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX PLEURA	1,864.00	32400		361
BX MEDIASTINUM CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX LUNG	1,412.00	32405		361
BX LIVER CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX LIVER	1,421.00	47000		361
BX PANCREAS CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX PANCREAS	1,370.00	48102		361
BX PERITONEAL CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX ABDO	2,112.00	49180		361
BX RENAL CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX RENAL	1,421.00	50200		361
BX THYROID CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX THYRO	805	60100		361
BX SPINAL CORD CT GUIDE S&I	3,048.00	77012		350
PERC NEEDLE BX SPNL CRD	1,494.00	62269		361
BX CT GUIDED NDL S&I	3,048.00	77012		350
HEPATOTOMY PERC DRAIN ABSC/CYS	1,668.00	47011		361
DRAIN/ASPIR RENAL CT GUIDE S&I	3,048.00	77012		350
DRAIN/ASPIR OF RENAL CYST	1,400.00	50390		361
ASPIR/CYST CT GUIDE S&I	3,048.00	77012		350
CT CHANGE DRAIN CATH RENAL S&I	777	75984		350
CHANGE URETEROSTOMY TUBE	1,471.00	50398		361
XR FLUORO ABSC DRAIN S&I	1,351.00	75989		350
3-D	894	76375		350
3-D HEAD W/O CONT	2,657.00	70450		351
3-D FACIAL W/SCAN & CONT	3,366.00	70487		351
3D RENDR W/INTRP POSTPROC S&I	816	76376		350
3D ORBITS W/SCAN W/O CONT	2,446.00	70480		351
3-D C-SPINE W/SCAN W/O CONT	3,098.00	72125		352
3-D L-SPINE W/SCAN W/O CONT	3,370.00	72131		352
3-D PELVIS ENTIRE W/O CONT	3,178.00	72192		352
3-D ACETABULUM W/O CONT	3,178.00	72192		352

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
3-D HIP W/SCAN W/O CONT	3,178.00	72192		352
3-D OTHER BODY PART W/SCAN	894	76375		350
LOCM 300-399 ML IODINE	4.12	Q9967		255
HPV DNA PROBE LOW RISK GRP	152	87623		306
CYTOLOGY EXAM TOUCH PREP	137	88333		310
PAP SMEAR THIN PREP	30	G0143		311
TZANK SMEAR	92	87207		306
BLADDER WASHING	141	88104		311
CSF CYTOLOGY	141	88104		311
CYST FLUID	141	88104		311
ON SITE CYTO EVALUATION	176	88172		311
FINE NEEDLE ASP-PREP ONLY	176	88172		311
FINE NEEDLE ASP- COMPLICATED	189	88172		311
NON GYN I SMEARS ONLY	151	88104		311
NON GYN II CONC SMEARS	340	88108		311
CYTO TOUCH PREP ADTL SITE	89	88334		310
CYTOPATH CELLULAR ENHANCE TECH	328	88112		311
PERICARDIAL FLUID	141	88104		311
PLEURAL FLUID	141	88104		311
DE PROLACTA CR 10MLS	320			250
DE PROLACTA +10 50 MLS	580			250
DE PROLACTA +8 40MLS	465			250
DE PROLACTA +6 30MLS	350			250
DE PROLACTA +4 20MLS	290			250
MED NUTRITION GROUP EA 30MIN	45	97804		942
MED NUTRITION IND SUBSQ 15MIN	55	97803		942
MED NUTRITION INDIV INITIAL	60	97802		942
BREAST MILK PROC/STOR/DIST	2	T2101		990
DIAB EDUCATION	115	98960		942
CONT GLUC MNTR PHYS/QHP EQP	395	95250		920
CONT GLUC MNTR PATIENT EQP	115	95249		510
MED MNT GROUP ADD'L 15 MIN	55	G0271		942
MED MNT GROUP INITIAL 15 MIN	60	G0270		942
DIAB EDUCATION GROUP 30 MIN	75	98961		942
2D/MODE-COMPLETE ECHOCAR	1,033.00	93307		480

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ECHO COMP FOR CONGEN ANOMALY	1,304.00	93303		480
TEE TRANSESOPH ECHO	1,952.00	93312		480
FETAL ECHOCARDIOGRAM	1,030.00	76825		402
ECHOCARDIO FOLLOWUP/LMT	654	93308		480
CVED PRIVATE	2,233.00			
CVED OBSERVATION PER HR	84	G0378		762
OBS DIRECT REFERRAL	222	G0379		762
OBS INFUSION INTL 16-19 MIN	507	96365		260
OBS INFUSION SEQUENTIAL	191	96367		260
OBS INJECTION SQ/IM	126	96372		940
OBS VENIPUNCTURE	25	36415		300
OBS IV INF THPY INTL 31MN-1HR	406	96360		260
OBS IV THPY FLUID ADDL HR	145	96361		260
OBS IV PUSH SAME DRUG	160	96376		940
THPY/PRO/DX INJ IV PUSH NEW	216	96375		260
OBS INITAIL IV PUSH	209	96374		260
OBS INFUSION CONCURRENT	155	96368		260
OBS INFUSION ADDL HR	200	96366		260
OBS VACCINE ADMIN 1ST	85	90471		771
OBS ADMIN ADDL VACC	55.62	90472		771
OBS ADMIN INFLUENZA VACCINE	60	G0008		771
EEG MONITOR 41-60 MIN	2,757.00	95812		740
EEG MONITOR > 1 HR	1,097.00	95813		740
EEG WITH VIDEO RECORDING/DAY	3,446.00	95951		740
AUDITORY EVOKED POTENTIAL COMP	531	92585		471
AUDITORY EVOKED POTENTIAL LTD	241	92586		471
VER - VISUAL EVOKED POTENTIAL	781	95930		922
EMG - ONE EXTREMITY	439	95860		922
EMG - TWO EXTREMITIES	578	95861		922
EMG - THREE EXTREMITIES	634	95863		922
EMG - FOUR EXTREMITIES	843	95864		922
EMG - CRANIAL UNILAT	347	95867		922
EMG - CRAINIAL BILATERAL	399	95868		922
EMG - THORACIC PARASPINAL MUSC	261	95869		922
EMG ANAL MUSCLES	635	51785		361
EEG ALL NIGHT RECORDING	874	95827		740

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EEG SEIZURE CABLE/RADIO 24HR	2,330.00	95956		740
EEG SEIZURE FOCUS COMP PORT 24	3,393.00	95953		740
EEG SEIZURE FOCUS EA 24HR	1,720.00	95950		740
NERVE CONDUCTION STUDIES 1-2	282	95907		920
NERVE CONDUCTION STUDIES 3-4	539	95908		920
NERVE CONDUCTION STUDIES 5-6	675	95909		920
NERVE CONDUCTION STUDIES 7-8	897	95910		920
NERVE CONDUCTION STUDIES 9-10	1,196.00	95911		920
NERVE CONDUCTION STUDIES 11-12	1,218.00	95912		920
NERVE CONDUCTION STUDIES 13/>	1,756.00	95913		920
EEG BLINK REFLEX TEST	233	95933		740
ECG MONITOR/RECORD UP TO 48HRS	590	93225		731
EKG ROUTINE	622	93005		730
REG BRUCE STRESS TEST	1,562.00	93017		482
AMBULATORY BP RECORDING	260	93786		480
ED OBSERVATION PER HR	84	G0378		762
ER LEVEL5/99285 HIGH SEVERITY	2,549.00	99285		450
ER LEVEL 4/99284 HIGH URGENT	2,314.00	99284		450
ER LEVEL 3/99283 MOD SEV	1,803.00	99283		450
ER LEVEL 2/ 99282 LOW-MOD	670	99282		450
BLOOD TRANSFUSION	817	36430		391
ER LEVEL 1/99281 LIMIT-MINOR	200	99281		450
ERD ARTHROCNTIS MAJ JNT	515	20610		450
LUMBAR PUNCT PROC DX	1,523.00	62270		450
APP LONG ARM SPLINT	277	29105		450
APP SHORT ARM SPLINT	250	29125		450
APP LONG LEG SPLINT	284	29505		450
APP SHORT LEG SPLINT	265	29515		450
ER DRAINAGE OF GUM LESION	349	41800		450
ER CLOSURE WOUND DEHIS SPRFCL	674	12020		450
FOLEY INSERTION	195	51702		450
ER INFUS TX/DX INIT 16-90MIN	482	96365		450

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ER IV INF THPY FLUID ADDL HR	134	96361		450
ER IV INFUSION SEQ EA ADD HR	170	96367		450
ER IV INFUS THPYPRO//DX CONCUR	161	96368		450
THPY/PRO/DX INJ IV PUSH SAME	152	96376		450
PLC NEED INTRAOSSEOUS INF	331	36680		450
PERITONEAL LAVAGE W/ GUIDE	768	49084		450
CRITICAL CARE	2,403.00	99291		450
CRITICAL CARE W/PX	2,403.00	99291	25	450
CRITICAL CARE EA ADDL 30	643.75	99292		450
ER TRIAGE ONLY	59	99281		450
CRITICAL CARE ADDL 30 W/PX	643.75	99292	25	450
ER TREAT HUMERUS FRACTURE	685	24505		450
ED APPLICATION OF FOREARM CAST	350	29075		450
ED-CLTX MED ANKLE FX W/MAN	1,626.00	27762		450
ED - CASTING/STRAPPING PROC	325	29799		450
ED-STRAPPING OF SHOULDER	277	29240		450
ED-INSERT NON-TNNL CATH < 5YRS	1,935.00	36555		450
ED-GASTRO INTUBATION W/ASPIR	340	43753		450
ED-CHNG TRACH TUBE PR FISTULA	565	31502		450
ED - DECLOT VASCULAR DEVICE	560	36593		450
ED-UNLISTED PX UPPER ARM/ELBOW	3,240.00	24999		450
ER-APPLY LONG ARM CAST	380	29065		450
ER-CL TX DSLOCATE TOE RQ/ANES	760	28665		450
ED - CL TX METAR FX W/MANIP	700	28475		450
ED-REPR S/N/AX/GEN/TRNK >30CM	660	12007		450
ED-REPOSITION PICC W/FL GDNCE	1,735.00	36597		450
CLSD TX SHLD DIS W/MAN W/O ANE	513	23650		450
I-P JT DISLOCATION W/ MAN	435	26770		450
DIGITAL NERVE BLOCK	1,059.00	64450		450
ER EXC WEDGE SKIN NAIL FOLD	483	11765		450
CLSD TX RAD SHFT FX W/MAN	737	25505		450
CLSTX PLNX FX PROX/MDL WO MAN	362	26720		450

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CLSD TX METCR DSL W/MAN WO ANE	395	26700		450
CLSD TX META CARP FX W/MAN	442	26605		450
CLSD TX META CARP FX W/O MAN	404	26600		450
CLSD TX RAD FX DISTAL W/MAN	785	25605		450
CLSD TX RAD FX DISTAL W/O MAN	460	25600		450
CLSD TX RADIAL/ULNAR FX W/MAN	847	25565		450
CLSD TX RAD/ULNAR FX W/O MAN	479	25560		450
CLSD TX ULNAR SHFT FX W/MAN	464.71	25535		450
CLSD TX TRIMAL ANKLE FX W/MAN	1,053.00	27818		450
CLSD TX TIB SHFT FX W/MAN	2,129.00	27752		450
ER S/L FACE <= 2.5 CM	371	12011		450
CLSD TX NASAL FX W/O MAN	375	21310		450
CLSD TX BI-MALLE ANKL FXW/MAN-	845	27810		450
CLSD TX BI -MAL ANKL FX WO MAN	619	27808		450
CLSD TX DIST FIB FX W/O MAN	673	27786		450
CLS TX PHLNX FX PROX/MDL W/MAN	468	26725		450
CLSD TX MED MALLE FX WO MAN	708	27760		450
CLSD TX RAD SHFT FX W/O MAN	323	25500		450
CLSD TX TIB SHFT FX W/O MAN	677	27750		450
CLSD TX PATEL DISL W/O ANESTH	664	27560		450
CLSD TX PATEL FX W/O MAN	465	27520		450
CLSD TX PROX/SHFT FX W/O MAN	500	27780		450
CLSD TRMT ULNA SHFT FX W/O MAN	392	25530		450
CLSD TX CLAVICLE FX W MAN	1,370.00	23505		450
CLSD TX TEMPROMAN DISLOC	461	21480		450
CLSD TX NASAL FX W/ STABIL	2,096.00	21320		450
CLSD TX CLAVICLE FX WO MAN	385	23500		450
CLSD TX SPR/TRAN HUM FX WO MAN	466	24530		450
CLSD TX ULNR FX PRX END WO MAN	358	24670		450
CLSD TX RAD HEAD/NK FX W/O MAN	400	24650		450

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CL TX RAD HEAD SUBLAX CHLD MAN	409	24640		450
CLSD TX ELBOW DISLOC WO ANES	429	24600		450
CLSD TX PROX HUMERAL FX WO MAN	393	23600		450
CLSD TX SPR/TRAN HUM FX W/MAN	880	24535		450
CLSD TX TIB FX W/WO ANES/MAN	618	27824		450
CLSD TX HUM SH FX W/O MAN	375	24500		450
CLSD TX HUM FX MED/LAT W/O MAN	493	24560		450
ER DEBRIDE SKIN/SUBQ 1ST 20CM	908	11042		450
ER TX FX RADIAL SHFT W/DIS CLS	514	25520		450
I & D VULVA/PERINEAL ABCESS	437	56405		450
REPLACE GASTROSTOMY TUBE	564	43760		450
REMOVE FOREIGN BODY PHARYNX	235	42809		450
RMV CERUMEN IMPACT W INST UNI	156	69210		450
REMOVAL FB EXT AUDITORY CANAL	191	69200		450
RMVE CORNEAL FB -W/O SLIT LAMP	323	65220		450
CLSD TX TOES FX W/O MAN	345	28510		450
APP FINGER SPLINT STATIC	215	29130		450
APP SHORT ARM DYNAMIC SPLINT	215	29126		450
CLSD TX INTRPHAL DISL W/O ANES	375	28660		450
REMOVE FB INTRANASAL	359	30300		450
CLSD TX TOES FX W/MAN	378	28515		450
CLSD TX FX TOE/PHAL W/O MAN	294	28490		450
CLSD TX METATARSAL FX WO MAN	369	28470		450
EMERG INTUBATION - ENDOTRACHEAL	717	31500		450
CNTRL ANT NASAL HEMOR SMPL BLT	560	30901	50	450
I & D OF ABCSS - SMPL	338	10060		450
I&D HEMATOMA/SEROMA/FLUID COLL	1,552.00	10140		450
I&R OF FB SUBSQ TISS-COMP	1,438.00	10121		450

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I&R OF FB SUBSQ TISS - SMPL	399	10120		450
I & D PILONIDAL CYST - COMP	1,504.00	10081		450
I & D OF ABSCESS - COMP	470	10061		450
I & D PILONIDAL CYST - SMPL	341	10080		450
ER LEVEL 2 W/MOD 99282 LOW-MOD	670	99282	25	450
ER LEVEL 5 W/MOD 99285 HIGH	2,549.00	99285	25	450
ER LEVEL 3 W/MOD 99283 MOD	1,803.00	99283	25	450
ER VISIT LEVEL 1 W/PX	200	99281	25	450
ER LEVEL 4 W/MOD 99284 HIGH	2,314.00	99284	25	450
RPR COMP SC/ARM/LEG 2.6-7.5 CM	655	13121		450
RP CMPFH/MTH/AX/GEN/H1.1-2.5 CM	679	13131		450
LAY CLS FACE/EAR/MM 2.6-5.0 CM	444	12052		450
LAY CLS FACE/EAR/MM <2.5 CM	440	12051		450
PUNCT ASP OF ABS/HEM/BULA/CYST	338	10160		450
DRESS OR DEBRID W/O ANES SMALL	361	16020		450
ARTHROCENTESIS INTER JOINT	401	20605		450
RPR CMP SC/ARM/LEG EA+5CM OR<	426	13122		450
DRESS OR DEBRID W/O ANES MED	420	16025		450
EVAC SUBUNGAL HEMATOMA	269	11740		450
RPR SMP SC/NE/TR/EXT 12.6-20CM	450	12005		450
S/L NONFACE 7.6-12.5 CM	393	12004		450
S/L NONFACE 2.6-7.5 CM	381	12002		450
S/L FACE <= 2.5 CM	365.39	12011		450
EXC. NAIL & NAIL MATRIX PERM	1,284.00	11750		450
S/L FACE 2.6 TO 5.0 CM	388	12013		450
AVULSION NAIL PLATE SNGL	457	11730		450
S/L NONFACE <= 2.5 CM	349	12001		450
LAY CLS SC/AX/TR/EXT 2.6-7.5CM	478	12032		450
LAY CLS NE/HA/FE/GEN 2.6-7.5 CM	580	12042		450
LAY CLS NE/HA/FE/EX GEN <2.6CM	398	12041		450
LAY CLS SC/AX/TR/EXT7.6-12.5 CM	487	12034		450
CLSD TX TIB FX W/O MAN	688	27530		450

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LAY CLS SC/AX/TR/EXT < 2.6 CM	398	12031		450
RPR SMP FACE/EAR/MM 7.6-12.5 CM	427	12015		450
S/L FACE 5.1-7.5 CM	388	12014		450
ERD INTRAVENOUS INJECTION	209	96374		260
ERD THPY/PRO/DX IV PUSH NEW	216	96375		450
INTRAMUSCULAR INJECTION	120	96372		450
THPY/PRO/DX IV ADD HR	325	96366		450
INTRAMUSCULAR VACCINE ADMIN 1S	69	90471		771
INTRAMUSCULAR VACCINE ADMIN AD	56	90472		771
ER IV INFS THPY FLD INTL 31-1H	386	96360		450
ER DRAIN ABSC FINGER SIMPLE	311	26010		450
OPN TX FX PHALNX PROX W/MAN EA	4,557.00	26735		450
ER CATH BLADDER NON-INDWELLING	154	51701		450
ER TRIMMING NAILS NONDYSTRPHC	140	11719		450
ER TX FX TIB DIST TRACT W MAN	1,832.00	27825		450
CL TX FX (MP)(IP) JT W MAN EA	584	26742		450
CL TX FX PHAL DIST W MAN EA	427	26755		450
ER INJ ANES NERVE FACIAL	460.41	64402		450
ER TX FX HUMER EPICOND W/MAN	875	24565		450
ER REPAIR NAIL BED	734	11760		450
ER TX FX ELBOW/MONT W/MAN	1,386.00	24620		450
ER TX FX RADIAL HD/NCK W/MAN C	612	24655		450
ER RPR LAC MOUTH/TONGUE 2.5 CM	433	41250		450
ER DRAIN ABSC/HEMA EAR EXT SMP	296	69000		450
TB SKIN TEST	39	86580		302
ER TX DISL THUMB W/MAN CLSD	381	26641		450
OPEN TX FX PHALANX DIST EA	4,237.00	26765		450
ER DEBR NAIL(S) UP TO 5	392	11720		450
ER TX FX ULN PROX W/MAN CLSD	490	24675		450
ABD PARACENTESIS WO IMAGING	1,140.00	49082		450
ER FIX FX PHALANX DIST PERC EA	4,818.00	26756		450

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ER PLACE NG TUBE MD W/GUIDE	432	43752		450
ER FLD COLLX DRAIN CATH W/GUID	5,054.00	49406		450
ER INJ GANGLION CYST	413	20612		450
ER WIRING INTERDENTAL	4,748.00	21497		450
CL TX FX PHAL DIST WO MAN EA	338	26750		450
ER CONTROL NOSEBLEED ANT SMP	552	30901		450
ER TX FX NAVICULAR W/MAN CLSD	846	25624		450
ER PUNCT VENTRIC W/O INJ	827	61020		450
ER DEBR/REM DEV TISS <20 SQ CM	295	97597		450
CL TX FX PHALANX W/MAN PERC EA	5,103.00	26727		450
ER STRAPPING KNEE	257	29530		450
ER STRAPPING ANKLE/FOOT	209	29540		450
ER STRAPPING ELBOW/WRIST	223	29260		450
ER RMV CERUMEN IMPACT IRR UNI	67	69209		450
CL TX FX HUMER CONDYLAR WO MAN	371	24576		450
CL TX POST ANKLE FX WO MAN	530	27767		450
US ABDOMEN LIMITED	1,515.00	76705		402
US GUIDED VASCULAR ACCESS	703	76937		402
US EXTREMITY NON VASCULAR LTD	925	76882		402
MOD SED SAME MD/QHP <5Y 15MIN	333	99151		450
MOD SED OTH MD/QHP <5Y 15MIN	404	99155		450
MOD SED SAME MD/QHP EA 15MIN	152	99153		450
MOD SED OTH MD/QHP 5/>Y 15MIN	352	99156		450
MOD SED OTH MD/QHP EA 15MIN	119	99157		450
MOD SED SAME MD/QHP 5/>Y 15MIN	399	99152		450
COLLECT BLOOD FROM PICC	120	36592		450
DRAW BLOOD OFF VENOUS DEVICE	135	36591		450
CAPILLARY BLOOD DRAW	27	36416		450
ROUTINE VENIPUNCTURE	25	36415		450
CLSD REDUC LAT ANKLE W/MAN	625	27788		450

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IM ADMIN 1ST/ONLY COMPONENT	20	90460		450
IM ADMIN EACH ADDL COMPONENT	41	90461		450
BLEPHAROTOMY/DRAIN/ABS/EYE LID	595	67700		450
RPLCE GSTRSTMY TUBE W/ IMGNG	1,290.00	49450		450
RMV FOREIGN BODY - FOOT/TOES	1,450.00	28190		450
ED - APPLICATION LONG LEG CAST	445	29345		450
ER INJ ANES NRV GREAT OCC BI	930	64405		450
PH TEST CATHETER	1,172.27			271
ENDOSCOPY W/REMOVAL FOREIGN	2,901.00			750
RECTAL MANOMETRY	1,505.00	91122		750
BRONCHOSCOPY	1,307.00			750
COLONOSCOPY	7,566.00			750
SNARE POLYPECTOMY PEDI	241.02			272
SNARE POLYPECTOMY	148.35			272
ESOPHAGEAL DILITATION	1,717.00			750
OVERTUBE ENDO	638.6			271
GRASPER	689.59			270
POLYPECTOMY	1,353.00			750
SIGMOIDOSCOPY	1,594.00			750
ESOPHAGOSCOPY	2,362.00			750
ENDO BIOPSY	649			750
EGD	4,290.00			750
EGD W/DILITATION OR W/CYTO	5,163.00			750
ERCP W/SPHINCT/PAPILLOTOMY	5,021.00	43262		750
EGD W/CONTROL BLEEDING	2,988.00			750
ESOPHAGEL MOTILITY	1,784.00			750
ENDO SMALL INTESTINE W/BIOPSY	2,776.00	44361		750
CH ERCP	4,273.00			750
PERCUTANEOUS GAST/JEJU TUBE	716			750
LARYNGOSCOPY	242			361
PLACEMENT STENT	1,699.10	C1713		750
WASHINGS	221			750
PEG PLACEMENT	2,213.00			750
PEG REPLACEMENT	2,213.00			750

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ERCP DX W-SPHINCTER-PAPILLOT	4,807.00			750
STONE REMOVAL COMMON BILE DUCT	4,247.00			750
BAND LIGATION ESOPH VARICES	2,697.00			750
ESOPHAGEAL MANOMETRY	1,784.00	91010		750
SIGMOIDOSCOPY FLE W/CTRL BLED	2,464.00			750
DILATION ESOP W/BALLOON 30MM>	1,485.26			750
PLACEMENT GASTROSTOMY TUBE	2,759.00			750
CAPSULE ENDO-DIAG GE	7,269.00	91110		750
PH TEST BRAVO CAPSULE	1,825.40	91035		920
AUTOTOME 44 RX	1,197.68			272
ENDO BASKET ROTH ADULT	339.81			272
NET POLYP/RETRIEVAL ROTH	339.81			272
BRUSH CYTOLOGY RX	187.76			272
CAPSULE BRAVO	798.74			272
CAPSULE ENDO M2A	1,431.42			271
CUFF BALLOON MAJ 233	33.95			750
ENDO CRE BALLOON 5836	381.1	C1726		272
ENDO CRE BALLOON 5837	793.1			272
ENDO EXTRACTOR BALLOON 15 11 5	594.88	C1727		272
FORCEP BX COLON	103			272
CH ENDO GUIDEWIRE	270.65	C1769		272
JAGWIRE 035	484.59			272
LOCKING DEVICE	46.38			271
MICROKNIFE	142.42			272
PEG KIT 20FR	325.48	B4087		278
PROBE GOLD 7FR	665.92			272
SYRINGE INFLATION ALLIANCE	173.04			272
TRAPEZOID 1088	973.05			272
TUBE GASTROSTOMY TRI-FUNNEL 18	166.86			278
WIRE JAG .025	484.59	C1769		272
SPHINC OMNI TOME FUSION	1,084.83			272
CATH PUSHING FUSION	262.68			272
STENT PANCREATIC	295.43	C2617		278
STENT COLONIC WALLFLEX 27MM	7,665.26	C1876		278

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CATH ERCP	316.64			272
FORCEP BIOPSY	306.26			272
ACID REFLUX TEST NASAL PH ELEC	1,509.00			750
ACID REFLUX TEST NASAL INTLUM	2,494.00	91037		750
BREATH HYDROGEN TEST	744	91065		750
ENDOSCOPIC PANCREATOSCOPY	1,222.12	43273		750
ERCP W/PLACE STENT	2,242.11	43274		750
LVL I SINGLE ENDO W/O INTER/BX	3,862.00			750
LVL IV MULTI ENDOSCOPIES	9,656.00			750
LVL II ENDO ONE INTER/BX	6,115.00			750
LVL III SINGLE ENDO MULT INTER	7,854.00			750
VALVE ENDOSCOPE AIR WATER	27.2			272
AUTOPSY	881	88020		310
AUTOPSY NEWBORN	853	88029		310
AUTOPSY LIMITED SINGLE ORGAN	179	88037		310
AUTOPSY REGIONAL GROSS / MICRO	531	88036		310
BONE MARROW STUDY	530	88342		312
GROSS & MICRO LEVEL IV	903	88305		312
GROSS & MICRO LEVEL V	1,631.00	88307		312
H & E SLIDE STAINING ONLY	11	88312		312
DECALCIFICATION	209	88311		310
PAS STAIN SENDOUT	156	88313		310
HISTOLOGY EXAM TOUCH PREP	128	88333		310
PATH FRZN 1ST TISSUE BLK	964	88331		310
FROZEN SECTION ADNL SPECM	124	88332		310
SURG PATH LEVEL 1	299	88300		312
IMMUNOHISTOCHEMISTRY STAINS	227	88342		310
IMMUNOSTAINS	232	88319		310
GROSS & MICRO LEVEL IV	903	88305		312
CH GROSS & MICRO LEVEL III	201	88304		312
PATHOLOGIST CONSULTATION	375	88325		310
PNEUMOCYSTIS STAIN	152	88312		310
GROSS & MICRO LEVEL VI	2,188.00	88309		312
GROSS & MICRO LEVEL III	651	88304		312
GROSS & MICRO LEVEL II	456	88302		312

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
SPECIAL STAINS I	508	88312		310
IMMUNOCYTOCHEMISTRY STAIN	530	88342		310
SPECIAL STAINS II	344	88313		310
EPS NEW OV BRIEF LEVEL I	146	G0463		515
EPS NEW OV LIMITED LEVEL II	211	G0463		515
EPS NEW OV INTER LEVEL III	312	G0463		515
EPS NEW OV EXTENDED LEVEL IV	347	G0463		515
EPS NEW OV COMPREH LEVEL V	412	G0463		515
EPS EST OV BRIEF LEVEL 1	126	G0463		515
EPS EST OV LIMITED LEVEL II	171	G0463		515
EPS EST OV INTER LEVEL III	237	G0463		515
EPS EST OV EXTENDED LEVEL IV	275	G0463		515
EPS EST OV COMPREH LEVEL V	324	G0463		515
EPS NEW OV LIMITED W/PRO	211	G0463	25	515
EPS NEW OV INTERMIDATE W/PRO	312	G0463	25	515
EPS NEW OV EXTENDED W/PRO	347	G0463	25	515
EPS NEW OV COMPREH W/PRO	412	G0463	25	515
EPS EST OV LIMITED W/PRO	171	G0463	25	515
EPS EST OV INTERMIDATE W/PRO	237	G0463	25	515
EPS EST OV EXTENDED W/PRO	275	G0463	25	515
EPS EST OV COMPREH W/PRO	324	G0463	25	515
EPS OFFICE CONSULT LEVEL I	150	G0463		515
EPS OFFICE CONSULT LEVEL II	200	G0463		515
EPS OFFICE CONSULT LEVEL III	250	G0463		515
EPS OFFICE CONSULT LEVEL IV	300	G0463		515
EPS POSTOP FOLLOW-UP VISIT	350	99204		515
EPS INC & DRAIN ABSCESES SIMPLE	174	10060		515
EPS INC & DRAIN ABSCESES COMP	320	10061		515
EPS INC & DRAIN PILONIDAL CYST	460	10080		515
EPS INC & REM FB SUBQ TIS SIMP	832	10120		515
EPS INC & REM FB SUBQ TIS COMP	900	10121		515
EPS IN & DRAIN COMPLEX WOUND	3,050.00	10180		515
EPS REMOVAL SKN TAGS UP TO 15	825	11200		515

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
EPS EXC B9 LESION MRGN <0.5 CM	1,750.00	11400		515
EPS EXC B9 LESION MRGN >4.0 CM	2,275.00	11406		515
EPS EXCISION NAIL MATRIX	2,250.00	11750		515
EPS EXC PILONIDAL CYST/SIMPL	3,000.00	11770		515
EPS EXC PILONIDAL CYST/EXT	3,500.00	11771		515
EPS DESTRUCT BENIGN LES < 14	350	17110		515
EPS REM FB FOOT SUB/SIMPLE	840	28190		515
EPS REM FB FOOT DEEP	2,300.00	28192		515
EPS REM FB FOOT COMPL	2,093.00	28193		515
EPS BIOPSY MUSCLE DEEP	2,386.00	20205		515
EPS VENIPUNCTURE 3 YRS OLDER	68	36410		515
EPS DILATE STRCT RECTAL W/ANES	1,100.00	45910		361
EPS THERAP/PRO/DX INJ SQ/IM	142	96372		515
EPS IMMUN ADMIN EA ADD	39	90474		771
EPS IMMUN ADMIN ONE VACC ORAL	52	90473		771
EPS IMMUN ADMIN EA ADD VACC	63	90472		771
EPS IMMUN ADMIN ONE VACC	94	G0008		771
EPS LIDOC INJ 1% 0.5ML (5MG)	18.5	J2001		636
EPS LIDOCAINE INJ 0.2MG	1.5	J2001		636
ICN PT TYPE N LEVEL 4(190025)	3,713.00			
ICN TYPE D LEVEL 2(00193003)	3,100.00			
ICN TYPE M LEVEL 3(00193102)	3,309.00			
ICN TYPE D LEVEL 2(00193268)	3,100.00			
LUMBAR PNCTURE	261.82	62270		361
ICN UMBILICAL VEIN LINE INSERT	551	36510		761
ICN CAR SEAT TEST 60 MIN	406	94780		920
ICN SCREEN PURE TONE AIR ONLY	71	92551		471
ICN INTRO NDL/INTRACATH VEIN	193	36000		761
ICN INTERMED PX 31-60 MIN	578			361
ICN COMPLEX PX > 60 MIN	865			361
ICN SIMPLE PX 16-30 MIN	289			361
ICN OBSERVATION PER HR	84	G0378		762
ICN BLOOD TRANSFUSION	817	36430		391
ICN THORACENTESIS W/IMGN GUID	1,378.00	32555		361

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ICN THORACENTESIS W/O IMG GUID	1,140.00	32554		361
ICN ABD PARACENTESIS W/O IMGN	1,140.00	49082		361
ICN HYPOTHERMIA ILL NEONATE	1,200.00	99184		361
ICN INS CATH NON-TUNL <5 YRS	1,867.00	36555		361
ICN INTUBTN INSERT EMRGNT ETT	637	31500		361
ICN SPINAL PUNCTURE DRAIN CSF	1,680.00	62272		361
ICN INS TNL CV ACC W/PORT <5	3,520.00	36560		361
ICN INSRT CATH TUNNLD <5	3,833.00	36557		361
ICN INS TNL CATH W/O PORT >5	3,791.00	36558		361
ICN-RETINOPATHY (ROP) I/P	860	67229		361
ICN INS TNL CV ACC W/PORT >5	5,011.00	36561		361
ICN PDA LIGATION	15,930.00	93582		361
ICN PICC LINE <5	1,561.48	36568		360
ICN INS PICC LINE >5	2,391.00	36569		360
ICN UMBILICAL ARTEY CATH	485	36660		361
ICN VENTRIC CATH TAB	6,400.00	62225		361
ICN ASPIRATION NASOTRACHEAL	170	31720		361
ICN-RPR OMPH/GSHISIS W/WO PROS	5,460.00	49605		361
CARDIOVERSION - ICN	1,440.00	92960		360
ICN-PUNCTR ASPIRATION ABSCESS	490	10160		361
ICN - ORO/NASO TUBE PLACEMENT	540	43752		760
ICN-INTER RECOVERY ADDL 15 MIN	580			710
ICN-IM ADMIN 1ST/ONLY COMP	20	90460		771
ICN-ROUTINE VENIPUNCTURE	25	36415		300
ICN-CMPLX RECOVERY ADDL 15 MIN	358			710
ICN-CMPLX RECOVERY INTL 30 MIN	1,689.00			710
ICN-MINOR RECOVERY INTL 30 MIN	1,052.00			710
ICN-INTER RECOVERY INTL 30 MIN	1,611.00			710
ICN-MINOR RECOVERY SUB 15 MIN	300			710
ICN-IM ADMIN EACH ADDL COMP	41	90461		771

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ICN-CARDIO PULM RESUS (CPR)	895	92950		480
ICN-VACCINE ADMIN, EACH ADDL	54	90472		771
ICN-VACCINE ADMIN, 1ST	84	G0008		771
ICN-LAP/REC/SM INT W/ANAST OP	4,632.00	44120		360
ICN-RPR OMPH/GSHISIS RMVL PROS	5,460.00	49606		361
ICN-RETCAM PHOTO/EYE EXAM-I/P	220	92250		361
ICN-RETINOPATHY (ROP) O/P	860	67229		510
ICN-RETCAM PHOTO/EYE EXAM-O/P	220	92250		510
ICN-CIRCUMCISION > 28 DAYS	5,125.00			361
ICN-CIRCUMCISION < 28 DAYS	5,125.00			361
ICN - VENTRICULAR TAP	1,055.00	61020		361
IMCN PT TYPE M LEVEL 3(190033)	3,309.00			
IMCN PT TYPE D LEVEL 2(190413)	3,100.00			
IMCN PT TYPE N (190421)	3,375.00			
IMCN PT TYPE D LEVEL 2(193250)	3,100.00			
CT HRT W/3D IMAGE CONGEN	776	75573		352
IMCN VACCINE ADMIN, 1ST	73	90471		771
IMCN SCREEN PURE TONE AIR ONLY	71	92551		471
IMCN CAR SEAT TEST 60 MIN	406	94780		920
IMCN VACCINE ADMIN, EACH ADD'L	59	90472		771
IMCN LUMBAR PUNCTURE DX	827	62270		761
IMCN OBSERVATION PER HR	84	G0378		762
IMCN BLOOD TRANSFUSION	817	36430		391
IMN INS CATH NON-TUNL <5 YRS	1,867.00	36555		361
IMN INS TNL CV CATH W/PORT <5	3,520.00	36560		361
IMN ENDOTRACHEAL INTUB EMERG	637	31500		361
IMN SPINAL PUNCTURE DRAIN CSF	1,680.00	62272		361
IMN INS TNL CV CATH W/PORT >5	5,011.00	36561		361
IMCN-RETINOPATHY (ROP) I/P	480	67229		361
IMN INSERT CATH TUNNELED <5	3,833.00	36557		361
IMN INS TNL CATH W/O PORT >5	3,791.00	36558		361
IMN INSRT NON-TUNNEL CATH >5	1,960.00	36556		361
IMN CAR SEAT TEST + 30MIN	71	94781		410
IMN PDA LIGATION	15,930.00	93582		361

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
IMN THORACENTESIS W/IMG	1,485.15	32555		361
CARDIOVERSION - IMCN	1,440.00	92960		510
IMN - ORO/NASO TUBE PLACEMENT	540	43752		760
IMCN-INTER RECOVERY ADDL 15MIN	580			710
IMCN-MINOR RECOVERY INTL 30MIN	1,052.00			710
IMCN-MINOR RECOVERY ADDL 15MIN	300			710
IMCN-CMPLX RECOVERY INTL 30MIN	1,689.00			710
IMCN-CMPLX RECOVERY ADDL 15MIN	358			710
IMCN-IM ADMIN EACH ADDL COMP	41	90461		771
IMCN-ROUTINE VENIPUNCTURE	25	36415		300
IMCN-IM ADMIN 1ST/ONLY COMP	20	90460		771
IMCN-CARDIO PULM RESUS (CPR)	895	92950		480
IMCN-INTER RECOVERY INTL 30MIN	1,611.00			710
IMCN - CIRCUMCISION > 28DAYS	5,125.00	54161		361
IMCN - CIRCUMCISION < 28DAYS	5,125.00	54160		361
IMCN-RETCAM PHOTO/EYE EXAM-I/P	220	92250		361
IMCN-RETINOPATHY (ROP) O/P	480	67229		510
IMCN-RETCAM PHOTO/EYE EXAM-O/P	220	92250		510
BONE MARROW BIOPSY	262	38221		361
INF CHEMO SQ/IM NON ANTI-NEOPL	358	96401		331
NEW PATIENT LEVEL 1	115	G0463		510
GLUCOMETER GLUCOSE CHECK	17	82962		301
IV INFUS THPY FLUID ADDL HR	134	96361		260
THPY/PRO/DX INJ IV PUSH NEW	216	96375		260
INF ASP BONE MARROW ONLY	451	38220		361
INF COLLECT BLD PORT/ACCES DVC	189	36591		300
INF BLOOD TRANSFUSION	817	36430		391
INF DECLOT PORT W/THROMB AGENT	524	36593		360
INF VENIPUNCTURE HEMONC	24	36415		300
INF REFILL/MAINT PORT/IMP PUMP	503	96521		335

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
INF IV CHEMO INIT DRUG16-90MN	869	96413		335
INF CHEMO IV INFUSION ADD HR	489	96415		335
INF CHEMO IV PUSH ADDL DRUG	568	96411		331
INF CHEMO IV PUSH SINGLE INIT	685	96409		331
INF CHEMO IV INF EA ADDL SEQ	648	96417		335
INF IV PUSH INITIAL DRUG	209	96374		260
INF VACCINE ADMIN EACH ADD'L	56	90472		771
INF TX//DX INIT 16-90MIN	482	96365		260
INF HYDRATION IV INFUS ADD HR	386	96360		260
INF IV INFUSION SEQ EA ADD HR	170	96367		260
IV PUSH ADDL SEQ SAME DRUG>30M	152	96376		260
INF ADMIN PNEUMOCOCCAL VACCINE	53	G0009		771
INF ADMIN INFLUENZA VACCINE NO	57	G0008		771
INF VISIT ESTAB LEVEL II	195	G0463		510
INF VISIT ESTAB LEVEL III	236	G0463		510
INF INJECTION SUBQ/IM	120	96372		940
INF LUMBAR PUNCTURE	1,523.00	62270		361
INF VISIT ESTAB LEVEL IV	315	G0463		510
INF VISIT ESTAB LEVEL V	363	G0463		510
INF IV THERAPY EA ADDL 60 MIN	325	96366		260
INF VISIT NEW LEVEL 2	211	G0463		510
INF VISIT NEW LEVEL 3	346	G0463		510
INF IV HYDRATION EA ADDL 60MIN	134	96361		260
INF VISIT NEW LEVEL 4	452	G0463		510
INF VISIT NEW LEVEL I	135	G0463		510
INF VISIT NEW LEVEL 5	363	G0463		510
INF VISIT ESTAB LEVEL I	191	G0463		510
INF VACCINE ADMIN 1ST	69	90471		771
INF COL FINGER/HEEL/EAR STK	26	36416		300
INF APHERESIS PLATELETS TR	4,158.00	36513		361
PUNCT ASP/INJ SHUNT TUBE	695	61070		361
INF CHEMO INJ SUBA/INTRAVENT	691	96542		331
INF PHLEBOTOMY THERAPEUTIC	209	99195		300
INF BX LESN SKIN/SUBQ/MU SGL	349	11100		361
INF PUNCT VENTRIC W/O INJ	1,036.00	61020		361
CH INF CHEMO CNS	2,010.00	96450		331

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
INF DRAIN CSF THERAPEUTIC LP	1,591.00	62272		361
INF TB INTRADERMAL TEST	33	86580		302
IRRIGAT IMPLANT VEN ACCESS DEV	160	96523		260
REMOVE CERUMEN IMPACTED IRRIG	55	69209		510
INF IM ADMIN 1ST < 18	20	90460		771
INF ECG MONIT/REPRT 48 HRS	630	93226		730
INF CRDIOVRSION ELECTV EXT	1,440.00	92960		480
INF IM ADMIN EACH ADDL <18	41	90461		771
INF DEBR/REM TISS ADDL 20 SQCM	350	97598		510
INF COMPLEX RECVRY SUBS 15 MIN	660			750
INF COMPLEX RECVRY INTL 30 MIN	1,690.00			750
INF INTER RECOVERY SUBS 15 MIN	580			750
INF INTER RECOVERY INTL 30 MIN	1,615.00			750
INF MINOR RECOVERY SUBS 15 MIN	305			750
INF MINOR RECOVER INTL 30 MIN	1,055.00			750
INF PARACENTESIS W/O IMAGING	1,140.00	49082		361
INF FOLEY CATH INSERTION	259	51702		510
CULTURE ANAEROBIC	111	87075		306
CULTURE BODY FLUID (ROUTINE)	176	87070		306
CULTURE C.S.F.	176	87070		306
CULTURE BODY SITE (ROUTINE)	176	87070		306
DEFINITIVE ID TESTING ANAEROBI	18	87076		306
DEFINITIVE ID TESTING AEROBIC	78	87077		306
MRSA SCREEN	176	87070		306
CULTURE GONORRHEA	69	87081		306
GRAM STAIN (SMEAR)	61.91	87205		306
STREP SCREEN RAPID	29	87880		306
STREP SCREEN 24HR	69	87081		306
MICRO/IMMUNO MISCELLANEOUS	82	87999		300
MIC/GRAM POSITIVE PANEL	141	87186		306
MIC/GRAM NEGATIVE PANEL	141	87186		306

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
MIC/URINE COMBO PANEL	141	87186		306
CULTURE SPUTUM	176	87070		306
CULTURE STOOL	80	87046		306
CULTURE THROAT	176	87070		306
URINE CULTURE ID	79	87088		306
CULTURE URINE (ROUTINE)	116	87086		306
MICROBE SUSCEPTIBLE DISK	80.34	87184		306
WET MOUNT SMEAR	49	87210		306
CULTURE WOUND (ROUTINE	176	87070		306
CULTURE FUNGUS OTHER	39	87102		306
CULTURE FUNGUS BLOOD	159	87103		306
KOH PREP	34	87220		306
OCCULT BLOOD FECES IMMUNO QL	27	82274		301
CLOS.DIFFICILE TOXIN RAPID TES	157	87324		306
CLOSTRIDIUM DIFFICILE TOXIN	82	87230		306
TRICHROME STAIN OVA & PARASITE	84.8	87209		306
FECAL LEUKOCYTES (STOOL WBC)	65	89055		306
MACROSCOPIC EXAM PARASITE	42	87169		306
MACROSCOPIC EXAM ARTHROPOD	45	87168		306
OCCULT BLOOD STOOL	22	82270		301
OCCULT BLOOD SCREEN	22	82271		301
OVA CYSTS & PARASITES	91.47	87177		306
PH STOOL	58	83986		301
PINWORM PREP. (SCOTCH TAPE)	52	87172		306
REDUCING SUBSTANCES STOOL	14	84377		301
ROTAVIRUS (ANTIGEN)	143	87425		306
CULTURE ACID FAST & SMEAR	110	87116		306
AFB SMEAR	69	87206		306
DEFINITIVE ID MOLD	85	87107		306
DEFINITIVE ID YEAST	59	87106		306
CHLAMYDIA AMPLIFIED PROBE	123	87491		306
N.GONORRHOEA E AMPLIFIED PROBE	124	87591		306
S. PNEUMO URINE ANTIGEN	68	87449		306
MICRO RUBELLA ANTIBODY	95	86762		302
HEP BSAG NEUTRALIZATION CONFIR	80	87341		306

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
MTB AMPLIFIED DIRECT PROBE	123	87556		306
RUBEOLA IGG ABS	90	86765		302
RUBEOLA ANTIBODY IGG	87	86765		302
HEPATITIS A IGM	29	86709		302
PARAINFLUENZA 2 DFA	52	87279		306
ADENOVIRUS DFA	49	87260		306
HEPATITIS B SURFACE AB	110	86706		302
HEPATITIS B SURFACE ANTIGEN	40	87340		306
HEPATITIS C	25	86803		302
ACUTE HEPATITIS PANEL	378.23	80074		301
HIV-1 SCREEN	69	86701		302
HEPATITIS B CORE IGM	37	86705		302
HETEROPHILE, MONO SCREEN	89.09	86308		302
RESP. SYNCYTIAL VIRUS (RSV)	87	87280		306
TP:PA T. PALLIDUM	147	86780		302
RPR SERUM	28	86592		302
RPR TITER	18	86593		302
VDRL-CSF	28	86592		302
WEST NILE VIRUS IGM SERUM	94	86788		302
ANTIGEN DETEC GP.B STREP CSF	119	87802		306
ANTIGEN DETEC GR.B.STREP URINE	109	86403		302
ANTIGEN DETECTION HAEMOPHILUS	119	87804		306
ANTGEN DETECTN.MENINGITIS CSF	58	87899		306
ANTGN DET. N. MENINGITIS URINE	109	86403		302
ANTIGEN DETECTION S.PNEUMO	58	87899		306
CRYPTOCOCCUS ANTIGEN CSF	78	87899		306
CULTURE BLOOD	185	87040		306
ANTI-NUCLEAR ANTIBODY TITER	95.74	86039		302
ANA SCREEN	108.51	86038		302
IMMUNO OPTICAL RSV	135.15	87807		306
ANTI-DNA (DOUBLE STRAND)	300	86225		302
CHLAMYDIA DNA PROBE	90	87490		306
GC DNA PROBE	102	87590		306
H. PYLORI AB	51	86677		302
ANTI-DSDNA TITER	178	86256		302
INFLUENZA A RAPID	75	86710		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
INFLUENZA B RAPID	75	86710		302
INFLUENZA A	63	87276		306
INFLUENZA B	44	87275		306
LEGIONELLA AG URINE	68	87449		306
PARAINFLUENZA 1	52	87279		306
PARAINFLUENZA 3	52	87279		306
VARICELLA-ZOSTER AB	97.57	86787		302
IMMUNO OPTICAL STREP A	83.78	87880		306
CULTURE SCREEN HELICOBACTER P	87.55	87081		306
MRA HEAD W/O CONTRAST	2,571.00	70544		615
MRA HEAD/NECK W/CONT	2,752.00	70545		615
MRA NECK W/O CONT	2,534.00	70547		615
MRA NECK W/CONT	2,856.00	70548		615
MRA ABDOMEN W/O CONT	2,455.00	C8901		618
MRA ABDOMEN WCONT	2,803.00	C8900		618
MRA CHEST W/O CONT	2,612.00	C8910		610
MRA CHEST W/CONT	2,843.00	C8909		618
MRA EXT LOWER W/O CONT	2,715.00	C8913		616
MRA EXT LOWER W/CONT	3,074.00	C8912		616
FUNCTIONAL MRI BRAIN TECH	3,090.00	70554		611
MRA PELVIS W/ OR W/O CONTRAST	2,300.00	72198		618
GADOXETATE DISODIUM VL 10ML	559	A9581		636
GADOTERATE MEG .01 ML	2	A9575		636
MRI GADAVIST INJ 0.1ML	30	A9585		636
MRI FETAL SINGLE 1ST GESTATION	860	74712		610
MRI FETAL ADDL GESTATION	450	74713		610
MRI ABDOMEN W CONT	3,282.00	74182		610
MRI ABDOMEN W W/O CONT	3,874.00	74183		610
MRI ABDOMEN W/O CONT	2,783.00	74181		610
MRI BRAIN W/CONT	3,263.00	70552		611
MRI BRAIN W/WO CONT	4,026.00	70553		611
MRI BRAIN WO CONT	2,805.00	70551		611
MRI CARD W/O&W CON	2,998.00	75561		610
CARDIAC MRI MORPH WO CONT	2,427.00	75557		610
MRI CARD W/O&W CON STRESS	3,197.00	75563		610
MRI CARD FOR VELOCITY FLOW MAP	1,085.00	75565		610

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
MRI CERVICAL SPINE W/CONT	3,223.00	72142		612
MRI CERVICAL SPINE W/WO CONT	4,081.00	72156		612
MRI CERVICAL SPINE W/O CONT	2,900.00	72141		612
MRI EXT LOWER JOINT W/CONT	3,077.00	73722		610
MRI EXT LOWER JT W/O CONT	2,780.00	73721		610
MRI EXT LOWER JT W/WO CONT	3,798.00	73723		610
MRI EXT LOWER NO JT WO CONT	2,665.00	73718		610
MRI EXT LOWER NO JT W/WO CONT	3,632.00	73720		610
MRI EXT LOWER NO JT W CONT	3,047.00	73719		610
MRI EXT UPPER JOINT W/CONT	2,995.00	73222		610
MRI EXT UPPER JT W/O CONT	2,743.00	73221		610
MRI EXT UPPER JT W/WO CONT	3,752.00	73223		610
MRI UPR EXT W/	2,804.18	73219		610
MRI EXT UPPER NO JT W/WO CONT	3,544.00	73220		610
MRI EXT UPPER NO JT W/O CONT	2,598.00	73218		610
MRI FACE/ORBIT/NECK W CONT	3,326.00	70542		611
MRI FACE/ORBIT/NECK W/O CONT	2,702.00	70540		611
MRI FACE/ORBIT/NECK W/WO CONT	3,843.00	70543		611
MRI KNEE UNI W/CONT	3,077.00	73722		610
MRI KNEE UNI W/WO CONT	3,798.00	73723		610
MRI KNEE UNI W/O CONT	2,780.00	73721		610
MRI LUMBAR SPINE W/O CONT	2,907.00	72148		612
MRI LUMBAR SPINE W/WO CONT	4,091.00	72158		612
MRI LUMBAR SPINE W CONT	3,334.00	72149		612
MRA ABDOMEN W/WO CONT	3,137.00	74185		618
MRA CHEST W/WO CONT	3,155.00	71555		618
MRA HEAD/NECK W/WO CONT	3,593.00	70546		615
MRA NECK W/WO CONT	3,507.00	70549		615
MRA EXT LOWER W/WO CONT	3,408.00	73725		616
MRA UPPER EXTREMITY W W/O CONT	2,767.00	73225		618
MRI PELVIS W CONT	3,176.00	72196		610
MRI PELVIS W/WO CONT	3,879.00	72197		610
MRI PELVIS W/O CONT	2,004.00	72195		610
MRI SHOULDER W CONT	2,995.00	73222		610
MRI SHOULDER W/WO CONT	3,752.00	73223		610
MRI SHOULDER W/O CONT	2,743.00	73221		610

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MRI SPECTROSCOPY	2,195.00	76390		610
MRI THORACIC SPINE W/CONT	3,264.00	72147		612
MRI THORACIC SPINE W/WO CONT	4,023.00	72157		612
MRI THORACIC SPINE W/O CONT	2,875.00	72146		612
MRI THORAX W CONT	2,998.00	71551		610
MRI THORAX W W/O CONTRAST	3,897.00	71552		610
MRI THORAX W/O CONTRAST	2,812.00	71550		610
MRI TMJ'S W W/O CONTRAST	2,620.00	70336		610
CCN PT TYPE D (190389)	1,971.93			
CCN PT TYPE M (190009)	2,747.90			
BONE SCAN TOTAL BODY (ROUTINE)	3,708.00	78306		341
BRAIN SCAN WITH CEREBRAL FLOW	1,416.00	78606		341
BRAIN SCAN CVA EVAL	1,390.00	78605		341
CISTERNOGRAM	1,390.00	78630		341
SPINAL PUNCTURE DIAGNOSTIC	1,447.00	62270		361
INJ PROC AV MALFORM SPINAL	33,429.00	62294		361
THYROID CARCINOMA META/UPTAKE	525	78020		341
RAD LOCAL OF ABSCESS LIMITED	1,429.00	78805		341
MUGA SCAN (ROUTINE)	2,278.00	78473		341
PULM QUANT STUDY	1,309.00	78597		341
LIVER & SPLEEN SCAN (ROUTINE)	2,299.00	78215		341
SHUNT INJECTION	526	49427		361
I-131 WHOLE BODY SCAN	1,807.00	78018		341
NM PULMONARY PERFUSION IMG	1,168.00	78580		341
MULTI-STUDY W/WO PHARM KIDNEY	2,223.00	78709		341
LUNG SCAN VENT&PERF ROUTINE	2,098.00	78582		341
HEPATO DUCT, GBLADR W/WO PHARM	2,363.00	78226		341
NUC CARD STRESS/REST MULT	3,576.00	78452		341
PARA-THYROID SCAN	1,126.00	78070		341
GA-67 LOCAL INFLAMMATORY WB	2,146.00	78806		341
SPECT FOR TUMOR OCTREOTIDE	3,277.00	78803		341

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WHOLE BODY WBC INFLAMATION	2,146.00	78806		341
RENAL SCAN (DMSA)	1,624.00	78700		341
RENAL SCAN W/ VASC FLOW/ FUNC	3,868.00	78707		341
RENAL SCAN W/FLOW/FUN W/ PHARM	2,517.00	78708		341
THYROID THERAPY INITL	1,279.00	79005		342
GI BLEEDING SCAN-RBC TAG	1,216.00	78278		341
MECKLES DIVERTICULI	1,254.00	78290		341
MYOCARDIAL IMAGING	1,194.00	78466		341
EJECT FRACTION 1ST PASS TECH	643	78496		341
RAD LOC TUMOR SPECT	3,277.00	78803		341
BONE SPECT IMAGES	1,781.00	78320		341
LIVER SPECT IMAGES	255.25	78205		340
CEREBRAL SPECT IMAGES	1,909.00	78607		341
CARDIAC SPECT IMAGES	906	78469		341
GASTRIC EMPTYING ROUTINE (P)	1,644.00	78264		341
THYROID ABLATION	1,279.00	79005		342
NM HRT MUSCLE IMAGE SPEC SING	2,360.00	78451		341
CARDIAL SPECT REST SGL STUDY	2,360.00	78451		341
BONE SCAN 3-PHASE	4,192.00	78315		341
CYSTOGRAM NUC MED STUDY	2,037.00	78740		341
SHUNT PATENCY (NERVOUS SYSTEM)	1,130.00	78645		341
SHUNT PATENCY (OTHER)	768	78299		341
GALLIUM GA 67 PER MCI	134.93	A9556		343
I-123 SODIUM IOD CAP 999MCI	165	A9516		343
SULFUR COLLOID 20MCI	49	A9541		343
MAA ISOTOPE 10MCI	80.34	A9540		343
DMSA ISOTOPE PER DOSE CHARGE	586.07	A9551		343
SODIUM PERTEC PER MCI	86.52	A9512		343
XENON XE 133 PER 10 MCI	62.54	A9558		343
I-131 NEI THERAPY PER MCI	97.34	A9517		344
OCTREOSCAN ISOTOPE PER/DOSE	3,545.03	A9572		343
NM DTPA 5-10MCI	190	A9539		343
INDIUM III PENTET PER 0.5 MCI	1,061.00	A9548		343
NM HEPATOBIILIARY SYSTEM IMG	2,363.00	78226		341

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NM HEPATOBILIARY SYSTEM IMG W/	2,883.00	78227		341
NUC SINCALIDE IV	109.27	J2805	U8	636
NM INJ CYSTOGRAM	451	51600		361
NEUROLITE UP TO 25MCI	2,071.90	A9557		343
NM THYROID UP SGL/MULTIPLE	471	78012		341
NM THYROID SCAN W/FLOW WHEN PE	587	78013		341
NM THYROID SCAN W/UP SGL/MULTI	974	78014		341
NM TUMR LOCALIZE WHOLE BODY	5,353.00	78804		341
NM PERITONEAL-VENOUS SHUNT PAT	1,000.00	78291		341
CATH BLADDER SMP	195	51702		349
ONCOSCINT WB MONOCLONAL	3,296.00	78802		341
CEA/CHOLORECT MULTIPLANAR VWS	2,483.00	78801		341
CEA SPECT IMAGES	3,277.00	78803		341
MIBG WHOLE BODY	3,296.00	78802		341
PET ISOTOPE F-18 FDG UPTO 4-40	1,095.00	A9552		343
PET W/CT TUMR IMAG WHOLE BODY	6,622.24	78816		341
PET W/CT TUMR SKULL MID-THIGH	7,901.97	78815		341
PET W/CT TUMR LIMITED AREA	5,545.00	78814		341
IOBENGUANE 1-123 10MCI	6,027.84	A9582		343
TECH TC99M MERTIATIDE 15MCI	154.5	A9562		343
TECH TC 99M MEMBROFENIN 15MCI	62.07	A9537		343
TECH TC 99M SESTAMIBI PER DOSE	417.34	A9500		343
TECH TC 99M TETROFOSMIN /DOSE	317	A9502		343
TECH TC 99M MEDRONATE 30MCI	125	A9503		343
INDIUM 111 OXYQUINOLINE 5 MCI	2,390.19	A9547		343
INDIUM 111 PENTET DISOD 1.5 MCI	1,963.18	A9548		343
TECH TC 99M EXAMETAZIME 25MCI	2,004.95	A9521		343
INDIUM IN 111 PENTETREOT 3MCI	3,740.70	A9572		343

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TECH TC 99M LBL RBC TO 30MCI	86.52	A9560		343
PF NM PULMONARY PERFUSION IMG	194	78580		974
HIV 1 HIV 2 ANTIBODY SGL RESULT	152	86703		302
ISTAT IONIZED CALCIUM	151	82330		301
BILIRUBIN NEONATAL NSY	30	82247		301
DIRECT BILIRUBIN NSY	28	82248		301
GLUCOSE BLOOD	54	82947		301
SPUN HEMATOCRIT NSY	27	85013		305
IV PUSH INITIAL/DRUG	209	96374		260
IV PUSH ADDL SEQ SAME DRUG	152	96376		260
CONSC SED 5+YR 1ST 15 MIN	306	99152		761
CONSC SED BY SAME MED EA AD	306	99153		761
THPY/PRO/DX INJ IV PUSH NEW	171	96375		260
NSI VST NEW LEVEL II	200	99202		761
NSI VST NEW LEVEL I	100	99201		761
NSI VST NEW LEVEL IV	360	99204		761
NSI VST NEW LEVEL III	255	99203		761
NSI VISIT ESTAB LEVEL I	120	G0463		761
NSI VISIT ESTAB LEVEL II	205	G0463		761
NSI VISIT ESTAB LEVEL IV	330	G0463		761
NSI VISIT ESTAB LEVEL V	340	G0463		761
OFFICE CONSULT LEVEL I	150	99241		761
OFFICE CONSULT LEVEL II	200	99242		761
OFFICE CONSULT LEVEL III	250	99243		761
OFFICE CONSULT LEVEL IV	300	99244		761
VST ESTABL LEVEL III	280	G0463		761
CATH BALLOON DIL CRE WIREGUIDE	606.83	C1726		272
SYNCHROMED INFUSION PUMP	14,368.50			278
DURADERM ACEL ALLOGFT 28 SQ CM	1,332.49	C2631		278
OR LEVEL V - 1ST 30 MIN	7,867.00			360
OR LEVEL V - ADD'L 15 MIN	2,251.00			360
OR LEVEL IV - 1ST 30 MIN	6,547.00			360
OR LEVEL IV - ADDL 15 MIN	1,911.00			360
OR LEVEL III - 1ST 30 MIN	5,454.00			360
OR LEVEL III - ADDL 15 MIN	1,636.00			360
OR LEVEL II - 1ST 30 MIN	4,365.00			360

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OR LEVEL II - ADDL 15 MIN	1,364.00			360
OR LEVEL I - 1ST 30 MIN	3,274.00			360
OR LEVEL I - ADDL 15 MIN	1,089.00			360
CEMENT TIBIAL SM RT 72 4800	3,119.05	C1776		278
TIBIAL INSERT	3,566.75	C1776		278
KNEE FEMORALS	5,898.60	C1776		278
THERAPYPRO//DX IV PUSH INITIA	209	96374		260
ORS TITANIUM HOOK CAP	2,480.00	C1713		278
ORS HALF RING	592	C1713		278
ORS TITANIUM TRANSVERSE HOOK	4,248.00	C1713		278
ORS TRANSVERSE BAR	1,112.00	C1713		278
ORS DISTRACTION LOCK	972	C1713		278
ORS INFUSE BONE GRAFT MEDIUM	7,718.00	L8699		278
ORS IPS PEEK ONLAY GROUP A	14,250.00	C1713		278
ORS INFUSE BONE GRAFT SMALL	5,543.00	L8699		278
ORS INFUSE BONE GRAFT X-SMALL	2,775.00	L8699		278
ORS KLS IPS SPLINT	1,124.00	c1713		278
ORS INFUSE BONE GRAFT LARGE	8,603.00	L8699		278
ORS IPS PEEK ONLAY GROUP B	18,750.00	C1713		278
ORS NOSTRIL RETAINER	370			272
ORS IPS ORTHOGNATHIC DBLE JAW	2,243.00			278
ORS SEAMGUARD 45	400			272
ORS SEAMGUARD 60	756			272
ORS STAINLESS STEEL STABILIZER	1,173.00			278
ORS CRANIO BONE VOID FILLER	3,668.00			278
ORS FULL SKULL MODEL	6,947.00	C1776		272
ORS VSP BUNDLE	12,577.00	C1776		278
ORS CRANIO SCULPT	3,668.00			278
ORS SONIC PINS 20 PACK	3,132.00	C1713		278
ORS COSTAL CARTILAGE	960	C1768		278
ORS NANOFAT	720	20926		278
DISTRACTOR INTRNL ARM REMOTE	2,328.00	C1713		278
CH ORS CHEMO CNS	2,010.00	96450		331
BONE CEMENT WITH ANTIBIOTICS	1,331.33	C1713		278

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NAIL 3 0M ELASTIC GOLD 475 930	942.08	C1713		278
NAIL 2 0M ELASTIC GREEN 475920	795.16	C1713		278
SCREW CANULATED SMART	551.67	C1713		278
SCREW LAG GROUP A	795.68	C1713		278
SMART SCREW	795.68	C1713		278
SCREW 4 0 MM LOCKING 22MM	398.9	C1713		278
SCREW 2 4M MAXILLOFACIAL 41953	131.55	C1713		278
CH SCREW BONE GROUP B	222.79	C1713		278
SCREW SELF TAPPING 3 5M 404836	222.79	C1713		278
PLATE BONE GROUP E	3,261.21	C1713		278
VALVE PROGRAMABLE	7,209.88			272
VALVE CODMAN HAKIM PROGRAMMABL	6,212.63			278
GREENFEILD FEMORAL	3,494.60	C1880		278
GUIDE 5MM NERVE PNG-520	5,100.00			272
KIT VALVE NL850-1124	1,862.94			278
SHUNT VALVE CSF SNAP CYLND MED	1,824.75			278
SHUNT CSF SNAP ASSY ULTRA SM	1,748.36			278
ORS BARD PORT MRI DUAL	1,697.44	C1788		278
DBX PUTTY 5CC	2,255.70			278
KIT SHUNT CSF UNITZ LOW PRES	1,596.50			278
REPLIFORM TISSUE REGEN MATRIX	1,540.43	C1762		278
SHUNT ULTRA SMALL	1,508.60			278
IMPLANT BONE 5B040	1,326.13			278
BONE CHIPS CANC 30CC	1,253.98			278
KIT UNI SHUNT W RESERVOIR KIT	1,060.90			272
FLEXIBLE DRILL	689.59			272
FLEXIBLE SCREWS	689.59			272
ANCHOR MICRO QUICK	674.73	C1713		278
IMPLANT ORBITAL 25X50X3 6335	1,200.00	L8610		278
COVER BURR HOLE 82-6010	640.78			278
PIN HALF 5X180 201502	521.96	C1713		278
FLOSEAL MATRIX HEMOSTATIC SEAL	517.72			272
SUTURE ANCHOR	447.7	C1713		278

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BONE SCREW TAP	430.73	C1713		278
PUTTY DBX 1CC	725.66			278
SMART PIN	377.68	C1713		278
BONE STAPLE	286.44	C1713		278
ORS BIO GLUE 10ML	2,109.07			272
BIPOLAR SEALER TISSUELINK	1,340.98			272
CEMENT BONE SIMPLEX P ANTIBIOT	2,015.71	C1713		278
CUBE RANCHO	721.41			278
FEMALE HINGE	163.38			278
BONE FILTER	3,191.19	C1713		278
GRAFT BONE GRANULES STERILE	1,612.57			278
KIT CRANIAL ACCESS INT	630.17			272
KIT EXTERNAL DRAIN 82 1720	528.33			272
KIT VENTRICULAR CATH INT	685.98			272
PIN PED SKULL 191032	65.78	C1713		278
STAPLER ENDO	642.91			272
STAPLER RELOADS 35MM	453.2			272
STENT POLARIS	706.56	C2617		278
TROCAR	549.55			272
TUBE EXCHANGE 415113	328.88			272
SLEEVE COMPONENT	417.99			278
HIP STEM ACCOLADE PLUS	11,156.42	C1776		278
BIOPSY SYSTEM	297.05			272
SUTURE RETRIEVER	458.31			272
LEAD NEUROSTIMULATOR	11,512.89	C1778		278
WAND EVAC 70 XTRA	282.2			272
TUNNELER VAGUS NERVE STIM	984.52			272
TUBE TRANSGASTRIC-JEJUN 18F	844.48			278
STENT POLARIS 6X24	405.26	C2617		278
SLEEVE TROCAR	322.51			272
CH SCREW BONE GROUP A	193.64	C1713		278
CH PIN GUIDE GROUP B	234.46			278
INSTRUMENT SURGICAL	795.68			272
CH GUIDEWIRE GROUP C	415.87	C1769		272
DRILL TWIST DISP	954.81			272
ORS APPLIER CLIP	861.45			272
TUBE EAR TUBE	77.23			278
DRAIN SURGICAL	57.29			272

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PATELLA KNEE	3,288.79	C1776		278
TIBIAL INSERT	2,126.04	C1776		278
BASEPLATE TIBIAL	7,445.40	C1776		278
COMPONENT FEMORAL	11,196.74	C1776		278
BONE CANC CHIPS ORS	2,406.12			278
BONE CANCELLOUS CHIPS ORS	3,781.05			278
WAND EVAC 70 XTRA	564.4			272
WRENCH FIXATOR EXTERNAL	354.34			272
PACEMAKER ADAPTA ADSR01	14,381.56	C1786		275
IMPL HIP STEM/NECK EXTEN	6,390.86	C1776		278
IMPL KNEE PATELLA	2,423.10	C1776		278
IMPL KNEE TIBIAL INSERT	5,134.76	C1776		278
SCREW BIO-INTERFERENCE	432.85	C1713		278
CONNECTOR ROD TRANSVERSE	1,955.24			278
GRANULE CHRONOS 1.4/2.8 5CC	931.47	C1713		278
IMPL HUMERAL STEM	9,157.69	C1776		278
INSTRUMENT DRILL TIP	1,873.55			272
PIN ORTHO ABSORBABLE	2,136.65	C1713		278
SLEEVE TROCAR 05MM	290.69			272
INSTRUMENT ORTHO	795.68			272
GRAFT DURA GEN 3X3	1,294.30	C1762		278
SURGICEL ABSORBABLE GROUP A	142.16			272
ELECTRODE CUTTING	568.64			272
SEPRAFILM MEMBRANE	721.41			278
SHUNT TESIO CATH	1,250.00	C1750		278
ORS BAR CONNECTING GROUP B	530.45			278
CAP END GROUP B	954.81			278
NAIL FEMORAL GROUP A	1,591.35	C1713		278
NAIL FEMORAL GROUP B	2,387.03	C1713		278
NAIL FEMORAL GROUP C	3,978.38	C1713		278
NAIL FEMORAL GROUP D	5,569.73	C1713		278
NAIL TIBIAL GROUP A	2,387.03	C1713		278
NAIL TIBIAL GROUP B	3,978.38	C1713		278
PLATE BONE GROUP A	387.28	C1713		278
PLATE BONE GROUP B	927	C1713		278
PLATE BONE GROUP C	1,648.00	C1713		278
PLATE BONE GROUP D	1,988.13	C1713		278
PLATE CONDYLAR GROUP A	954.81	C1713		278

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PLATE DCP GROUP B	954.81	C1713		278
PLATE LCP GROUP A	397.84	C1713		278
PLATE LCP GROUP B	954.81	C1713		278
PLATE LCP GROUP C	1,697.44	C1713		278
PLATE MAXILLOFACIAL GROUP A	742.63	C1713		278
PLATE MAXILLOFACIAL GROUP B	1,648.00	C1713		278
PLATE RECONSTRUCTION GROUP A	398.9	C1713		278
PLATE RECONSTRUCTION GROUP B	954.81	C1713		278
SYSTEM CLOSURE CATER- THOMASON	612.67			272
CLAMP GROUP D	2,783.80			278
ROD CARBON GROUP A	398.9			278
ROD CARBON GROUP C	1,697.44			278
ROD REAMING GROUP A	954.81			272
SCREW CANCELLOUS GROUP A	74.26	C1713		278
SCREW CANCELLOUS GROUP B	222.79	C1713		278
SCREW CANCELLOUS GROUP C	386.25	C1713		278
SCREW CANCELLOUS GROUP D	772.5	C1713		278
SCREW CANNULATED GROUP A	159.14	C1713		278
SCREW CANNULATED GROUP B	385.22	C1713		278
SCREW CANNULATED GROUP C	795.68	C1713		278
SCREW CORTICAL GROUP A	74.26	C1713		278
SCREW CORTICAL GROUP B	222.79	C1713		278
SCREW CORTICAL GROUP C	331	C1713		278
SCREW CORTICAL GROUP D	464.67	C1713		278
SCREW CORTICAL GROUP E	596.23	C1713		278
SCREW CORTICAL GROUP F	861.45	C1713		278
SCREW LOCKING GROUP A	387.28	C1713		278
SCREW SHAFT GROUP A	159.14	C1713		278
WASHER GROUP A	159.14			278
WASHER GROUP B	424.36			278
WIRE K GROUP A	154.5	C1713		278
WIRE K GROUP B	385.22	C1713		278
WIRE K GROUP C	795.68	C1713		278
CAP END GROUP A	398.9			278
BAG VENTRAL WALL DEFECT	757.48			272
EVICEL HEMOSTATIC AGENT 1ML	572.89			250
EVICEL HEMOSTATIC AGENT 5ML	2,365.81			250
CATH PASSER ORS	530.45			272

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
KIT TEST LEAD STIMULATION	4,423.95	C1897		278
REAMER	663.06			272
GRAFT SYNTHETIC GROUP B	1,697.44	L8670		278
GRAFT SYNTHETIC GROUP C	2,652.25	L8670		278
GRAFT FABRIC GROUP A	954.81	C1768		278
NUT MR SAFE 03 311 061	33.95			278
TUBE ASSEMBLY RIA	1,710.17			272
INTEGRA MATRIX MESH PER SQ CM	74.26	C9363		278
DEVICE LIGASURE ADVANCE	2,174.82			272
DERMABOND SKIN CLOSURE	189.97			272
KIT ACL	1,366.44			272
KIT BIO-TENODESIS DISPOSABLES	795.68	C1713		278
TUBING INSUFFLATOR	450.88			272
SEALER DURASEAL	1,983.78			272
TRAY LUMBAR PUNCTURE	169.95			272
MILD PROCEDURE KIT	7,161.08			272
RADIALULNAR JOINT STEM	7,173.81	C1776		278
SUTURE KIT	1,193.51			272
EXTERNAL FIXATOR RAIL	2,781.00			278
TROCAR 12MM	165			272
HANDPIECE ULTRACISION	899			272
IMPLANT EAR	5,617.50			278
PACK LAPAROSCOPY CUSTOM EPCH	234.83			272
AICD DUAL CHAMBER	32,500.00	C1721		278
ORS 10MM COAGULATING SHEAR	1,570.13			272
BAR CONNECT 339 575	800			278
BROVIAC SINGLE LUMEN 6 6 FR	534.69	C1751		278
BUR	227.03			272
CANNULA DILATOR 5MM W SLEEVE	275.83			272
CATHETER GROUP C	515			272
CATHETER GROUP E	1,697.44			272
CHEST DRAIN	216.42			278
CLIP MUSCLE	156.56			272
DERMA CARRIER 2195 14	150.65			272
DILATOR BALLOON EXT 013205	447.7	C1726		272
DRAIN BLAKE 1/8 INCH	205.81			272

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ENDO CATCH	729.9			272
ENDO LOOPS PDS II EZ10G	82.75			272
ENDOPATH	1,150.02			272
ENDOPATH STABILITY SLEEVE 5MM	201.57			272
FIBER LASER ADD/SLAT 1 8X 10F	2,060.27			272
CH GUIDEWIRE GROUP A	46.68	C1769		272
HALF PIN	543.18	C1713		278
HAND IMMOBILIZER ALUMI	133.67			272
INTRODUCER	311.9	C1894		272
KNEE IMMOBILIZER	127.31	L1830		274
LIGACLIP	318.27			272
LIGACLIP GROUP B	547.42			272
LINEAR CUTTER RELOAD	886.91			272
CH LINEAR STAPLER GROUP A	896.1			272
CH LINEAR STAPLER GROUP B	541.78			272
LINEAR STAPLER RELOADS	267.35			272
MULTIPLE CLIP APPLIERS	311.9			272
SPINAL NEEDLE	243.08			272
PAINBUSTER 100ML	1,873.55			272
PERFORATOR	732.02			272
CH PIN GUIDE GROUP A	350.1			278
EXTERNAL FIXATOR POST	488.01			272
RELOADABLE LINEAR CUTTER	1,050.29			272
RELOADABLE LINEAR CUTTER	698.07			272
RETRACTOR FISH HS3206	199.45			272
RETRACTOR NEURO ELASTIC	70.02			272
ROD 3 0M GUIDE 355 041S	326.76			272
SET HOT LINE	46.68			272
SET LEVEL 1	182.47			272
SET MALLRS IRRIG & BIPOLAR COR	604.71			272
SKIN 35W 059037	38.19			272
SPLINT DOYLE NASAL	320.39			272
STAT TACK 5MM	755.36			272
SUTURE ASSISTANT	403.14			272
TOURNIQUET DISP 12IN	171.87			272
TUBE T 5FR	589.86			278
ULTRACISION HARMON SCALPEL	1,406.98			272
WIRE GUIDE THREADED 292 69	795.68	C1769		272

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CH WIRE GUIDE GROUP A	364.95	C1769		272
DRESSING ABDOMINAL VAC	861.45			272
ENDOPOUCH RETRIEVAL	282.22			272
CH GUIDEWIRE GROUP B	267.35	C1769		272
CELL SAVER CONTRACT SERVICE	2,903.00	86891		300
TUBE MIC TRANSQAS JEJUNAL	1,293.68			278
EXTRACTOR STONE	727.78			272
TUBE MOSS GASTROSTOMY	685.34			272
RETRACTOR ENDO II	689.59			272
RANEY SCALP CLIPS	407.39			272
BOWL CEMENT MIXING	519.84			272
SCISSORS AEM CVD	241.89			272
ENDOPATH SCISSORS	381.92			272
ENDOPATH DISSECTOR	401.02			272
BURR SMALL ACORN	199.82			272
BIPOLAR FORCEPE OLSEN	199.45			272
STAPLER SKIN 35W 35R	43.26			272
STAPLER CVD CONTOUR CS40G	1,054.53			272
EXTERNAL FIXATOR KIT	6,878.88			278
ANCHOR SUTURE TWINFIX	528.33	C1713		278
RELOAD ECHELON STAPLER	385.22			272
STAPLER ECHELON	595.34			272
DRILL BIT	387.28			272
CLAMP GROUP B	1,339.00			272
CLAMP GROUP C	1,989.19			272
DRILL BIT GROUP A	398.9			272
DRILL BIT GROUP B	954.81			272
DRILL BIT GROUP C	1,671.98			272
CATHETER GROUP B	216.3			272
CATHETER GROUP A	74.26			272
BRUSH CYTOLOGY	163.38			272
GUIDEWIRE ORTHO	566.52	C1769		272
BUR BONE/ORTHO	424.36			272
CH WIRE GUIDE GROUP B	154.5	C1769		272
DVC LIGASURE PRECISE	670.49			272
ORS APPLR CLIP LIGMAX LTX FR	488.01			272
STAPLER LINEAR CUTTER	1,705.93			272
GUIDE DRILL	432.85			272
ROD CONNECTING	1,438.58			278

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
IMPL TIBIAL SPACER	3,162.33	C1776		278
IMPL KNEE FEMORAL	18,000.07	C1776		278
ORS IMPL KNEE TIBIAL INSERT	10,881.65	C1776		278
TISSUE TENDON TIBIALIS POSTER	5,187.80			278
BUTTON RETROBUTTON	1,464.04	C1713		278
IMPL ELBOW ULNAR	2,928.08	C1776		278
IMPL SUBTALAR	5,107.17	C1776		278
CONNECTOR SHUNT ANGLED	311.9			278
SET HANDPIECE SURGILAV	316.85			272
KIT SYNDES MOSIS TIGHTROPE	2,213.04	C1713		278
DEVICE FIXATION	1,989.19			278
TUBE TRACH PED	304.88	A7521		278
CEMENT BONE KYPHX HV-R	795.68	C1713		278
PATCH WHITTMANN	5,060.49			272
BONE ILIAC WEDGE	3,618.73			278
PIN GROUP A	159.14	C1713		278
PIN GROUP B	530.45	C1713		278
PIN GROUP C	954.81	C1713		278
PIN GROUP D	1,697.44	C1713		278
DURA MATRIX GROUP D	3,261.21	C1763		278
DURA MATRIX GROUP E	4,853.62	C1763		278
MESH GROUP A	954.81	C1781		278
MESH GROUP D	3,263.33	C1781		278
MESH GROUP F	7,320.21	C1781		278
MESH GROUP G	12,094.26	C1781		278
RING GROUP B	2,786.98			278
BOLT GROUP A	74.26			278
BOLT GROUP D ORS	464.15			278
SAW BLADE GROUP A	159.14			272
SAW BLADE GROUP B	530.45			272
INJECTOR CONTRAST AGENT OR ACC	1,790.00			272
BURR HOLE COVER GROUP A	795.68			278
EXT FIX POST	855.09			278
EXT FIX UNIVERSAL JOINT	1,820.50			278
CEMENT HYDROSET INJECT 05CC	3,700.42	C1713		278
EXT FIX ROD GROUP D	2,068.76			278
KNOT PUSHER	687.78			272
KIT MENISCAL REPAIR CROSSFIX	1,379.17			272

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
KNOT PUSHER/ SUTURE CUTTER FF	1,452.50			272
COMPONENT HIP GROUP F	3,579.48	C1776		278
COMPONENT HIP GROUP J	8,353.53	C1776		278
COMPONENT HIP GROUP K	11,139.45	C1776		278
COMPONENT KNEE GROUP A	398.9	C1776		278
COMPONENT KNEE GROUP B	927	C1776		278
COMPONENT KNEE GROUP C	1,697.44	C1776		278
COMPONENT KNEE GROUP D	1,988.13	C1776		278
COMPONENT KNEE GROUP E	2,783.80	C1776		278
COMPONENT KNEE GROUP F	3,579.48	C1776		278
COMPONENT KNEE GROUP G	4,375.15	C1776		278
COMPONENT KNEE GROUP H	5,170.83	C1776		278
COMPONENT KNEE GROUP I	6,365.40	C1776		278
COMPONENT KNEE GROUP J	8,353.53	C1776		278
COMPONENT KNEE GROUP K	11,139.45	C1776		278
COMPONENT KNEE GROUP L	14,322.15	C1776		278
COMPONENT KNEE GROUP M	17,504.85	C1776		278
BNE GRFT SUBACTIFUSE GRP A ORS	4,774.05	C1713		278
BONE GRAFT SUBACTIFUSE GROUP B	7,725.00	C1713		278
CAGE SPINAL GROUP A	4,774.05			278
CAGE SPINAL GROUP B	7,956.75			278
CAGE SPINAL GROUP C	11,139.45			278
CAGE SPINAL GROUP D	14,322.15			278
CAGE SPINAL GROUP E	17,502.73			278
CAGE SPINAL GROUP F	20,685.43			278
PLATE SPINAL GROUP A	4,800.00	C1713		278
ROD SPINAL GROUP A	927.23			278
ROD SPINAL GROUP B	1,591.35			278
ROD SPINAL GROUP C	2,652.25			278
SCREW SPINAL GROUP A	398.9	C1713		278
SCREW SPINAL GROUP C	1,697.44	C1713		278
SCREW SPINAL GROUP D	1,988.13	C1713		278
SCREW SPINAL GROUP E	2,783.80	C1713		278
SCREW SPINAL GROUP F	3,579.48	C1713		278
SCREW MAXILLOFACIAL GROUP B	216.3	C1713		278
SCREW MAXILLOFACIAL GROUP C	385.22	C1713		278

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
HOOK SPINAL GROUP A	1,000.00			278
HOOK SPINAL GROUP C	2,700.00			278
HOOK SPINAL GROUP E	4,200.00			278
MESH BONE PANEL GROUP A	954.81	C1781		278
MESH BONE PANEL GROUP B	1,697.44	C1781		278
MESH BONE PANEL GROUP C	2,652.25	C1781		278
ARCH BAR	159.14			278
CEMENT DELIVERY KIT	1,060.90	C1713		278
CLIP LIGATING LG	528.33			272
CLIP LIGATING SM	290.69			272
CLIP LIGATING MED	432.85			272
CUTTER WIRE PLATE	704.44			272
PEG BONE SUBCHONDRAL	509.23	C1713		278
KIT ACL DISPOSABLES	1,050.29			272
GRAFT BONE MANDIBLE	2,706.00			360
GRAFT BONE INFUSE	5,356.00			278
CH COLLECT BLD PORT/ACSS DVC	189		36591	360
FILLER BONE OSTEOSPONGE	1,211.25	C1713		278
TUBE MICKEY	237.5	B4087		278
PACK BASIC EPCH	219.08			272
EPCH BRACE KNEE HINGED	621.7	L1810		274
PACK EXTREMITY EPCH	233.48			272
MEDICAL DEVICE ACTIVATION	1,210.00			272
MANDIBLE DISTRACTOR	8,949.00			272
PECTUS BAR	3,750.00			278
VAGAL NERVE STIMULATOR	31,495.50	L8686		278
IMPL DEXTRAN/HYALURONIC ACID	1,348.71	L8604		278
PLATE CONTOURED TITANIUM	14,550.00	C1713		278
DEVICE IM FEMUR NAIL *ELLIPSE	24,335.00	C1713		278
DEVICE VSP BUNDLE	2,003.00	C1776		278
EPCH CRANI PACK	323			272
LE FORTE II BUNDLE	21,900.00			278
INSERT TISSUE EXPANDER	800		11960	278
ORS EVICEL HEMOSTATIC AGENT	1,120.00			278
SEAM GUARD	3,570.00			272
SILO BAG 4CM	1,140.00			272
SILO BAG 10CM	1,205.00			272
SILO BAG 7.5CM	1,140.00			272

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ORS CHAIT PERCUT CECOSTOMY SET	794			272
PROCISE MLW WAND	1,005.00			272
HMC TRAY LUMBAR PUNCTURE	75			272
INF TRAY LUMBAR PUNCTURE	75			272
CLIN PATH CONSULT	5	80500		971
FLOW CYTOMETRY, EA MARK PROFEE	38			971
FLOW CYTOMETRY, EA MARK PROFEE	38			971
LAB PATH CONSULT NO HIST	121.38	80500		310
LAB PATH CONSULT- HISTORY	127.28	80502		310
HEMOC PT TYPE I (00191981)	2,946.00			
HMOC PT TYPE P (00192898)	2,600.00			
HMOC PT TYPE P (00193227)	2,233.00			
HMC COLLECT BLD PORT/ACCES DVC	189	36591		300
HMC ASP BONE MARROW ONLY	570	38220		361
HMC BX BONE MARROW NEEDLE	703	38221		361
HMX CHEMO SQ/IM NON ANTI- NEOPL	334	96401		331
HMC CHEMO IV INF PRO W/PUMP	878	96416		335
HMC CHEMO CNS W/ PUNC	979	96450		331
HMC VISIT ESTAB LEVEL I	79	G0463		510
HMC VISIT ESTAB LEVEL II	105	G0463		510
HMC BLOOD TRANSFUSION	817	36430		391
HMC DECLOT PORT W/THROMB AGENT	524	36593		361
HMC INJECTION IV INTL	209	96374		260
HMC THPY/PRO/DX IV PUSH NEW	216	96375		260
HMC INJECTION, SUBQ/IM	120	96372		940
HMC IV THERAPY INIT 16-90 MIN	482	96365		260
HMC IV THERAPY INIT 16-90 MIN	325	96366		260
HMC LUMBAR PUNCTURE	1,523.00	62270		361
HMC CHEMO IV INFUSIO<=1 HR	869	96413		335
HMC CHEMO IV INFUSION ADD HR	489	96415		335
HMC CHEMO IV PUSH ADDL DRUG	568	96411		331
HMC CHEMO IV PUSH SINGLE INIT	685	96409		331
HMC DIRCT REFERRAL OBSCARE PX	195	G0379		762

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
HMC CHEMO IV INFS EA ADDL SEQ	602	96417		335
HMC VENIPUNCTURE HEMONC	24	36415		300
HMC IV INF THPY FLD INT 31M-1H	386	96360		260
HMC IV INF THPY FLUID ADDL HR	134	96361		260
HMC IV INFUSION SEQ EA ADD HR	170	96367		260
HMC IV PUSH SAME DRUG	152	96376		260
HMC COMPLEX PX > 60 MIN	865			361
HMC SIMPLE PX 16-30 MIN	289			361
HMC INTERMED PX 31-60 MIN	578			361
HMC OBSERVATION PER HR	84	G0378		762
HMC PLACE NG TUBE MD W/GUIDE	432	43752		361
HMC IV INFUS THPY/DX CONCUR	161	96368		260
HMOC BX LESN SKIN/SUBQ/MU SGL	325	11100		361
HMC PHLEBOTOMY THERAPEUTIC	209	99195		940
HMC ADM INFLUENZA VACC NO	57	G0008		771
HMC IMMUNIZATION ADM INITIAL	69	90471		771
HMC IMMUNIZATION ADM ADDL <18	41	90461		771
HMC ECG MONIT/REPR 48 HRS	630	93226		730
HMC CARDIOVERSION ELECTRIC EXT	1,440.00	92960		361
HMC IMMUNIZATION ADMIN ADD	56	90472		771
HMC IMMUNIZATION ADMIN 1ST <18	20	90460		771
HMC CPR	895	92950		361
HMC DEBRIDEMENT OPEN WOUND	350	97598		361
HMC COMPLEX RECVRY SUBS 15 MIN	660			750
HMC COMPLEX RECVRY INTL 30 MIN	1,690.00			750
HMC INTER RECOVERY SUBS 15 MIN	580			750
HMC INTER RECOVERY INTL 30 MIN	1,615.00			750
HMC MINOR RECOVERY SUBS 15 MIN	305			750
HMC MINOR RECOVERY INTL 30 MIN	1,055.00			750
PO PT TYPE P (190215)	2,600.00			

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PO PT TYPE S (190223)	2,233.00			
PO PT TYPE J (190231)	2,233.00			
7TH FLOOR - PT TYPE W	1,895.20			
PO PT TYPE I (190397)	2,233.00			
PO PT TYPE Z (190546)	1,990.00			
PO PT TYPE P (00193235)	2,233.00			
PED BLOOD TRANSFUSION	817	36430		391
PEDS BONE MARROW BIOPSY	753	38221		361
PED INJECTION IV	209	96374		260
THPY/PRO/DX INJ IV PUSH NEW	216	96375		260
INJECTION, SUBQ/IM	120	96372		940
IV THERAPY INIT 16-90 MIN	482	96365		260
IV INFUSION THERAPY ADDL HR	325	96366		260
PED LUMBAR PUNCTURE	1,523.00	62270		361
PEDS VACCINE ADMIN, 1ST	69	90471		771
PED VACCINE ADM, EACH ADD	53	90472		771
ARTHROCENT ASP/INJ JT INTERMED	401	20605		361
ADMIN PNEUMOCOCCAL VACCINE	53	G0009		771
CHEMO IV INFUSIO<=1 HR	852	96413		335
CHEMO IV INFUSION ADD HR	322	96415		335
CHEMO IV PUSH ADDITIONAL DRUG	568	96411		331
CHEMO IV PUSH SINGLE INITIAL	685	96409		331
PED DIRECT REFERRAL OBS CARE	195	G0379		762
PED ADMIN INFLUENZA VACCINE NO	57	G0008		771
COLLECT BLOOD PORT/ACCESS DVC	189	36591		300
PED COLLECT FINR/HEEL/EAR STK	26	36416		300
PED IV INF THPY FLUID ADDL HR	134	96361		260
PED IV INF SEQ UP TO 1 HR	170	96367		260
PED IV INF THPY FLD INT 31M-1H	386	96360		260
PED CHEMO SQ/IM NON ANTI- NEOPL	358	96401		331
PED COMPLEX PX > 60 MIN	865			361
PED SIMPLE PX 16-30 MIN	289			361
PED INTERMED PX 31-60 MIN	578			361
PED OBSERVATION PER HR	84	G0378		762

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PED PLACE NG TUBE MD W/GUIDE	432	43752		361
PED CHEMO PROLO INFUSE W/PUMP	878	96416		335
PED IV PUSH SAME DRUG	152	96376		260
PED IV INFUS THPY/DX CONCUR	161	96368		260
THORACENTESIS W/O IMAGING GUID	1,140.00	32554		361
PEDI PUNCT ASP/INJ SHUNT TUBE	822	61070		361
APPL CAST LEG LONG	413	29345		361
PED PUNCT VENTRIC W/O INJ	1,036.00	61020		361
THORACENTESIS W-O IMAG GUID	1,140.00	32554		761
PED BROVIAC REPAIR	3,287.00	36576		361
PED I&D ABSC SMP	513	10060		361
PED VACCINE IM/ORAL 1ST <18	19	90460		771
PED PERITONEAL DIALYSIS (CCPD)	960	90945		804
PED I&D VULVA/PERINEAL	621	56405		361
IMMUN ADMIN ANY ROUTE EA ADDL	41	90461		771
PED DEBRIDEMENT OPEN WOUND	350	97598		420
PED THROMBECT DIALY CIRCUIT	472	36905		480
PED CPR	900	92950		489
PED TRACHEOSTOMY KIT	32	A4629		272
PED DEBR NON-SEL W/O CPLX	230	97602		420
PED INTER RECOVERY SUB 15 MIN	580			750
PED MINOR RECOVERY SUBS 15 MIN	300.76			750
PED MINOR RECOVERY SUBS 30 MIN	1,052.66			750
PED COMPLEX RECVRY SUBS 15 MIN	358			750
PED COMPX RECVRY INTL 30 MIN	1,689.00			750
PED RETCAM PHOTO/EYE EXAM-I/P	220	92250		361
PED RETCAM PHOTO/EYE EXAM-O/P	220	92250		510
PED RETINOPATHY (ROP) O/P	860	67229		510
PED RETINOPATHY (ROP) I/P	860	67229		361
PED HEMODIALYSIS OBS	1,530.00	90935		821

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PED RPR LAC SMP FACE 2.6-5.0 CM	450	12013		360
PED RPR LAC SMP FACE <2.5 CM	430	12011		360
PARAFFIN BATH OT	150	97018	GO	430
ELECTRICAL STIM UNATTENDED PT	100	G0283	GP	420
TRANSCUTANEOUS NEUROSTIM OT	105	64550	GO	430
TRANSCUTANEOUS NEUROSTIM PT	115	64550	GP	420
CH ULTRASOUND EACH 15 MIN PT	152	97035	GP	420
CH ULTRASOUND EACH 15 MIN OT	156	97035	GO	430
CH ELECT STIM MANUAL 15 MIN PT	120	97032	GP	420
CH ELECT STIM MANUAL 15 MIN OT	115	97032	GO	430
CH MANL THERPY EACH 15 MIN OT	413	97140	GO	430
CH MANL THERPY EACH 15 MIN PT	209	97140	GP	420
CH MASSAGE 15 MIN OT	194	97124	GO	430
CH MASSAGE 15 MIN PT	194	97124	GP	420
CH GAIT TRAINING EACH 15 MIN	112	97116	GP	420
CH THERAPEUTIC PROC GRP PT	102	97150	GP	420
CH FUNCT THER ACT EA 15 MIN OT	193	97530	GO	430
CH THERAP EXER EACH 15MIN PT	219	97110	GP	420
SELF CARE/ADL TRNG EA 15MIN OT	174	97535	GO	430
CH SPEECH LANG THERAPY BRIEF	565	92507	GN	440
CH SWALLOW/ORAL FUNCT THER BRF	136	92526	GN	440
CH SPEECH LANG THERAPY BASIC	565	92507	GN	440
CH SPEECH LANG THERAPY INTERM	565	92507	GN	440
CH SPEECH LANGUAGE THERAPY EXT	565	92507	GN	440
CH SWLW/ORAL FUNCT THER BAS	136	92526	GN	440
NEUROMUSCUL RE-ED EA 15 MIN OT	213	97112	GO	430

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CH NEUROMSCL RE-ED EA 15MINPT	213	97112	GP	420
CH ORTHTICS FITING EA 15 MINOT	212	97760	GO	430
CH ORTHTICS FITING EA 15 MINPT	212	97760	GP	420
WHEELCHAIR MGMT EA 15 MIN PT	91	97542	GP	420
CH PT DBR NON-SELW/O	233	97602	GP	420
CH PT DBR NON-SEL W/O 45MINPRH	349	97602	GP	420
CH OT DBR NON-SELW/O	216	97602	GO	430
OT DEBR NON-SEL W/O 45 MIN PRH	149	97602	GO	430
CH PT DEBR NON-SEL W/O 1 HRPRH	466	97602	GP	420
CH PT DBR NON-SEL W/O 15MINPRH	161	97602	GP	420
ACTIVE WOUND CARE >20CM OT	221	97598	GO	430
ACTIVE WOUND CARE >20CM PT	221	97598	GP	420
CH DBR/REM TISS ADD 20CMOTEXT	323	97598	GO	430
CH DBR/REM TISS ADD 20CMPTEXT	323	97598	GP	420
NEG PRES WOUND TX>50CM PT	296	97606	GP	420
CH NEG PRES WOUND TX < 50CM PT	201	97605	GP	420
NEG PRES WOUND TX>50CM OT	276	97606	GO	430
CH NEG PRES WOUND TX < 50CM OT	215	97605	GO	430
NEG PRES WOUND TX>50CM OT EXT	276	97606	GO	430
CH SWALLOW/ORAL FUNCT 60 MIN	340	92610	GN	444
CH ORL/SWLW FUN RE-EVAL45MIN	338	92610	GN	444
CH MOD BARIUM SWALLOW STUDY	350	92611	GN	444
CH ORL/SWLW FUN RE-EVAL60MIN	340	92610	GN	444
AUD ASSESSMENT REHAB FIRST HR	331	92626	GN	440
AUD REHAB PRE-LINGUAL 30 M	314	92630	GN	440
AUD ASSESSMENT REHAB ADD 15 M	84	92627	GN	440
AUD REHAB PRE-LINGUAL 45 M	433	92630	GN	440

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
AUD REHAB PRE-LINGUAL 60 M	433	92630	GN	440
AUD REHAB POST-LINGUAL 45 M	433	92633	GN	440
AUD REHAB RE-EVAL 60 M	331	92626	GN	440
CH ST BEAV QULI ANALYS VCE	272	92524	GN	444
CH ST EVAL FLUENCY	272	92521	GN	444
CH ST EVAL SOUND PRODUCTION	291	92522	GN	444
CH SPEECH EVAL LANG COMP/EXP	136	92523	GN	444
SLP RE-EVALUATION MEDICAID	272	S9152		444
AUD REHAB PRE-LING 15 M	143	92630	GN	440
CH DIGIT SPLINT	12.73	L3929		270
WRIST-HAND ORTHOSIS	72.14			270
CH PT RE-EVAL EST POC	440	97164	GP	424
CH PT HIGH COMPLEX EVAL	812	97163	GP	424
CH OT LOW COMPLEX EVAL	243	97165	GO	434
CH OT HIGH COMPLEX EVAL	812	97167	GO	434
CH OT RE-EVAL EST POC 30M FACE	440	97168	GO	434
CH PT MOD COMPLEX EVAL	534	97162	GP	424
CH OT MOD COMPLEX EVAL	534	97166	GO	434
CH PT LOW COMPLEX EVAL	276	97161	GP	424
PASSY-MUIR VALVE	245.46			270
GAIT BELT	47.93			270
PROST TRAIN 15 MIN OT	193	97761	GO	430
PROST TRAIN 15 MIN PT	186	97761	GP	420
CH SPL CHECK EST PT 15 MINOT	200	97763	GO	430
CH ORL/SWLW FUN RE-EVAL30MIN	277	92610	GN	444
CH SEF CRE/AD TRNG EA 15MIN PT	174	97535	GP	420
CH SWALLOW/ORAL FUNCT THER EXT	136	92526	GN	440
CH FUNCT THER ACT EA 15 MIN PT	193	97530	GP	420
CH THERAP EXER EA 15 MIN OT	219	97110	GO	430
CH SWLW/ORAL FUNCT THER INTER	136	92526	GN	440
CH ST EVAL ORL AND SWLW FNCT	277	92610	GN	444
CH ACTIVE WOUND CARE <20CM OT	159	97597	GO	430

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CH ACTIVE WOUND CARE <20CM PT	159	97597	GP	420
SWALLOW/ORAL FUNCTION 45 MIN	338	92610	GN	444
<24MOS-TRANSPORT FIRST 30MIN	125	99485		450
<24 MOS-TRANSP EA ADL 30MIN	65	99486		450
STERILE WATER DILUE/FLUSH 10ML	5.3	A4216		250
ACTHAR GEL 80U	43,629.38	J0800	TB	250
IFOFOSAMIDE 1 GM INJ	112.8	J9208		636
DEXAM DIL .1MG/ML	35	J1100		636
NA PO4 INJ	18.55			250
PROPOFOL 10MG/ML INJ (20ML)	18.55	J2704		636
IDAMYCIN 5MG INJ	884.08	J9211	TB	250
EUCERIN CR LB.	39.26			250
DEXAMETHASONE SOD PHOS 1MG INJ	18.55	J1100		636
GANCICLOVIR 500MG INJ	359.51	J1570		636
HEPARIN 1,000 UNITS INJ (30ML)	18.55	J1644		636
PERIDEX RINSE	53.37			250
HYPERAL SOL	460			258
VECURONIUM 20MG V	18.55			250
MAG-OX 400 MG	5.3			250
DOPAMINE 40MG INJ-PREMIX 250ML	122.98	J1265		636
CYPROHEPTADINE 4MG TABLET	5.3			250
CYPROHEPTADINE SYRUP 0.4 MG/ML	5.3			250
DIPHENHYDRAMINE 25MG CAPSULE	5.3			250
ADENOSINE THERAP 6MG/2ML INJ	126.95	J0153		636
DIPHENHYDRA ELIX 12.5MG/5ML UD	5.3			250
DIPHENHYDRAMINE 50MG/ML INJ	18.55	J1200		636
PROMETHAZINE 25MG TAB	5.3			250
METHOTREXATE 5MG INJ	104.88	J9260		636
PROMETHAZINE SYRUP 6.25 MG/5ML	5.3			250
PROMETHAZINE 25 MG/ML INJ	18.55	J2550		636
OCTREOTIDE 50MCG	124.03	J2354		637
MAGONATE 500MG	5.3			250

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VITAMIN B-12 TAB	5.3			250
DAPSONE 25MG TAB	5.3			250
SARGRAMOSTIM 50MCG INJ	1,193.18	J2820	TB	250
FILGRASTIM 1MCG INJ	1,169.28	J1442	TB	636
CHARCOAL/SORBITOL	122.98			250
FILGRASTIM 1MCG INJ	973.05	J1442	TB	636
EPINEPHRINE TOP SOL 1MG/ML 30M	375.42			250
ZANTAC 15MG/ML SU	5.3			250
OXYBUTYNIN SYRUP	5.3			637
POTASSIUM CHLORIDE 20 MEQ TAB	5.3			250
ATGAM 5ML INJ	3,588.90	J7504	TB	636
CYCLOPHOPHOSPHLYOP 100MG INJ	175.8	J9070	TB	636
ALBUTEROL 4MG SR TAB	5.3			259
METRONIDAZOLE 250MG TABLET	5.3			250
AMPICILLIN/SULBACTAM 1.5GM INJ	18.55	J0295		636
AMPICILLIN/SULBACTAM 1.5GM INJ	18.55	J0295		636
KETOROLAC 15MG IM	18.55	J1885		636
GENTAMICIN INJ 10MG/ML 2ML	35	J1580		636
GENTAMICIN 80 MG/2 ML INJ	18.55	J1580		636
TOBRAMYCIN 80MG/2ML INJ	18.55	J3260		636
TOBRAMYCIN DIL	35	J3260		636
TOBRAMYCIN POWDER	564.9	J3260		636
AMPHOTERICIN B 50 MG INJ	186.5	J0285		636
FLUCONAZOLE 200MG TAB	74.49			250
DIFLUCAN 100MG	45.52			250
NYSTATIN SUSP 100000U/ML	5.3			637
NYSTATIN SUSP 100000 U/ML 5ML	5.3			637
FLUCONAZOLE 200MG INJ	18.55	J1450		636
FLUCONAZOLE 200MG INJ	18.55	J1450		636
TEMOVATE OINT 30	698.73			250
AUGMENTIN 500TAB	5.3			250
AZTREONAM 500 MG INJ	142.33	J3490		636
CEPHALEXIN 250MG CAPSULE	5.3			250
CEPHALEXIN SUSP. 125MG/5ML UD	5.3			250

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CEPHALEXIN SUSP. 250MG/5ML UD	5.3			250
IMIPENEM-CILASTATIN INJ 250MG	18.55	J0743		636
CEFAZOLIN 500 MG INJ	18.55	J0690		636
CEFTRIAXONE 250MG INJ	18.55	J0696		636
CEFOTAXIME 1 GM INJ	18.55	J0698		636
CEFOXITIN 1GM INJ	18.55	J0694		636
CEFTRIAXONE 250 MG INJ	35	J0696		636
CEFOXITIN 2 GM INJ	117	J0694		636
MEFOXIN 100MG/ML	35	J0694		636
ERYTHROMYCIN SUSP 40MG/ML	117.38			250
CEFUROXIME 750 MG INJ	18.55	J0697		636
ERYTHROMYCIN SUSP. 80MG/ML	162.36			250
ERYTHROMYCIN 500MG INJ	157.01	J1364	TB	636
ERYTHROMYCIN OPH	45.22			250
AMOXICILLIN 250MG CAPSULE	5.3			250
AMOXICILIN 125MG/5ML UD	5.3			250
AMOXICILLIN 250MG/5ML UD	5.3			250
AMPICILLIN 100 MG/ML INJ	18.55	J0290		636
AMPICILLIN 500 MG INJ	35	J0290		636
AMPICILLIN 500MG	18.55	J0290		636
NAFCILLIN 1GM INJ	18.55			250
NAFCILLIN 2GM INJ	141.79			250
OXACILLIN 250MG INJ	18.55	J2700		250
PEN G BENZ 100,000UNIT LA INJ	297.39	J0561	TB	636
PEN G BENZATHINE 1200000 UNT	306.44	J0561	TB	636
PEN G BENZ 2.4MU SYRINGE LA	646.17	J0561	TB	636
PEN VK 250MG TABLET	5.3			250
CEFIXIME 100MG/5ML SUSPENSION	111.33			250
PEN VK SOLN 25MG/ML	5.3			250
PEN VK SOLN 50MG/ML	5.3			250
NYSTATIN POWDER	112.31			637
MITOXANTRONE 5MG INJ	978.38	J9293	TB	636
PENTAMIDINE INHALATION 300MG	538.73			250
SALINE NOSE DROPS	5.3			250
LANSOPRAZOLE 15MG	30.67			250
HYDROXYCHLOROQUINE 200MG TAB	5.3			250

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SULFASALAZINE 500 MG TABLET	5.3			250
SILVER NIT. APPL.	5.3			250
PROPOFOL 10MG/ML INJ (100ML)	153.38	J2704		636
PERCOCET TABLETS	5.3			250
FAMOTIDINE 20MG TAB	5.3			250
ELIMITE CREAM 5%	381.15			250
MIGRANAL NASAL	1,247.92			250
SUMATRIPTAN 6MG/0	261.8	J3030		636
MACRODANTIN 50MG	5.3			250
IBUPROFEN SUSP 5ML	4.37			250
NITROFURANTOIN SUSP 5MG/ML	82.57			637
CIPROFLOXACIN 500MG TAB	5.3			250
SULFAMETHOXAZOLE W/TRIM TABLET	5.3			250
CIPROFLOXACIN 250MG TAB	28.39			250
SULFAMETHOX W/TRIM DS TABLET	5.3			250
MESNA INJ 200 MG	18.55	J9209		636
SULFAMETHOX W/TRIM SUSP 20ML	5.3			250
SULFAMETHOX W/TRIM SUSP. ML	5.3			250
SULFAMETHOX W/TRIMOPR 10ML INJ	18.55	J3490		636
PENTAMIDINE 300MG INJ	538.72			250
ADENOSINE 1MG INJ DIAG (30ML)	615.05	J0153		250
BLEOMYCIN INJ 15 UNITS	187	J9040		636
CISPLATIN INJ 10 MG	12.5	J9060		636
CYCLOPHOSPHAMIDE 25MG TABLET	5.3	J8530		636
CYTARABINE INJ 100MG	16.2	J9100		636
DACTINOMYCIN INJ 0.5MG VIAL	3,645.18	J9120	TB	636
DAUNORUBICIN INJ 10 MG VIAL	147.68	J9150	TB	636
DOXORUBICIN 10MG INJ	33.8	J9000		636
ETOPOSIDE 10MG INJ	22.74	J9181		636
FLUOROURACIL INJ 500MG/10ML	7.5	J9190		636
HYDROXYUREA 500MG CAPSULE	5.3			250
MERCAPTOPYRINE 50 MG TABLET	5.3	J8999		250
METHOTREXATE 2.5MG TABLET	32.43	J8610		636
METHOTREXATE 5MG INJ	9.12	J9260		636
ETOPOSIDE CAP 50 MG	309.35	J8560	TB	636

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PROCARBAZINE 50MG CAPSULE	180.36	J3490		250
THIOGUANINE 40MG TABLET	124.06			250
VINBLASTINE INJ 1 MG	10.34	J9360		636
VINCRISTINE INJ 1 MG	30.88	J9370		636
LOMUSTINE 10MG CAPSULE	106.93	J3490		250
INTERFERON ALPHA 2B 1 MIL INJ	592.98	J9214	TB	636
PYRIDOSTIGMINE 60MG TABLET	5.3			250
ZOLOFT 50MG TAB	5.3			250
BENZTROPINE 1MG TABLET	5.3			250
METFORMIN 500 MG	5.3			250
PHENYEPHRINE 2.5%	166.18			250
ATROPINE INJ. 0.4MG/ML AMPULE	18.55	J0461		636
ATROPINE 0.5MG INJ SYRINGE	18.55	J0461		636
ATROPINE INJ. 1MG SYRINGE	18.55	J0461		636
DICYCLOMINE 10MG CAPSULE	5.3			250
GABAPENTIN 400	5.3			250
DICYCOLOMINE 20MG INJ	270.47	J0500		636
GLYCOPYRROLATE INJ 0.2MG/ML 1M	18.55	J3490		636
DOBUTAMINE 250MG/20ML INJ	18.55	J1250		636
DOPAMINE 40MG INJ 5ML	18.55	J1265		636
EPHEDRINE INJ 50MG/ML 1ML AMP	162.55			250
EPINEPHRINE VL 1:1000 1ML	18.55	J0171		636
EPINEPHRINE INJ 1MG/10ML SYR	18.55	J0171		636
NOREPINEPHRINE INJ 1MG/ML 4ML	18.55			250
PHENYLEPHRINE 10	18.55	J2370		636
PSEUDOEPHEDRINE 30MG TABLET	5.3			250
PSEUDOEPHEDRINE SYRUP 6MG/ML	5.3			250
MENACTRA VACC DOSE IM	728.28	90734		636
AUGMENTIN 875MG	5.3			250
TERBUTALINE 1MG INJ	116.95	J3105		636
ALBUTEROL INHALE*	186.63			250
PHENTOLAMINE 5MG INJ	1,020.00	J2760	TB	636
CISATRACURIUM 2MG/ML INJ 10ML	129.35			250
OXCARBAZEPINE	5.3			637

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ALTEPLASE VL 100MG PER 1MG INJ	19,908.44	J2997	TB	636
FOSPHENYTOIN 50MG/ML INJ (10ML)	238.84	Q2009	TB	636
DEPOPROVERA 150MG INJ	166.32	J1050		636
CYCLOBENZAPRINE 10MG TABLET	5.3			250
SUCCINYLBCHOLINE 20MG/ML (10ML)	119.68	J0330		636
VECURONIUM BROM INJ 10MG VIAL	18.55			250
BACLOFEN 10MG TABLET	5.3			250
DANTROLENE INJ 20MG/70ML VIAL	327.62			250
LABETALOL 100MG T	5.3			250
LOSARTAN 25MG TAB	5.3			250
ALBUMIN, NORMAL SERUM 5% 50ML	78.24	P9041	TB	636
ALBUMIN NORMAL SERUM 5% 250ML	340.12	P9045	TB	636
ALBUMIN, NORMAL SERUM 25% 50ML	215.14	P9047	TB	636
ALBUMIN NORMAL SERUM 25% 100ML	430.28	P9047	TB	636
ALBENDAZOLE 200MG	590.15			250
AQUAPHOR 4 OZ	41.55			250
FERROUS SULFATE 325 TABLET	5.3			250
IRON DEXTRAN INJ 50 MG/ML 2ML	37.7	J1750	TB	636
DIFLUCAN 150MG	72.85			250
OXYBUTYNIN 5MG TA	5.3			637
HEPARIN 1,000 UNITS INJ (10ML)	18.55			250
HEPARIN 1000 UNTS INJ (IV)	18.55	J1644		636
HEPARIN 1000 UNTS INJ (SQ)	18.55	J1644		250
HEP 10000 U/4ML	115.58	J1644		636
HEPARIN 1,000 UNITS INJ (1ML)	18.55	J1644		636
ENALAPRIL IV DIL	35			250
COUMADIN 1MG	5.3			250
FENTANYL 25MCG/HR PATCH	17.5			250
FENTANYL 50MCG/HR PATCH	107.39			250
RANITIDINE 2.5MG/ML DILUTION	35	J2780		636
FENTANYL 75MCG/HR PATCH	163.81			250
PROTAMINE SULF INJ 50MG AMPULE	18.55	J2720		636

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ZOSYN 1.125GM INJ	121.6	J2543		636
DIGOXIN 0.125 MG TABLET	5.3			250
PENICILLIN G NA D	35			250
CALCIUM +D	5.3			250
LIDOCAINE URO-JET	40			250
LOPERAMIDE 1 MG/ML SOLN	5.3			250
LIDOCAINE INJ 1% 50MG/5ML SYR	18.55			250
LIDO 100MG/5ML	18.55			250
GELFOAM SPONGE-50	107.65			250
AMIODARONE 30MG INJ (150MG/3ML)	18.55	J0282		636
DEPAKOTE SPRINKL	5.3			250
VERAPAMIL INJ 2.5MG/ML 2ML	136.17			250
NEOSYNEPHRINE 1/8	5.3			637
LISINOPRIL 5 MG	5.3			250
CAPTOPRIL 25MG TABLET	5.3			250
CLONIDINE 0.1 MG TABLET	5.3			250
LISINOPRIL 10 MG	5.3			250
CLONIDINE 0.2 MG TABLET	5.3			250
SINGULAIR 10 MG	29.42			250
MESALAMINE PR	126.29			250
HYDRALAZINE 10MG TABLET	5.3			250
FLONASE	262.6			250
HYDRALAZINE 25MG TABLET	5.3			250
HYDRALAZINE INJ 20MG/ML 1ML	18.55	J0360		636
HYDRALAZINE DIL	35	J0360		636
LEVETIRACETAM 250 MG TAB	5.3			250
METOPROLOL 50MG TABLET	5.3			250
ERGOCALCIFEROL DROPS 1ML	5.3			250
NITROPRUSSIDE INJ 50MG VIAL	1,800.00			250
PRAZOSIN 1MG CAPSULE	5.3			250
FLUCONAZOLE 40 MG/ML SUSP	46.63			250
PRAZOSIN 5MG CAPSULE	5.3			250
PROPRANOLOL 10MG TABLET	5.3			250
ESMOLOL 100MG INJ	18.55	J3490		636
PROPRANOLOL 40MG TABLET	5.3			250
LABETALOL INJ 5MG/ML 20ML AMP	18.55	J3490		636
TACROLIMUS 5MG/5ML SUSP	46.8			250
EFFEXOR XR 75	5.3			250

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CEFEPIME 500MG INJ	18.55	J0692		636
REMICADE 10MG INJ	259.04	J1745	TB	636
CILOSTAZOL 100 MG TAB	5.3			250
TOBRADEX OPH OINT	638.23			250
CYCLOMYDRIL 1% OPHTH SOLN	128.84			250
MECLIZINE 25 MG TAB	5.3	J8597		636
CYCLOMYDRIL	170.39			250
SODIUM TETRAD INJ 3% 2ML AMP	288.76			250
LIDOCAINE 1GM/D5W PER 10MG	122.27	J2001		250
CEFEPIME 500MG INJ	18.55	J0692		636
DRONABINOL 2.5MG	27.58			250
ASPIRIN EC 325MG TAB	5.3			250
ASPIRIN 81 MG TAB CHEWABLE	5.3			250
ASPIRIN 300MG SUPPOSITORY	7.58			250
HEPARIN 1,000 UNITS INJ PREMIX	123.06	J1644		250
IBUPROFEN 400 MG TABLET	5.3			250
IBUPROFEN 800 MG TABLET	5.3			250
INDOMETHACIN INJ 1MG/ML VIAL	1,269.46			250
MAGNESIUM OXIDE 2	5.3			250
NAPROXEN 275MG TABLET	5.3			637
NAPROXEN 500MG TABLET	5.3			637
AUGMENTIN SUS	5.3			250
ZOFRAN 1MG INJ	18.55	J2405		636
AZITHROMYCIN 250M	40.48			250
FELBAMATE 600MG T	33.22			250
REG INSULIN DILUT	35	J1815		250
ACETAMINOPHEN / CODEINE ELIXIR	5.3			250
APAP/CODEINE 30 MG TAB	5.3			250
ACYCLOVIR 200MG/5ML SUSP	5.3			250
CODEINE 30MG TABL	17.5			250
FENTANYL 100MCG/2ML INJ	17.5	J3010		636
FENTANYL 100MCG INJ (5ML)	18.55	J3010		636
HYDROMORPHONE 2MG	17.5			250
MEPERIDINE 25MG/M	17.5	J2175		636
MEPERIDINE 50MG I	17.5	J2175		636
METHADONE 10MG TA	5.3			250
METHADONE 10MG/ML	121.36	J1230		636
MORPHINE 4 MG/ML INJ	17.5	J2270		636

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MORPHINE 10MG/ML	17.5	J2270		636
MORPHINE PF 10MG/	17.5	J2275		250
SARGRAMOSTIM 50MCG INJ	684.82	J2820	TB	636
ACETAMINOPHEN 160MG/5ML UD	6.64			250
ACETAMINOPHEN ELIXIR 650MG	14.82			250
ACETAMINOPHEN 120MG SUPPOSIT.	3.16			250
ACETAMINOPHEN 650MG SUPP	3.46			250
ACETAMINOPHEN 325MG TABLET	0.5	A9270		250
TYLENOL CHEW 80MG	5.3			250
PROLEUKIN 22 MMU VIAL	8,147.28	J9015		636
NALOXONE 1MG INJ	161.96	J2310		636
MIOCHOL 1% OPTH DROPS 2ML	304.15			250
DORNASE ALFA INH	376.9	J7639		250
GELFILM ENVEL. 1	2,775.30			250
ZONISAMIDE 100MG	5.3			250
HAEMOPHILUS B CONJ VACCINE	140.84			250
CARBAMAZEPINE 100MG TABLET	5.3			250
TEGRETOL SUSP	5.3			250
CARBAMAZEPINE 200MG TABLET	5.3			250
CLONAZEPAM 0.5MG	5.3			250
CLONAZEPAM 1MG TA	5.3			250
DEPAKOTE 125MG	5.3			250
DIVALPROEX SODIUM 250MG TABLET	5.3			250
ZYRTEC SYRUP	5.3			250
ETHOSUXIMIDE SYRUP 50MG/ML	5.3			250
ETHOTOIN 250MG TABLET	5.3			250
PHENYTOIN 30MG CAPSULE	5.3			250
PHENYTOIN 50MG TABLET	5.3			250
PHENYTOIN 100MG CAPSULE	5.3			250
PHENYTOIN PER 50MG	5.3			250
PHENYTOIN SUSPENSION 25MG/ML	5.3			250
GELFOAM COMP S100	160.61			250
TIMOL/DORZO (COSOPT) OPTH SOLN	207.87			250
VALPROIC ACID 250MG CAPSULE	5.3			250
VALPROIC ACID 250MG/5ML 5ML UD	5.3			250
VALPROIC ACID SYRUP 50MG/ML	5.3			250

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AMITRIPTYLINE 10MG TABLET	5.3			250
PROZAC 20MG CAP	5.3			250
AMITRIPTYLINE 25MG TABLET	5.3			250
CEFTRIAXONE (IM)	35	J0696		636
REG INS 0.1 U/ML	35	J1815		250
ETHANOLAMINE INJ 100 MG/2 ML	1,026.03	J1430		250
EMLA TOPICAL	41.81			250
ACYCLOVIR DILUTION 5 MG/ML INJ	35	J0133		636
LOVENOX 10MG INJ	99.22	J1650		636
ONDANSETRON 4 MG TABLET	124.51			637
TRAZODONE 50MG TABLET	5.3			250
CLARITIN 10 MG	5.3			250
ENOXAPARIN 10MG INJ	93.6	J1650		636
CHLORPROMAZINE 50MG/2ML INJ	125.83	J3230		636
HALOPERIDOL 0.5MG TABLET	5.3			250
ASPIRIN EC 81MG TAB	5.3			250
HALOPERIDOL CONC 2MG/ML 5ML	5.3			250
HALOPERIDOL 5MG/ML INJ	18.55	J1630		636
HYDROXYZINE 10MG TABLET	5.3			250
HYDROXYZINE 25 MG TABLET	5.3			250
CEFUROXIME 90MG/M	35	J0697		636
HYDROXYZINE SYRUP 2MG/ML	5.3			250
RHO (D) IMM GLOB INJ 100 UNT	2,246.82	J2792	TB	250
ABELCET 10MG INJ	645.6	J0287	TB	636
MEGESTROL 200 MG	5.3			250
CALCIUM GLUBIONAT	5.3			250
FLUOXETINE 10MG CAP	5.3			250
MINERAL OIL LIGHT 10 ML	86.86			250
METHYLPHENIDATE 5	17.5			250
METHYLPHENIDATE 10MG TABLET	17.5			250
PREDNISOLONE 3MG/ML SUSP	5.3			250
ALPRAZOLAM 0.25MG	5.3			250
CUROSURF 3ML	1,834.56			250
DIAZEPAM 2MG TABL	5.3			250
LOVENOX 10MG INJ	18.55	J1650		636
DIAZEPAM 5MG TABL	5.3			250
LORAZEPAM 0.5MG TAB	5.3			250

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
AZITHROMYCIN 1 GM PWDR	119.14	Q0144		250
LORAZEPAM 2 MG TA	5.3			250
GUAIFENESIN 10ML	5.3			250
GUAIFENESIN DM 10ML	5.3			250
FENTANYL 100MCG INJ (50ML)	111.13	J3010		636
GELFOAM SPONGE-SI	160.9			250
FLOMAX 0.4 MG	5.3			250
ETOMIDATE INJ 2MG/ML 20ML SYR	139.49			250
BOTULINUM TOXIN TYPE A INJ	1,312.50	J0585	TB	636
MESALAMINE 250MG	5.3			250
SOMATROPIN INJ 1 MG	1,350.48	J2941	TB	250
MILRINONE 5MG/5ML INJ	18.55	J2260		636
HYDRALAZINE DIL	35	J0360		636
AMLODIPINE 5 MG T	5.3			250
NICARDIPINE HCL 2	125.68			250
AMLODIPINE 2.5MG	5.3			250
LORAZEPAM 2MG/ML VIAL	18.55	J2060		636
COSYNTROPIN 0.25 MG INJ	410.35	J0834		636
CILOXAN OPH 5ML	193.5			250
ZYRTEC 5MG TAB	5.3			250
PREDNISON 5MG/5ML	5.3	J7512		636
LIDO W/EPI 2%	98.07			250
FLOVENT 44 MCG	607.45			250
TUBERCULIN SKIN TEST 0.1ML PPD	35	86580		302
CISATRACURIUM 2MG/ML INJ 5ML	93.73			250
ZOSYN 1.125GM INJ	18.55	J2543		636
NA BICARB 4.2%	18.55			250
SODIUM BICARB INJ 8.4% 10ML	18.55			250
SODIUM BICARB INJ 8.4% 50ML	18.55			250
SODIUM CITRATE W/CITRIC 15ML	5.3			250
SODIUM CITRATE W/CITRIC 30ML	5.3			250
LACTULOSE SYRUP 30 ML UD	5.3			250
CALCIUM CARBONATE 500MG TABLET	5.3			250
CALCIUM CHLORIDE INJ 1GM/10ML	18.55			250
CALCIUM GLUCONATE 1 GM / 10 ML	18.55	J0610		636
MAGNESIUM SO4 500MG INJ	18.55	J3475		636

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NEUTRA-PHOS PACKET	5.3			637
POTASSIUM PHOS INJ 3MM/ML 15ML	148.61			250
SODIUM PHOS ENEMA 60ML	5.3			250
SODIUM PHOS ENEMA 120ML	5.3			250
SELENIUM INJ 40MCG/ML 10ML	115.24			250
POTASSIUM CHLORIDE 20MEQ PWDR	55.85			250
POTASSIUM CHLORIDE INJ 20MEQ	18.55	J3480		636
POTASSIUM CHLORIDE INJ 40MEQ	18.55	J3480		636
SODIUM ACET INJ 2MEQ/ML 20ML	18.55			250
SODIUM CHLORIDE 0.9% 10ML PF	18.55			250
SODIUM CHLORIDE 4MEQ/ML 30ML	18.55	J7131		636
POTASSIUM ACET INJ 2MEQ/ML 20M	18.55			250
SODIUM POLYSTYRENE 15GM/60ML	58.5			250
SODIUM POLYSTYRENE ENEMA 120ML	174.64			250
DEXTROSE INJ 50% 50 ML SYRINGE	18.55			250
MEDIUM CHAIN TRIG OIL 1ML	66.98			250
KCL 20MEQ BOLUS	18.55	J3480		636
CYCLOPORINE 25MG CAP	5.3	J7515		636
GUIAFENESIN 100MG	0.5			250
ZOSYN 1.125GM INJ	35	J2543		636
DIASTAT 2.5MG GEL	727.17			250
CHLOROTHIAZIDE 50MG/ML SUSP.	5.3			250
FUROSEMIDE 20MG TABLET	5.3			250
FUROSEMIDE 40MG TABLET	5.3			250
FUROSEMIDE LIQUID 10MG/ML	5.3			250
FUROSEMIDE 20MG I	18.55	J1940		636
FUROSEMIDE 20MG I	18.55	J1940		636
FUROSEMIDE 20MG I	18.55	J1940		636
MANNITOL INJ 25% 50ML VIAL	18.55	J2150		636
FENTANYL 100MCG INJ (10ML)	18.55	J3010		636
HEPARIN FLUSH-PAC	18.55	J1644		636
FOSPHENYTOIN 50MG/ML INJ (2ML)	72.21	J1165	TB	636

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SPIRONOLACTONE 25MG TABLET	5.3			250
ENALAPRIL 10MG	5.3			250
ENALAPRIL 5MG TAB	5.3			250
ENALAPRILAT 1.25MG/ML INJ 1ML	35			250
KETOROLAC 15MG IN	18.55	J1885		636
GUIAFEN W/DM 100MG/5ML 5ML UD	5.3			250
PROMETHAZINE W/CO	5.3			250
CYTOTEC 100 MCG	5.3			250
SINGULAIR 5MG	29.41			250
GUIAFENESIN 100MG/5ML 5ML UD	5.3			250
DEPACON INJ	18.55			250
BACITRACIN OPHT OINT 3.5GM	347.42			250
GENTAMICIN OPHT OINT 3.5GM	102.28			250
GENTAMICINE OPHT SOL 0.5% 5ML	112.84			250
NEOMYCIN BACIT POLYB OPTH OINT	175.41			250
NEOMYCIN DEXAM POLYB OPTH OINT	179.96			250
NEOMYCIN DEXAM POLYB OPTH SUSP	103.27			250
NEOMYCIN GRAM POLYB OPTH SOLN	175.04			250
NEOMYCIN HC POLYB OTIC SOLN 10	125.97			637
NEOMYCIN HC POLYB OTIC SUSP 10	125.97			637
SYNTHROID 0.112MG	5.3			250
NEMBUTAL 20ML INJ	2,752.98	J2515	TB	636
IMODIUM AD 2 MG	5.3			250
CARBAMIDE PEROXIDE OTIC 15ML	5.3			250
LEVOCARNITINE 200MG INJ	162.55			250
TOBREX OPH SOLN	139.06			250
POLIO VACCINE INACTIVATED	164.48	90713		636
TOBREX OPH OINT	652.8			250
OXYCONTIN 10MG	17.5			250
PLAVIX 75 MG	5.3			250
SYNTHROID 0.088MG	5.3			250
ENOXAPARIN 10 MG INJ	18.55	J1650		636

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ULTRAM 50 MG	5.3			250
DEXAMETH OPHT SUSP 0.1% 5ML	247.96			250
PREDNISOLONE ACE OPH SOL 1% 5M	162.62			250
HEPAT B VACC PED/ADOL 3DOSE IM	117.83	90744		636
DIPHT/TETA PEDI	271.03	90702		636
DOMEBORO SOLN	5.3			250
VIRAMUNE 200MG	83.86			250
TOPAMAX 100MG TAB	32.24			250
LEVAQUIN 250MG	85.76			250
TOPAMAX 25MG TAB	5.3			250
RISPERDAL 2MG TAB	39.55			250
REMERON 15 MG	5.3			250
ACETAZOLAMIDE 250MG TABLET	5.3			250
SYNTHROID 0.075MG	5.3			250
ACETAZOLAMIDE 500MG INJECTION	159.39	J1120		636
MULTIVIT/IRON 1ML	5.3			637
LIDOCAINE VISC 2% 20 ML UD	5.3			250
LIDOCAINE TOPICAL 4% 50 ML	196.32			250
TETRACAINE 0.5% O	50.16			250
TETRACAINE OPHT SOLN 0.5% 15ML	54.81			250
ROCURONIUM 10MG/ML 10ML VIAL	154.44			250
FENTANYL 100MCG/HR PATCH	164.35			250
MESTINON 180MG	113.91			250
LUPRON-DEPOT 7.5	2,567.70	J9217	TB	250
ATROPINE OPHT SOL 1% 2ML	172.6			250
CYCLOPENTOLATE OPHT 1% 2ML	84.92			250
NEOSYNEPHRINE 1/2	5.3			637
TROPICAMIDE 1% OPHT SOLN 15ML	55.38			259
GABAPENTIN 300MG	5.3			250
DIAZEPAM 5MG/1ML INJ (2ML)	18.55	J3360		636
GABAPENTIN 100MG	5.3			250
HYDROCORTISONE 10	5.3			250
PHENOL-BORATE SPRAY 85ML	15.49			250
AUGMENTIN SUS	5.3			250

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
OXYMETAZOLINE 0.05% NASAL 15ML	5.3			250
OLOPATADINE OPHT	157.19			637
VFEND 50MG TAB	65.32			250
FLUORESCEIN OPHT STRIP 0.6 MG	5.3			250
FLUORESCEIN W/BENOX OPHT 5ML	158.41			250
HYDROXY METHY OPHT 0.5% 15ML	113.01			250
PETROLATUM MIN OIL/LAN OPH OIN	5.3			250
SALT SOLN BALEN OPTH 15ML BSS	45.12			250
TIMOLOL OPHT SOLN 0.25% 5ML	5.3			250
TIMOLOL OPHT SOLN 0,5% 5ML	88.4			250
LINEZOLID 200MG INJ	481.1	J2020		636
ALUMINUM HYDROXIDE 30ML UD	5.3			250
ALUM/MAG HYDROX/W SIMETH 30ML	5.3			250
CHARCOAL ACT WATER 50GM	122.98			250
DAPSONE 100 MG	5.3			250
ADVAIR 250/50 INH	495.74			250
ENOXAPARIN 10 MG	18.55	J1650		636
METFORMIN XR 500	5.3			250
TOPROL XL 25MG	5.3			250
LOMOTIL TABLET	5.3			250
CASPOFUNGIN 5MG INJ	1,135.56	J0637	TB	250
LACTOBACILLUS ACIDOP 1 GM PKT	5.3			250
VFEND 200MG TAB	154.75			250
OXALIPLATIN 0.5MG INJ	20.36	J9263		250
HEPARIN 1000U/ML	18.55	J1644		636
VFEND 200MG INJ	551.41	J3465	TB	636
ALTEPLASE 1MG	493.27	J2997	TB	636
SIMETHICONE DPS 40MG/0.6ML 30M	5.3			250
SILVER SULFADIAZ	78.62			250
ADVAIR INHALER	495.74			250
FERROUS ELIXR 5ML	5.3			250
DEPAKOTE 500ER	5.3			250
BISACODYL 5MG TAB	5.3			250
BISADOCYL 10MG SU	5.3			250

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OFLOXACIN OTIC DROPS 0.3%	475.18			637
DOCUSATE NA 100 M	5.3			250
DOCUSATE SOD 100MG/10ML UD	5.3			250
ELECTROLYTE BOWEL PREP 4 LITER	127.71			250
GLYCERIN SUPPOSITORY PEDI	5.3			250
GLYCERIN SUPPOSITORY ADULT	5.3			250
MAGNESIUM CITRATE SOL 296ML	5.3			250
MILK OF MAGNESIA	5.3			250
MINERAL OIL ENEMA 133ML	5.3			250
ERTAPENEM 1GM INJ	432.68	J1335		636
METAMUCIL 3.4 GM	0.5			250
L.E.T. SOLUTION 5ML	5.3			250
CEFTRIAZONE 250MG INJ	18.55	J0696		636
FOSPHENYTOIN DIL	35	Q2009	TB	636
CROFAB	3,492.29	J0840	TB	636
PROCHLORPERAZINE 5MG TABLET	5.3			250
PROCHLORPERAZINE 10MG/2ML INJ	115.44	J0780		636
FAMOTIDINE 10 MG INJ	18.55	J3490		636
METOCLOPRAMIDE 10MG TABLET	5.3			250
METOCLOPRAMIDE 10MG/ML SYRUP	5.3			250
METOCLOPRAMIDE 10MG/2ML INJ	18.55	J2765		636
CYTOTEC 200 MCG	5.3			250
RANITIDINE 150MG TABLET	5.3			250
RANITIDINE 25 MG/ML INJ	18.55	J2780		636
OMEPRAZOLE 20 MG	5.3			637
SUCRALFATE 1GM TABLET	5.3			250
PANTOPRAZOLE 40MG INJ	18.55	C9113		636
ESMOLOL 2.5GM RTU	1,009.08	J3490		636
LUMINAL 130MG/ML	170.9	J2560		636
ADENOSINE THERAP 6MG/2ML INJ	18.55	J0153		636
PROMETHAZINE 12.5MG TAB	5.3			250
ANUSOL-HC SUPP	91.81			250
MEGESTROL 40 MG T	5.3			250
H.C.CREME 2.5 %	265.66			250
BORTEZOMIB 0.1MG	123.51	J9041	TB	636

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DEFEROXAMINE 500MG INJ	18.55	J0895		636
DEXAMETHASONE 0.5MG TABLET	5.3	J8540		636
DEXAMETHASONE 4MG TABLET	5.3	J8540		636
DEXAMETH ELIX 0.5MG/5ML UD	5.3	J8540		636
METOPROLOL 12.5MG TAB	5.3			250
DEXAMETH ELIXIR 1MG/ML	27.88	J8540		636
DEXAMETHASONE SOD PHOS 1MG INJ	18.55	J1100		636
DEXAMETH INJ 4MG/ML 5ML VIAL	18.55	J1100		636
FLUDROCORTISONE ACE 0.1MG TAB	5.3			250
METHYLPREDNIS 1GM	181.26	J2930		636
HYDROCORT DIL	35	J1720		636
PREDNISONE 1MG TABLET	5.3	J7512		636
PREDNISONE 5MG TABLET	5.3	J7512		636
PREDNISONE 10MG TABLET	5.3	J7512		636
PREDNISONE 20MG TABLET	5.3	J7512		636
PREDNISONE 50MG TABLET	5.3	J7512		636
KENALOG INJ 40MG	18.55	J3301		636
ZOSTRIX-HP TOP CREAM	110.23			250
METOPROLOL 25MG TAB	5.3			250
HEPARIN NA LF 100U/ML 1ML INJ	18.55	J1642		636
SYSTANE EYE DRP 15ML	54.29			250
LINEZOLID 600MG TAB	719.58			250
LISINOPRIL 2.5MG TAB	5.3			250
LIDOCAINE 2% INJ 20ML	18.55			250
OSELTAMIVIR 75MG CAP	89.41			637
MIDAZOLAM 10MG/5ML ORAL SYRUP	38.13			250
ESTROGENS CONJ INJ 25MG VIAL	691.58	J1410	TB	636
OXYIR 5 MG	5.3			250
FLOVENT 110 MCG	710.26			250
ROMAZICON 5ML	18.55	J3490		636
MERREM 500MG INJ	18.55	J2185		636
GLUCAGON INJ 1MG VIAL	411.84	J1610	TB	636
NACL 1 ML ORAL	5.3			637
VASOPRESSIN INJ 20U/ML 1ML	511.83	J3490		636
DESMOPRESSIN NASAL 0.01% 2.5ML	579.56			250
TOPAMAX 15 MG CAP	28.03			250

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LEVOTHYROXINE 0.05MG TABLET	5.3			250
LEVOTHYROXINE 0.1 MG TABLET	5.3			250
LEVOTHYROXINE 0.15 MG TABLET	5.3			250
LEVOTHYROXINE 0.2 MG TABLET	5.3			250
IODINE SOLUTION	192.5			250
METHIMAZOLE 5MG TABLET	5.3			250
WARFARIN SODIUM 4MG	5.3			250
NA BICARB VIAL	124.18			250
BUPIVACAINE 0.25% PF 30ML	18.55	J3490		636
BUPIVACAINE 0.5% PF 30ML	18.55	J3490		636
LIDOCAINE 0.5% INJ 50 ML	18.55			250
LIDOCAINE 0.5% INJ W/EPI 50ML	18.55			250
LIDOCAINE 1% INJ 50ML	18.55			250
LIDO 1% W/EPI	18.55			250
LIDOCAINE 2% INJ 50 ML	18.55			250
LIDOCAINE 2% INJ W/EPI 50ML	18.55			250
LIDOCAINE 2% INJ 10ML	18.55			250
AMLODIPINE 10MG TAB	5.3			250
OXYCONTIN 20MG	17.5			250
CEFEPIME 500MG INJ	35	J0692		636
CARNITOR SOLN	5.3			250
TROPHAMINE 6%	18.55			258
HEPATITIS B IMM GLOB 1ML	504.76	90371	TB	636
RABIES IMM GLOB 150 UNITS/1ML	448.13	90375	TB	636
GAMMAGARD LIQUID 500MG INJ	1,298.28	J1569	TB	636
LABETALOL 20MG/4ML INJ	18.55	J3490		636
DIPHTHERIA/TETAN TOX ADULT 0.5M	117.43	90714		636
TETANUS TOXOID INJ 0.5 ML SYR	214.44	90703		636
TRANXENE 3.75 MG	5.3			250
TOPOTECAN 0.1 MG INJ	716.5	J9351		636
MEASLES MUMPS RUBELLA VACC 1DS	262.12	90707		636
PNEUMO 23-VALENT POLY 0.5ML	349.32	90732		636
RABIES VACC HUM DIP CELL HDCV	672.58	90675	TB	636
MUPIROCIN CRM	452.98			637
BACITRACIN OINTMENT 30GM	37.23			250
GENTAMICIN 0.1% CREAM 15GM	201.96			250

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GENTAMICIN 0.1% OINT 15GM	201.96			250
NEOMYCIN BACIT POLYB OINT 15GM	27.98			637
NEOSPORIN UD ONT	5.3			637
VERSED INJ 10 ML	18.55	J2250		636
VINOELBINE 10MG INJ	60	J9390		636
NEPHRO-VITE	5.3			637
HEPARIN NA LF 100U/ML 30ML INJ	18.55	J1642		636
VARIVAX VACCINE	442.51	90716		636
PANTROPRAZOLE 40 MG TAB	5.3			250
PREDNISONE 5MG/ML	5.3	J7512		636
ULTIVA 5 MG INJ	772.41			250
CLOTRIMAZOLE 1% CREAM 30 GM	44.67			250
CLOTRIMAZOLE 1% VAG CRM 45 GM	41.6			250
NYSTATIN CREAM 15GM	91			637
NYSTATIN OINTMENT 15GM	91			637
NYSTATIN TRIA/NEO/GRAM CR 15GM	611.44			637
NYSTATIN TRIA/NEO/GRAM OIN 15G	344.78			637
ERYTHROMYCIN DIL	35	J1364	TB	636
CISATRACURIUM 10MG/ML INJ 20ML	873.17			250
MORPHINE 2 MG/ML INJ	17.5	J2270		636
DESONIDE CREAM 0.05% 15GM	247.29			250
HYDROCORTISONE 0.5% CRM 30GM	28.6			250
HYDROCORTISONE 1% CRM 30GM	5.3			250
HYDROCORTISONE VAL 0.2% CRM 15	275.78			250
TRIAMCINOL ACE 0.025% CRM 15GM	5.3			250
TRIAMCINOL ACE 0.1% CRM 15GM	5.3			250
TRIAMCINOL ACE 0.1% OINT 15GM	29.02			250
TRIAMCINOL ACE 0.1% OINT 80GM	72.49			250
TEGRETOL-XR 400MG	36.22			250
IMITREX 25 MG	110.64			250

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TROPHAMINE 10%	116.4			258
BENZOCAINE/BUTYL/TETR SPRAY	222.99			250
LIDOCAINE 2% JELL	40.56			250
PHENAZOPYRIDINE 100MG TABLET	5.3			250
BENZOCAINE SPRAY 20% 3OZ	23.56			250
CAFFEINE 200MG	5.3			250
CAL GLUC DIL	35	J0610		636
CALAMINE LOTION 120ML	5.3			250
VITAMIN A & D OINTMENT 60GM	5.3			250
ADEKS DROPS 1 ML	5.3			250
EUCERIN CREAM 4 O	5.3			250
ZYPREXA 10MG	105.66			250
ZINC SULF 220 MG	5.3			250
ULTIVA 1 MG INJ	207.83			250
ZINC OXIDE TOP OINT 20% 30GM	5.3			250
LAMICTAL 25 MG	5.3			250
CLONIDINE PATCH	174.41			250
LAMICTAL 100 MG	5.3			250
LORAZEPAM 2MG INJ	18.55	J2060		636
ESOMEPRAZOLE 20MG	47.45			250
MIDAMOR 5 MG	5.3			250
MOTRIN 600MG TAB	5.3			637
ZOLPIDEM 5 MG TAB	5.3			250
ADDERALL 10MG	17.5			250
ZYPREXA 2.5MG	58.09			259
ZYPREXA 5MG	56.63			250
ADRENALIN 30ML	442.41	J0171		636
CEFUROXIME 750MG INJ	18.55	J0697		636
DIASTAT 10MG RECT	907.62			250
BUDESONIDE INH 0.25MG/2ML	49.33			250
FOLIC ACID SOL'N	5.3	J3490		636
FOLIC ACID 1MG TABLET	5.3			250
FOLIC ACID INJ 5MG/ML 1ML	18.55	J3490		636
PYRIDOXINE INJ 100MG/ML 1ML AM	94.85	J3415		636
THIAMINE INJ 100MG/ML 1ML	18.55	J3411		636
ASCORBIC ACID 500MG TABLET	5.3			250
CALCITROL 0.25MCG CAPSULE	5.3			250
VITAMIN D 50,000 UNIT CAPSULE	5.3			250

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CETUXIMAB 10MG INJ	128.94	J9055	TB	250
LIDOCAINE PF 1% 30ML INJ	18.55			250
VITAMIN E SOLN 15U/0.3ML DOSE	5.3			250
PHYTONADIONE 5MG TABLET	197.43			250
PHYTONADIONE 1 MG INJ	112.32	J3430		636
PHYTONADIONE INJ 10MG/ML SYR	156.17	J3430		636
PREGABALIN 25MG CAP	36.03			250
SODIUM BICARBONATE 650MG TAB	5.3			250
CEFAZOLIN 500MG INJ	35	J0690		636
CEFAZOLIN 50MG INJ DILUTON	35	J0690		636
VITAMINS MULTIPLE TABLET	5.3			250
VITAMINS MULTIPLE LIQUID 5ML	5.3			250
MULTIVIT. 1ML	5.3			637
VITAMINS MULTIP INJ ADULT 10ML	18.55			250
VITAMINS MULT W/FLUOR DPS	5.3			250
VITAMINS MULT W/MIN TABLET	5.3			250
VITAMINS PRENATAL W/FA TABLET	5.3			250
CARBAMAZEPINE ER 200 MG CAP	5.3			250
ALLOPURINOL 100MG TABLET	5.3			250
ALLOPURINOL 300MG TABLET	5.3			250
ALPROSTADIL INJ. 500MCG/ML	400.45			250
AZATHIOPRINE 50MG TABLET	5.3	J7500		250
MORPHINE DILUTION 1MG/ML	17.5	J2270		636
CEFTAZIDIME 500MG INJ	35	J0713		636
METHYLENE BLUE INJ 1% 1ML	104.71	Q9968	TB	636
MICROFIB COLLAGEN HEMOSTAT 1GM	490.13			250
DUOVISC OPHT KIT	565.06			250
LEUCOVORIN 5MG TABLET	5.3			250
LEVCOVORIN INJ 50MG VIAL	24	J0640		636
TOBRADEX OPH SOLN	201			250
XOPENEX 0.63MG/3ML INH SOLN	34.89			250
OXCARBAZEPINE 600MG/10ML SUSP	43.01			637
AUGMENTIN ES 600MG/5ML SUSP	5.3			250
LIDOCAINE 2% W/EPI 1.7ML SYR	18.55			250

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DESMOPRESSIN 0.1 MG TAB	5.3			250
MACROBID 100MG	5.3			250
BUPIVACAINE PF 0.25% 10ML	18.55	J3490		636
VESANOID 10MG	152.77			250
ADDERALL XR 15MG TAB	44.45			250
MORPHINE 10MG LIQ	17.5			637
ANTIHEM FACTOR VIII(RECOM) 1IU	31.2	J7190	TB	636
SYNTHROID 0.025MG	5.3			250
KEPPRA SOLN 500MG/5ML	36.19			250
KETAMINE INJ 10MG/ML 20ML VIAL	107.24			250
KETAMINE INJ 100MG/ML 5ML VIAL	18.55			250
MIDAZOLAM 1MG INJ (2ML)	18.55	J2250		636
DOXYCYCLINE 50MG CAPSULE	5.3			250
SEVELAMER 400MG TAB	5.3			250
ESCITALOPRAM 10MG	5.3			250
DOXYCYCLINE INJ 100MG VIAL	118.58	J3490		636
ALDACTONE SUS 5ML	71.39			250
PRIMAXIN 5MG/ML DILUTION	35	J0743		636
LIDOCAINE 4% TOPICAL/TEGADERM	196.61			250
ZYVOX 100MG/5ML SUSP	167.3			250
BACITRACIN POWDER 50,000 UNITS	18.55			250
CLINDAMYCIN 150 MG CAPSULE	5.3			250
CLINDAMYCIN SUSP. 15MG/ML	35.49			250
CLINDAMYCIN 150MG/ML INJ (6ML)	18.55	J3490		636
VANCOMYCIN 500MG INJ	18.55	J3370		636
RIFAMPIN 300MG CAPSULE	5.3			250
ACYCLOVIR 5MG/ML INJ 10ML	18.55	J0133		636
ACYCLOVIR 200MG	5.3			250
ARIPIRAZOLE 10MG TAB	141.81			250
BEVACIZUMAB 10MG	158.55	J9035	TB	636
VIDAZA 25MG INJ	11.2	J9025	TB	250
CEFAZOLIN 500MG/D5W PB	18.55	J0690		636
CEFOXITIN 1GM/D5W PB	18.55	J0694		636
CEFOXITIN 2GM/D5W PB	122.2	J0694		636
ALBUTEROL INH SOL 2.5MG/0.5ML	5.3			250

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RACEPINEPHRINE INH 2.25% SOLN	5.3			250
ALBUTEROL INH SOL 2.5MG/3ML	5.3			250
IPRATROPIUM INM SOLN 0.02%	5.3			250
EPOETIN 1000 UNT(FOR NON-ESRD)	79.58	J0885	TB	636
PAPAVERINE 2ML	175.58	J2440		636
ILOTYCIN OPHTH	96.98			250
DEXTROSE 25% 10ML SYRINGE	18.55			250
HEPB/DTP/POL VACCINE	259.08			250
ACETADOTE INJ 100 MG/0.5ML (30	696	J0132		636
GELFILM OPHTH	550.04			250
FLUCONAZOLE 50 MG TAB	28.97			250
SUCROSE 24% ORAL SOLN	5.3			250
EPOETIN ESRD 1000UNT INJ	162.75	Q4081		250
EPOETIN ESRD 1000UNT INJ	791.51	Q4081		250
PHENOBARBITAL 20M	5.3			250
SERTRALINE 25MG TAB	5.3			250
EPOETIN ESRD 1000UNT INJ	183.84	Q4081		250
MOXIFLOXACIN 0.5% OPHTHAL SOLN	545.48			250
OMEPRAZOLE 10 MG	5.3			637
LEVETIRACETAM 750MG TAB	5.3			250
ABACAVIR 20MG/ML	5.3			259
EPOETIN NONESRD 1000UNT INJ	1,176.96	J0885	TB	636
EPOETIN NONESRD 1000UNT INJ	2,353.92	J0885	TB	636
EPOETIN ESRD 1000UNT INJ	245.12	Q4081		250
AMINOCAPROIC ACID 500MG TABLET	128.56			250
AMINOCAP. ACID 250MG/ML SYRUP	104.46			250
AMINOCAP ACID INJ. 20ML VIAL	18.55	J3490		636
ANTIHEMOPHIL FACTOR VIII 1UNIT	18.55	J7190	TB	636
CHOLESTYRAMINE PACKET 4 GRAMS	5.3			250
CELEXA 20MG	5.3			250
ZITHROMAX SUSP	60.46			250
THEOPHYLLINE 26.67MG/5ML ELIX	5.3			250
NA ACET 4MEQ/ML INJ	18.55			250

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CYCLOPHOPHOSPHLYOP 100MG INJ	175.8	J9070	TB	636
LEVOFLOXACIN 250MG INJ	18.55	J1956		636
NAROPIN 5MG/ML	138.5	J2795		636
NAROPIN 2 MG/ML	18.55	J2795		636
AMBISOME 10MG INJ	499.22	J0289	TB	636
NAROPIN 100ML INJ	1,763.21	J2795		636
LEUPROLIDE ACET 3.75MG INJ SUS	4,706.02	J1950	TB	250
SEROQUEL 25MG	5.3			250
SEROQUEL 100MG	5.3			250
CELECOXIB 100MG	5.3			250
FLOVENT 220 MCG	1,103.22			250
ZEMURON 5 ML VIAL	18.55			250
RITUXIMAB 100MG INJ	2,004.53	J9310	TB	636
LEUPROLIDE ACET 7.5MG INJ SUSP	5,183.20	J9217	TB	250
NALOXONE 0.4MG INJ	94.64	J2310		636
CYCLOSPORINE 100 MG CAP	28.66	J7502		636
FENTANYL DILUTION	18.55	J3010		636
CLONAZEPAM 0.1MG/	5.3			250
LEVOTHYROXINE SUSP. 10MCG/ML	5.3			250
METRONIDAZOLE SUSP. 20MG/ML	5.3			250
RIFAMPIN SUSPENSION 25MG/ML	5.3			250
SUCRALFATE SUSPENSION 200MG/ML	49.29			250
CAPTOPRIL 1MG/1ML	5.3			250
ZIPRASIDONE 20MG CAP	44.02			250
SIMETHICONE DROPS 80MG SYR	5.3			250
HEPARIN 1,000 UNITS INJ PREMIX	18.55	J1644		636
RISPERDAL 2MG DISINTER TAB	46.52			250
HEPATITIS B IMMUNE GLOBULIN 1M	175.04	90371	TB	636
ZOLEDRONIC ACID 1MG INJ	210	J3489		636
DAKINS 0.25%SOLN 16OZ	61.61			250
PALONOSETRON HCL 25 MCG INJ	720	J2469	TB	250
APREPITANT 125MG CAP (PER	856.46	J8501	TB	636
APREPITANT 80MG CAP (PER 5	548.11	J8501	TB	636
LEVETIRACETAM 10MG INJ	18.55	J1953		636

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DOBUTAMINE 250MG INJ	203.35	J1250		636
MIDAZOLAM 1MG/ML INJ (5ML)	18.55	J2250		636
FENTANYL 100MCG INJ (20ML)	18.55	J3010		636
MILRINONE 20MG/100ML PREMI	121.55	J2260		636
IMIPENEN-CILASTATIN INJ 250	166.91	J0743		636
DIPH/TETAN/ACELL PERTUSS 0.5 ML	159.09	90715		636
IDURSULFASE 1MG INJ	1,881.50	J1743	TB	636
PACLITAXEL PROTEIN-BOUND	29.65	J9264	TB	250
CLONIDINE 0.1MG PATCH	135.62			250
NAFCILLIN 25MG/ML DILUTION 10M	35			250
PEGFILGRASTIM 6MG/0.6ML INJ	14,256.00	J2505	TB	636
SODIUM CHLORIDE 1GM TAB	5.3			250
ARANESP 1MCG INJ (ESRD)	1,857.60	J0882	TB	636
URSODIOL 60MG/ML SUSP 1ML	5.3			250
ROTATEQ VACCINE 2ML ORAL	289.03	90680		636
PREDNISOLONE ODT 10MG TAB	75.87			250
ORAPRED ODT 15MG TAB	109.07			250
ORAPRED ODT 30MG TAB	127.87			250
VANCOMYCIN 500MG INJ	18.55	J3370		636
VANCOMYCIN 5MG/ML DILUTION	35	J3370		636
METOCLOPRAMIDE 5MG TABLET	5.3			250
AMINOPHYLLINE 2.5MG/ML DILUTIO	35	J0280		636
METHYLPREDNISOLONE 6.25 MG/ML D	35	J2930		636
CLINDAMYCIN 6MG/ML DILUTION	35	J3490		250
CEFOTAXIME 500MG INJ	35	J0698		636
ONDANSETRON ODT 4MG (DISINTEGR	120.19	Q0162		637
PAROXETINE 10MG TAB	5.3			250
ALTEPLASE VL 50MG PER 1MG INJ	9,600.41	J2997	TB	636
ENOXAPARIN 10 MG INJ	35	J1650		636
ACETMINOPHEN 80MG SUPP	5.3			250
ABATACEPT INJ 10MG	1,664.21	J0129		250
GENTEAL EYE GEL 3.5ML	5.3			250
HYDROMORPHONE 2MG/ML INJ 1ML	17.5	J1170		636
DILAUDID 50MG/5ML INJ	17.5	J1170		636
AMLODIPINE 5MG/5ML SUSP	42.72			250

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ATENOLOL 50MG/5ML SUSP	29.39			250
BACLOFEN 10MG/2ML SUSP	5.3			250
CLONIDINE 0.1MG/1ML SUSP	5.3			250
ZOSYN 1.125GM INJ	96.01	J2543		636
ENALAPRIL 5MG/5ML SUSP	5.3			250
RISPERIDONE 1MG TABLET	5.3			250
HYDRALAZINE 10MG/2ML SUSP	5.3			250
LISINOPRIL 5MG/5ML SUSP	5.3			250
CLONIDINE 0.05MG TAB	5.3			250
BACITRACIN OINTMENT 15GM	5.3			250
FAMOTIDINE 20 MG/10ML INJ DIL	35	J3490		636
PEMETREXED 10MG INJ	133.01	J9305	TB	250
DEXRAZOXANE 250 MG INJ	1,316.43	J1190	TB	636
PEGASPARGASE 750 IU/ML 5ML	33,601.66	J9266	TB	636
PANCREAZE MT4 CAPSULE	5.3			250
PANCREAZE MT10 CAPSULE	5.3			250
PANCREAZE MT16 CAPSULE	27.63			250
PANCREAZE MT20 CAPSULE	34.41			250
PHENOBARB DIL 6MG/ML INJ	18.55	J2560		636
PHENOBARBITAL 65 MG/ML INJ	115.89	J2560		636
LACTOBACILLU REUTERI DRPS 10ML	167.04			250
CIPROFLOXACIN 400MG/200ML D5W	18.55	J0744		636
LAMOTRIGINE 25 MG TAB	5.3			250
CAFFEINE CIT 10MG/05ML INJ	35	J0706		636
CAFFEINE CIT 20MG/ML ORAL SOL	41.6			250
METHADONE 1ML/ML ORAL SOLN 1ML	17.5			250
DOCETAXEL 1MG/ML INJ	44.48	J9171	TB	636
SCOPALAMINE 1.5MG PATCH	111.28			250
CEFUROXIME 250MG/5ML SUSP	68.07			250
TROPICAMIDE 1% OPHT SOLN 2ML	5.3			250
MOMETASONE 110MCG INHALER	510.6			637
IMMUNE GLOBULIN PRIVIGEN 500MG	1,332.00	J1459	TB	636
CLOFARABINE 1MG INJ	6,322.92	J9027	TB	636
CALCIUM CARBONATE 1250MG/5ML	5.3			250
HISTRELIN 50MG IMPLANT	61,148.58	J9226	TB	250

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FERROUS SULFATE 15MG/ML DROPS	5.3			250
POTASSIUM CL 10MEQ/7.5 ML ORAL	5.3			250
FAMOTIDINE 20MG/2.5ML SUSP	45.96			250
LEVOFLOXACIN 125MG/5ML SUSP	35.93			250
THIOGUANINE 20MG/ML SUSP	5.3			250
ACETAMINOPHEN 10MG INJ (100ML)	173.74	J0131		636
IMMUNE GLOBULIN 5% 500MG (FLE)	500.84	J1572	TB	636
AGALSIDASE BETA 1MG INJ	10,193.40	J0180	TB	636
NICARDIPINE 20MG/100ML INJ	351.12			250
FACTOR IX-ANTIHEMOPHILIC 1 UNT	18.55	J7195	TB	636
METOPROLOL 50MG/5ML SUSP	5.3			250
INDOMETHACIN 5MG/ML SUSP	5.3			250
OSELTAMIVIR 30MG/5ML SUSP	71.08			259
ACYCLOVIR 5% OINT 30GM	1,536.00			250
CEFAZOLIN 500MG/D5W RTU-2GM	35	J0690		636
TRIAMCINOLONE ACETONI 10MG INJ	18.55	J3301		250
DTAP (INFANRIX) 0.5ML	124.92	90700		636
DICYCLOMINE 10MG/5ML SOLN	5.3			250
BENZOCAINE TOP ORAL GEL 0.33 OZ	19.61			250
AMPICILLIN 250MG/5ML SUSP	5.3			250
CIPROFLOXACIN 100MG/1ML SUSP	5.3			250
LORATADINE 5MG/5ML SOLN	5.3			250
MAGNESIUM GLUC 54MG/5ML LIQ	5.3			250
ONDANSETRON 0.8MG/1ML SOLN	5.3			637
OXYCODONE 5MG/5ML SOLN	17.5			637
RISPERIDONE 1MG/1ML SOLN	29.06			250
ALCOHOL DEHYDRATED 98% 5ML	361.9			250
AMIODARONE 100MG TAB	38.63			250
ARIPIRAZOLE 5MG TAB	141.81			250
CYCLOBENZAPRINE 5MG TAB	5.3			250
CYPROHEPTADINE 2MG TAB	5.3			250
FLUDROCORTISONE 0.05MG TAB	5.3			250

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HYDROCHLOROTHIAZIDE 12.5MG TAB	5.3			250
HYDROCHLOROTHIAZIDE 6.25MG TAB	5.3			250
HYDROCORTISONE 5MG TAB	5.3			250
LEVOTHYROXINE 37.5MCG TAB	5.3			250
MERCAPTOPYRINE 25MG TAB	5.3			250
PREDNISONE 2.5MG TAB	5.3	J7512		636
TOPIRAMATE 12.5MG TAB	5.3			250
TRAMADOL 25MG TAB	5.3			250
AMOXICILLIN 400MG/5ML SUSP	5.3			250
BOTULISM IMMUNE GLOB 100MG INJ	90,000.00	90288		250
ROPIVACAINE 0.02% 600ML DOUBLE	375.75	J2795		636
MICAFUNGIN 1MG INJ	345.58	J2248		636
MICAFUNGIN 1MG INJ	603.64	J2248		636
BUPIVACAINE-EPI 0.5 PF 30ML	18.55			250
BUPIVACAINE 0.25% PF 20ML	32.01	J3490		636
OMEGA-3 ACID FA ESTERS 1GM	5.3			259
TEMOZOLOMIDE 10MG/ML SUSP . 5ML	116.75	J8700		636
APREPITANT 20MG/ML SUSP 0.25 ML	107.21	J8501	TB	636
TACROLIMUS 5MG INJ	609.62	J7525	TB	250
MANNITOL 20% 500ML	216.46			258
MAGNESIUM SULFATE 500MG INJ	18.55	J3475		636
HEPARIN NA LF 10U/ML 3ML INJ	18.55	J1642		636
HUMATE-P 1 VWF UNIT INJ	18.55	J7187	TB	636
CLOBAZAM 10 MG TAB	103.93			250
CLOBAZAM 5MG/2ML ORAL SUSP	91.01			250
RSV MAB IM 50 MG	2,711.48	90378	TB	636
RSV MAB IM 50 MG	2,560.98	90378	TB	636
CARVEDILOL 12.5MG TAB	5.3			250
ATENOLOL 25MG	5.3			250
FAMCICLOVIR 250MG TAB	67.17			250
METRONIDAZOLE 500MG/100ML RTU	18.55	J3490		636
SEVELAMER 0.8GM POWDER PKT	98.58			250
LEVONORGESTREL 1.5MG TAB	149.95			250
HYDROCODONE/APAP 5-325MG TAB	5.3			250

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HYDROCODONE/APAP 7.5-325MG TAB	5.3			250
HYDROCODONE/APAP 10-325MG TAB	5.3			250
METHADONE 10MG/ML SOLN 1ML	17.5			250
DIAZEPAM 5MG/5ML SOLN 5ML	5.3			250
ARIXTRA 0.5MG INJ	168.33	J1652		636
MIDODRINE 5MG TAB	5.3			250
TEMSIROLIMUS INJ 1MG	3,585.36	J9330	TB	636
DASATINIB 70MG TAB	721.1	C9399		636
FACTOR VIIA, RECOM INJ 1MCG	3,540.00	J7189	TB	636
ETOMIDATE 20MG/10ML INJ	18.55			250
PROPRANOLOL 20MG/5ML SUSP	5.3			250
WARFARIN 3MG TAB	5.3			250
BACLOFEN 10MG/5ML INJ (20ML)	1,548.00	J0475	TB	636
COLLAGENASE OINT 30GM	694.02			250
NON-FORMULARY MED	5.3			250
NON-FORMULARY IV SOLN	18.55			250
NON-FORMULARY ADDITIVE	18.55			250
DEXMEDETOMIDINE 200MCG/2ML INJ	112.32			250
LORAZEPAM 1MG/0.5ML SOLN	5.3			250
POVID-IODI 5% OP PREP SOLN 30M	73.85			250
METHYLENE BLUE INJ 1% 1ML	104.71			250
VERAPAMIL 40 MG TAB	5.3			250
MONTELUKAST 4MG CHEW TAB	29.42			637
ARIPIRAZOLE 2 MG TAB	130.88			250
BUDESONIDE-FORMOTEROL 80MCG IH	599.8			250
BUDESONIDE-FORMOTEROL 160MCG	602.61			250
CEFTRIAZONE 250MG INJ	281.54	J0696		636
POLYETHYLENE GLYCOL 3350 PWDR	5.3			250
MUPIROCIN TOPICAL 2% OINTMENT	183.44			637
CIPROFLOXACIN HC OTIC SUSP 10M	875.05			250
DULOXETINE 20 MG CAP	36.35			250
DULOXETINE 30 MG CAP	40.78			250
GLYCOPYRROLATE 1 MG TAB	5.3			250
IMATINIB 400 MG TAB	991.06			250

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
MEMANTINE 5 MG TAB	31.69			250
MIRTAZAPINE 15 MG ODT TAB	5.3			250
MYCOPHENOLATE 250 MG CAP	5.3	J7517		636
MYCOPHENOLATE 200 MG/ML SUSP 1	47.97	J7517		636
TACROLIMUS 0.5 MG CAP	5.3	J7507		250
TACROLIMUS 1 MG CAP	5.3	J7507		636
TIZANIDINE 2 MG TAB	5.3			250
VALACYCLOVIR 500 MG TAB	37.56			250
VALGANCICLOVIR 450 MG TAB	198.34			250
ZIPRASIDONE 60 MG CAP	121.61			250
ALLOPURINOL 500 MG INJ	7,020.00	J3490		636
CHLOROTHIAZIDE 500 MG/18 ML IJ	406.56	J1205		636
MEROPENEM 100MG INJ	18.55	J2185		636
AMPICILLIN 500MG INJ	18.55	J0290		636
CEFOTAXIME 2 GM INJ	18.55	J0698		636
CALCITRIOL 1 MCG/ML ORAL SOLN	62.23			250
FAMOTIDINE 10 MG TAB	5.3			250
LEUPROLIDE DEPOT 3.75MG/MO INJ	2,154.72	J1950	TB	259
QUETIAPINE 150 MG ER TAB	85.2			250
HYDROMORPHONE 1MG/ML INJ 1ML	17.5	J1170		636
BUPIVACAINE-EPI 0.25 PF INJ 30	18.55			250
GABAPENTIN 250 MG/5 ML SOLN	5.3			250
ACETAMINOPHEN 325 MG SUPP	3.42			250
LACOSAMIDE 1 MG INJ	18.55	C9254		636
LACOSAMIDE 150 MG TAB	83.15			250
LACOSAMIDE 50 MG TAB	41.89			250
CYCLOSPORINE OPH 0.05% 0.4 ML	43.98			250
FELBAMATE 600 MG/5 ML SUSP	75.16			250
NAPROXEN 125 MG/5 ML SUSP	5.3			637
IRON SUCROSE 1MG INJ	211.75	J1756		636
DESMOPRESSIN 0.01% NASAL 5ML	635.92			250
CEFTRIAXONE 250MG/D5W PB	242.09	J0696		636
CEFTRIAXONE 250MG/D5W PB	118.61	J0696		636
RABIES 150 UNT/ML 10ML INJ	409.08	90375	TB	636
DIAZOXIDE 250/5 ML SUSP	191.63			250

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THROMBIN TP RECOM 20000IUKIT	1,110.43			250
THROMBIN TP RECOM 20000IUSPY	1,126.57			250
GENTAMICIN 80MG/100ML IVPB	18.55	J1580		636
ULORIC 40MG TAB	53.92			250
POTASSIUM CHLORIDE 10 MEQ/TAB	5.3			250
TOBRAMYCIN 300MG INH UD	440.03			250
PROPOFOL 10MG/ML INJ (50ML)	97.5	J2704		636
PNEUMO 13-VALENT VACC 0.5ML	1,086.90	90670		636
EPHEDRINE 50MG/10ML INJ SYR	162.01			250
GLUCOSE 4GM TAB	5.3			250
RISPERIDONE 0.25MG TAB	5.3			250
BACLOFEN 5MG TAB	5.3			250
CYCLOSPOR(MOD) 100MG/ML 1ML	43.28	J7502		636
CYCLOSPOR(NONMOD) 100MG/ML1ML	76.64	J7502		636
RIFAXIMIN 200MG TAB	96.26			250
RUFINAMIDE 200MG TAB	62.09			259
LIDOCAINE PF 1% INJ 20ML	18.55			250
SECRETIN SYNTHE HUMAN 1MCG INJ	891.25	J2850	TB	636
PENTOBARBITAL 50MG INJ	166.32	J2515	TB	636
LIDOCAINE 1% INJ 20ML	18.55			250
GLYCOPYRROLATE 1MG/5ML SOLN	32.95			250
CEFIXIME 400MG CAP	113.19			250
DASATINIB 100MG TAB	1,299.66	C9399		636
LIDOCAINE 5% TOP PATCH	48.67			259
RIFAXIMIN 200MG TAB	144.31			259
MIDAZOLAM 2MG/ML ORAL SYRP 1ML	5.3			250
ALLOPURINOL 20MG/ML 1ML SUSP	5.3			250
FENTANYL 12 MCG/HR PATCH	107.08			250
LANSOPRAZOLE 3MG/ML 1ML SUSP	5.3			250
PHYTONADIONE 1MG/ML 1ML SUSP	5.3			250
BECLOMETH INH 40MCG/INH 8.7 GM	568.78			250

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BECLOMETH INH 80MCG/INH 8.7 GM	542.84			250
VORICONAZOLE 40MG/ML 1ML SUSP	108.16			250
DASATINIB TAB 50MG	721.1	C9399		636
FLUOXETINE 4MG/ML 1ML SOLN	5.3			250
IMATINIB 100MG TAB	346.09			250
SIROLIMUS 1MG/ML 1ML SOLN	123.5	J7520		636
TEMOZOLOMIDE 20MG CAP	155.61	J8700		636
TEMOZOLOMIDE 100MG CAP	1,106.33	J8700		636
VALGANCICLOVIR 50MG/ML 1ML SOL	66.29			250
ESTROGENS CONJ VAG CRM 30GM	1,018.81			250
FLUCONAZOLE 10MG/ML SUSP	5.3			250
LACOSAMIDE 10MG/ML SOLN	34.96			250
HYDROCORTISONE 2MG/ML SUSP	5.3			250
THIOGUANINE 20MG/0.5 TAB	31.3			250
METHYLPRED NA SUC PF 125MG INJ	18.55	J2930		636
METHYLPRED NA SUC PF 40 MG INJ	18.55	J2920		636
HYDROCORTISONE PF 100MG INJ	18.55	J1720		636
ATRACURIUM 50MG/5ML INJ	18.55			250
PEGINTERFERON ALFA2B 50MCG INJ	1,805.21			250
PEGINTERFERON ALFA2B 80MCG INJ	1,895.26			250
MITOMYCIN 5MG INJ	410.79	J9280	TB	250
MORPHINE 100MG/10ML PCA	17.5	J2270		636
DENOSUMAB 1MG INJ	2,707.68	J0897	TB	250
RASBURICASE 0.5MG INJ	796.69	J2783	TB	636
NEOSTIGMINE 5MG/5ML INJ SYRING	35	J2710		636
ROCURONIUM 100MG/10ML INJ SYRG	18.55			250
DESMOPRESSIN 1MCG INJ	159.85	J2597	TB	636
GLATIRAMER ACETETATE 20MG INJ	7,206.20	J1595	TB	250
HEMONC MOUTHWASH COMPOUND	39			250
TRANEXAMIC ACID 1GM/10ML INJ	296.45			250

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GLYCOPYRROLATE 0.2MG/ML SYRNGE	18.55	J3490		636
TOCILIZUMAB 1MG INJ	1,632.42	J3262	TB	636
CEFIXIME 200MG/5ML SUSPENSION	167.68			250
LINEZOLID 200MG INJ	221.76	J2020		636
BUPIVACAINE 0.5% PF 10ML	18.55	J3490		636
OMEPRAZOLE 20MG/10ML SUSP	5.3			637
MIDAZOLAM PF 1MG INJ	18.55	J2250		636
SODIUM CL 0.65% NASAL DRP 30ML	5.3			250
PHENOBARBITAL 32.4MG TAB	5.3			250
AMPICILLIN-SUL 1000MG/50ML INJ	35	J0295		250
CALCIUM GLUC 1G/10ML INJ BULK	18.55	J0610		636
ACETAMINOPHEN 80MG/2.5ML UD	8.35			250
IRINOTECAN 20MG INJ	30	J9206		636
CARBOPLATIN 50MG INJ	18.43	J9045		636
GEMCITABINE 200MG INJ	256.8	J9201		636
PACLITAXEL 1MG INJ	0.59	J9267		636
LEVOTHYROXINE 100MCG INJ	407.24			250
ZINC CHLORIDE 1MG INJ	18.55			250
DEXAMETHASONE SOD PHOS 1MG INJ	18.55	J1100		636
ERGOCALCIFEROL 400UNT/0.05ML	5.3			250
CYTARABINE 100MG INJ	53.28	J9100		636
ARSENIC TRIOXIDE 1MG INJ	143.93	J9017	TB	250
BACTROBAN NASAL	95.04			250
HYALURONIDSASE RECOMB 1UNT INJ	206.24	J3473		636
METHYLNALTREXONE 12MG INJ	335.97			250
INSULIN REGULAR 5 UNT INJ	4.2	J1815		250
INSULIN LISPRO 5 UNT INJ	7.87	J1815		250
INSULIN ASPART 5 UNT INJ	7.82	J1815		250
INSULIN GLARGINE 5 UNT INJ	7.75	J1815		250
BRENTUXIMAB 1MG INJ	291.09	J9042	TB	250
TIZANIDINE 4MG TAB	5.3			250
PENICILLIN G K 600,000 UNITS	18.55	J2540		636
PENICILLIN G K 600,000 UNITS	18.55	J2540		636
ASPARAGINASE ERWIN 1000 IU	8,282.82	J9019	TB	636

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HEMIN 1MG INJ	8,995.52	J1640	TB	250
MIDAZOLAM 1MG/ML INJ NONPF 5ML	18.55	J2250		636
LEUPROLIDE ACET 3.75MG INJ SUS	6,464.26	J1950	TB	250
LUPRON 7.5MG SUSP	7,703.06	J9217	TB	250
HYDROCODON/APAP 7.5-325MG 15ML	5.3			250
PROTHROMBIN COMPLEX 1UNT INJ	1,964.16	C9132	TB	250
CEFAZOLIN 500MG INJ	18.55	J0690		636
DASATINIB 20MG TAB	412.82	C9399		636
AZITHROMYCIN 500MG INJ	122.45	J0456		636
ECULIZUMAB 10MG INJ	10,245.60	J1300	TB	636
MAGNESIUM SUL 500MG INJ-1GM PM	18.55	J3475		636
MAGNESIUM SUL 500MG INJ-2GM PM	18.55	J3475		250
GENTEAL EYE GEL 10GM	38.21			250
INSULIN ASPART 5 UNIT FLEXPEN	357.65	J1815		250
INSULIN GLARGINE 5 UN SOLOSTAR	275.54	J1815		250
NEOSTIGMINE 0.5MG INJ (1MG/ML)	360.36	J2710		250
ADALIMUMAB 20MG INJ PEN	3,997.11	J0135	TB	250
AMMONUL INJ 50ML	82,189.23	C9399		636
SORAFENIB 200MG TAB	486.15	C9399		636
FLU VACC PF QUAD 0.5ML IM 3+	109.17	90686		250
BERINERT 10 UNITS INJ	3,105.00	J0597		250
EPOPROSTENOL 0.5MG INJ	115.34	J1325		250
FLU VACC PF QUAD 0.25ML IM <3Y	109.17	90685		250
EDETATE CALCIUM DISODI 1GM INJ	8,975.78	J0600	TB	250
IMMUNE GLOBULN GAMMAGARD 500MG	3,135.12	J1569	TB	250
NIVOLUMAB 100MG INJ	60.18	J9299	JW	250
DEXAMETHSN 10MG 1ML INJ (ORAL)	5.3			250
DEXAMETHASONE DIL 1MG/ML INJ	35	J1100		636
CEFEPIMIE 500MG INJ PREMIX	18.55	J0692		250
CEFEPIMIE 500MG INJ PREMIX	106.64	J0692		250

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CEFTAZIDIME 500 MG INJ (BULK)	18.55	J0713		250
ARIPRAZOLE 1 MG TAB	83.49			250
CEFTAROLINE 10 MG INJ	87.4	J0712	TB	250
CEFTAROLINE 10 MG INJ	349.6	J0712	TB	250
ACETAMINOPHEN 500MG TAB	0.5			250
CEFDINIR 300MG CAP	5.3			250
CITALOPRAM 10MG TAB	5.3			250
CITALOPRAM 40MG TAB	5.3			250
ESOMEPRAZOLE 2.5MG SUSP	49.24			250
ESOMEPRAZOLE 5MG SUSP	49.24			250
ESOMEPRAZOLE 10MG SUSP	52.2			250
ESOMEPRAZOLE 40MG CAP	49.24			250
FAMCICLOVIR 125MG TAB	5.3			250
GUANFACINE 1MG TAB	5.3			250
GUANFACINE 2MG TAB	5.3			250
GUANFACINE ER 1MG TAB	35.75			250
GUANFACINE ER 2MG TAB	35.75			250
OLANZAPINE 20MG TAB	166.16			250
MESALAMINE ER 375MG CAP	5.3			250
MESALAMINE DR 400MG CAP	5.3			250
MESALAMINE ER 500MG CAP	34.76			250
ONDANSETRON ODT 4MG TAB	157.45			250
PANCRELIPASE MT12 CAP	5.3			250
PANTOPRAZOLE 20MG TAB	5.3			250
LOMUSTINE 40MG CAP	801.84			250
ARANESP 1MCG INJ NONESRD 25MCG	464.4	J0881	TB	250
ARANESP 1MCG INJ (ESRD) 25MCG	425.52	J0882	TB	250
ARANESP 1MCG INJ NONESRD 40MCG	743.04	J0881	TB	250
ARANESP 1MCG INJ (ESRD) 40MCG	680.88	J0882	TB	250
NELARABINE 50MG INJ (250MCG)	32.09	J9261	TB	250
RASBURICASE 0.5MG INJ (1.5MG)	1,845.01	J2783	TB	250
EPOETIN 1000UNT (NON-ESRD) 3MU	109.42	J0885	TB	250
EPOETIN 1000UNT (NON-ESRD) 4MU	145.88	J0885	TB	250
EPOETIN 1000UNT (NON-ESRD) 10MU	535.44	J0885	TB	250
EPOETIN 100 UNT (ESRD) 20MU	1,070.88	Q4081		250

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EPOETIN 100 UNT (ESRD) 40MU	1,413.82	Q4081		250
FACTOR 13 CORIFACT HUMAN 1U IN	18.55	J7180	TB	250
PHENYLEPHRINE 300MG INJ 1ML	18.55	J2370		250
MELATONIN 5MG TABLET	5.3			250
METHOTREXATE 1.25MG TAB	5.3	J8610		250
DEFERASIROX 90MG TABLET	154.42			250
RESERVED FOR FUTURE RX ITEM	232.57			250
DEFERASIROX 360MG TABLET	465.13			250
METHADONE 2.5MG/0.5 TABLET	5.3			250
METHADONE 5MG TABLET	5.3			250
MYCOPHENOLATE SODIUM 180MG TAB	5.3	J7518		250
ONDANSETRON ODT 2MG TAB	60.09			250
LACTOBACILLUS 0.5GM/0.5 PACKET	5.3			250
HYDROXYCHLOROQUIN 100MG/0.5 TB	5.3			250
ANTIHEM FACTOR VIII RECMB 1 IU	94.64	J7192	TB	636
ANTIHEM FACTOR VIII RECMB 1 IU	94.64	J7192	TB	636
ANTIHEM FACTOR VIII RECMB 1 IU	94.64	J7192	TB	636
GLYCERIN PEDI RECTAL 0.25 SUPP	0.5			250
MERCAPTOPURINE 20MG/ML SUS 1ML	54.6			250
SENNA 8.6MG TAB	0.5			250
SILDENAFIL 10MG/MG 1ML SUSP	226.94			637
SILTUXIMAB 10MG INJ	8,130.32	J2860	TB	636
ANTIHEM FACTOR VIII RECOM 1UNT	18.55	J7182	TB	250
ANTIHEM FACTOR VIII RECOM 1UNT	18.55	J7182	TB	250
ANTIHEM FACTOR VIII RECOM 1UNT	18.55	J7182	TB	250
NIMODIPINE 60MG/20ML UD SOLN	249.71			250
CYTARABINE LIPOSOM PF 10MG INJ	7,130.60	J9098	TB	250
LET TOPICAL GEL 5ML	5.3			250
ROMIPLOSTIM 10MCG INJ	2,639.00	J2796	TB	636
GLUCOSE 40% ORAL GEL	5.3			250

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BLINATUMOMAB 1MCG INJ	200.95	J9039	TB	636
LEUPROLIDE ACET 1MG/0.2ML INJ	1,782.00	J9218	TB	250
BELATACEPT 1MG INJ	1,661.40	J0485	TB	250
CIDOFOVIR 375MG INJ	547.01	J0740	TB	250
DEXRAZOXANE 250MG INJ	758.19	J1190	TB	250
CEFTAZIDIME-AVIBAC 0.5-0.125 GM	684	J0714	TB	250
ZINC OXIDE TOP OINT 20% 60GM	5.3			250
THYROTROPIN 0.9MG INJ	2,336.93	J3240	TB	250
SUGAMMADEX 200MG/2ML INJ	319.2			250
LISDEXAMFETAMINE 20MG CAP	17.5			250
LISDEXAMFETAMINE 40MG CAP	17.5			250
MOMETASON/FORMO 100/5MCG 8.8GM	634.88			250
BELIMUMAB 10MG INJ	182.88	J0490	TB	250
PHENOXYBENZAMINE 10MG CAP	415.77			250
CROMOLYN ORAL SOLN 100MG/5ML	32.66			250
DIHYDROERGOTAMINE MESY 1MG INJ	461.2	J1110	TB	250
CEFDINIR SUSP 125MG/5ML	5.3			250
CEFDINIR SUSP 250MG/5ML	40.96			250
ZINC SULFA ORAL SOLN 2MG/0.4ML	5.3			250
ALLOPURINOL 150MG/0.5 TAB	5.3			250
TETRACAINE OPHTH SOLN 0.5% 4ML	57.36			250
SILVER TOPICAL WOUND GEL 1.5 OZ	124.99			250
EPOPROSTENOL 0.5MG INJ	193.87	J1325		250
AMITRIPTYLINE 12.5MG/0.5 TAB	5.3			250
PERMETHRIN 1% CREAM RINSE 2OZ	81.69			250
ESCITALOPRAM 5MG TAB	5.3			250
DINUTUXIMAB 17.5MG/5ML INJ	19,727.00	C9399		250
HAPPY HINEY CREAM (CMPD)	48.1			250
VIVELLE 0.025MG PATCH	94.57			250
RABIES VACCINE HDCV 1ML	773.52	90675	TB	250
ACETAMINOPHEN 162.5MG/0.5 SUPP	0.5			250
ACETAMINOPHEN 60 MG/0.5 SUPP	0.5			250

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CHOLECALCIFEROL 400UNTS/ML 1ML	5.3			250
CHOLESTYRAMINE 2GM/0.5 PACKET	5.3			250
CLOBAZAM 5MG/0.5 TAB	47.29			250
DEXAMETHASONE 1MG TAB	5.3			250
LINEZOLID 300MG/0.5 TAB	5.3			250
TRASTUZUMAB 10MG INJ	229.33	J9355	TB	250
BUPIVACAINE-EPI 0.5% PF 10ML	18.55			250
POSACONAZOLE 300MG INJ	1,273.08	C9399		250
ACETIC ACID 0.25% IRRIG 250ML	28.65			250
ISAVUCONAZONIUM 186MG CAP	124.98			250
NEVIRAPINE 50MG/5ML SUSP CMPD	5.3			250
ELTROMBOPAG OLAMINE 25MG TAB	497.43			250
TOPIRAMATE 30MG/5ML SUSP CMPD	5.3			250
MORPHINE PF 10MG INJ	17.5	J2270		250
VANCOMYCIN 50MG/ML SOLN 1ML	5.3			250
NITAZOXAMIDE 100MG/5ML SUSP	177.92			250
MIDAZOLAM 1MG/ML INJ PF 2ML	18.55	J2250		250
TRANEXAMIC ACID 650MG TAB	5.3			250
SULFASALAZINE 250MG TAB	5.3			250
OMEGA-3 ACID ORAL SOL	5.3			250
ASPIRIN 40.5MG TAB	5.3			250
LACTIBACILLUS VIT D DROPS	133.74			250
ANTITHYMOCYTE GLOB VL 25MG	1,646.27	J7511	TB	250
DIAZEPAM VL 5MG/ 1ML (10ML)	18.55	J3360	TB	250
MORPHINE SULF 4MG/ML VL	17.5	J2270	TB	636
PHENOXYBENZAMINE 2MG/ML SUSP	110.42			250
METYROSINE 10MG CAP	1,037.85			250
IMMUNE GLBN GAMMAGARD 20MG	5,193.12	J1569	JG	250
PROPARAC/FLUORESCEIN OPHTH 5ML	130			250
INSULIN ASPART 5 UNIT PENFIL	343.98	J1815		250
BUPRENORPHINE SL 8MG TAB	43.99			250
KETAMINE 10 MG/ML NASAL DIL	18.55			250
CLONIDINE 0.01 MG/ML SUSP CMPD	5.3			250

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LAMOTRIGINE 100MG ER TAB	72.93			250
RIFAXIMIN 20MG/ML SUSP CMPD	5.3			250
KETAMINE 100 MG/ML INJ	18.55			250
CYTARAB/DAUNOR LIPO INJ 1MG	427.8	C9024	TB	250
MORPHINE 30MG/30ML INJ	17.5			250
METHOTREXATE 50MG/ML INJ 10ML	4.34	J9260		250
HYDROCORTISONE 1MG/ML DILUTION	35			250
NITAZOXANIDE 500MG TAB	380.69			250
MOPRHINE 2MG/ML ORAL SOLN 1ML	17.5			250
CENTRUROIDES IMM FAB (ANASCORP	7,726.44	J0716	U8	250
ZONISAMIDE 10MG/ML SUSP 1ML	5.3			250
NUSINERSEN 0.1MG INJ (12MG)	39,160.97			250
PENTOBARBITAL 50MG INJ (2500MG	4,050.00	J2515		250
TROPICAMIDE 1% OPHT SOLN 3ML	5.3			250
CARVEDILOL 1.25MG/ML SUSP 1ML	5.3			250
NIFEDIPINE 4MG/ML SOLN 1ML	5.3			250
PYRIDOXINE 1MG/ML SOLN 1ML	5.3			250
ETHAMBUTOL 100MG/ML SOLN 1ML	5.3			250
NS 3ML FLUSH	18.55			258
NS 5ML FLUSH	18.55			258
NS 10ML FLUSH	18.55			258
NS 2.5ML FLUSH SYREX	18.55			258
AMINO ACIDS 10% FREAMINE 100ML	18.55			258
DEXTROSE 70% 500*	18.55	B4180		258
TROMETHAMINE 3.6% 500ML (THAM)	945.43			258
PICU PT TYPE P (191809)	2,600.00			
PICU PT TYPE J (191817)	4,432.00			
PICU PT TYPE F (191133)	4,432.00			
PICU PT TYPE G (191841)	4,432.00			
PICU PT TYPE C (191858)	4,972.00			
PICU PT TYPE K (191866)	3,571.00			
PICU PT TYPE Y (191874)	4,972.00			
PICU PT TYPE I (191916)	4,972.00			

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PICU PT TYPE S (191924)	4,972.00			
PICU PT TYPE P (00193243)	2,233.00			
PICU DIRECT REFERRAL OBS CARE	146	G0379		762
VACCINE ADMIN, 1ST PCU	69	90471		771
VACCINE ADMIN, EACH ADDL PCU	56	90472		771
IV THERAPY INIT 16-90 MIN	482	96365		260
IV INFUSION THERAPY ADD HR	325	96366		260
INJECTION, SUBQ/IM PCU	120	96372		260
INJECTION IV PCU	209	96374		260
THPY/PRO/DX INJ IV PUSH NEW	216	96375		260
CHEM SQ/IM ANTI NEOPLASTIC PCU	348	96402		331
CHEM IV INFUSION ADD HR PCU	489	96415		335
ECG MONITOR/REPORT 48 HR ANLYS	727	93226		731
INJ EPIDURAL SUBARACH L/S SGL	2,266.00	62322		761
DECLLOT PORT W/THROMB AGENT	524	36593		360
COLLCT BLD CENTRL/PERPH CATH	104	36592		361
REM TNLD CV CATH W/O PORT/PUMP	1,204.00	36589		361
INS CATH PERIPH CV W/O PORT >5	2,271.00	36569		361
INS CATH PERIPH CV W/O PORT <5	1,900.00	36568		361
VENIPUNCTURE > AGE 3 REQUIR MD	68	36410		361
VENIPUNCTURE <3YR VEIN OTHER	71	36406		361
VENIPUNCTURE <3YR FEM/JUG	86	36400		361
INTUBATION ENDOTRACHEAL EMERG	598	31500		361
PICU CHEMO SQ/IM NON ANTI- NEOP	358	96401		331
PICU OBSERVATION PER HOUR	84	G0378		762
PICU COMPLEX PX > 60 MIN	865			361
PICU SIMPLE PX 16-30 MIN	289			361
PICU INTERMED PX 31-60 MIN	578			361
PICU IVINF THPY FLD INT 31M-1H	386	96360		260
PICU IV INF THPY FLUID ADDL HR	134	96361		260

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PICU PLACE NG TUBE MD W/GUIDE	432	43752		361
PICU CHEMO PROLO INFUSE W/PUMP	878	96416		335
PICU BLOOD TRANSFUSION	817	36430		391
PCU IV INF SEQ UP TO 1 HR	170	96367		260
PCU IV INFUS THPY/DX CONCUR	161	96368		260
PCU IV PUSH SAME DRUG	152	96376		260
PICU PUNCT ASP/INJ SHUNT TUBE	822	61070		361
PICU ADMIN PNEUMO VACCINE	63	G0009		771
PCU ADMIN INFLUENZA VACCINE	56	G0008		771
PCU THRCENTSIS W/O IMGN GUID	1,140.00	32554		361
PCU ABD PARACENTESIS W/O IMGN	1,140.00	49082		361
PCU THORACENTESIS W/IMGN GUID	1,378.00	32555		361
PCU LP DRAIN THER CSF	1,680.00	62272		361
PCU CATH CV NON-TUNL <5 YRS	1,867.00	36555		361
PCU INS TNL CV ACC W/PORT >5	5,011.00	36561		361
PCU TRACHEOSTOMY	4,073.50	31600		361
PCU PUNCT VENTRIC W/O INJ	1,090.00	61020		361
PCU DEBR/REM TISS	350	97598		420
PCU TRACHEOSTOMY KIT	32	A4629		272
PCU IMMUN ADM	41	90461		771
PCU THROMBECT DIALY CIRCUIT	472	36905		480
PCU DEBR NON-SEL W/O CPLX	230	97602		420
PCU VENIPUNCTURE STAT	25	36415		300
PCU RECOVERY INTL 30 MIN	1,611.00			750
PCU MINOR RECOVERY SUBS 15 MIN	300.76			750
PCU COMPLEX RECVRY INTL 30 MIN	1,689.00			750
PCU MINOR RECOVERY SUBS 30 MIN	1,052.66			750
PCU INTER RECOVERY SUB 15 MIN	580			750
PCU COMPLEX RECVRY SUBS 15 MIN	358			750
PCU THORACOSTOMY CHEST TUBE	1,222.00	32551		361
PCU CPR	895	92950		410
PICU RETINOPATHY (ROP) I/P	860	67229		361

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PICU RETCAM PHOTO/EYE EXAM-I/P	220	92250		361
PICU RETCAM PHOTO/EYE EXAM-O/P	220	92250		510
PICU RETINOPATHY (ROP) O/P	860	67229		510
PICU LUMBAR PUNCTURE	1,170.00	62270		361
PCU MOD SED SAME MD ADDL 15	160	99153		370
PCU MOD SED 5+YR 1ST 15 MIN	313	99152		370
MOD SED BY DIFF MD EA AD 15	183	99157		370
PCU MOD SED <5YR 1ST 15 DIF MD	348	99155		370
PCU MOD SED <5YR 1ST 15 MIN	330	99151		370
PCU INS CATH CV NON-TUNL >5YRS	2,138.00	36556		361
PCU CATHETERIZ/CANNUL ART PERC	514	36620		361
INS TNL CV CATH W/O PORT 5>	2,984.00	36558		361
ARTERIO CAROTIO BILAT	4,006.00	75671		320
FOR PULMONARY ANGIOGRAM	914	93541		480
ARTERIOGRAM CAROTID UNILAT	3,085.00	75676		320
ARTERIOGRAM AORTA W RUNOFF	3,476.00	75630		320
AORTAGRAM TRANS LUMBAR	3,533.00	75625		320
XR ARTERIOGRAM AORTA FLUSH S&I	3,533.00	75625		320
ARTERIOGRAM AORTIC ARCH (P)	3,273.00	75605		320
INTRO OF NEEDLE AORTA/TRANS	1,094.00	36160		361
ARTERIO FEMUR OR BRA BILAT	3,455.00	75716		320
ARTERIO FEMUR OR BRA UNI S&I	3,080.00	75710		320
INTRODUCTION OF CATHETER AORTA	1,724.00	36200		361
ARTERIO RENAL/ADRENAL BILAT SI	4,000.00	75733		320
ANGIO VISCERAL W/W/O FLUSH S&I	3,550.00	75726		320
SELECTIVE CATH ADD 2/3 ABD	874	36248		361
INTRO NEED CAROTID/VERT ARTERY	1,287.00	36100		360
ARTERIO RENAL BILAT	3,524.00	75724		320
ARTERIO RENAL UNILAT	3,379.00	75722		320
SELECTIVE CATH ADD 2/3 THOR	799	36218		361
CYSTOGRAM (P)	625	74430		320
VOIDING CYSTOGRAM VCUG (P)	683	74455		320

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
MYELOGRAM CERVICAL RAD	1,493.00	72240		320
INJ PROCED MYELO C1-C2	789	61055		361
INJECTION PROC FOR MYELOGRAPHY	1,471.00	62284		360
MYELOGRAM THORACIC DORSAL	1,403.00	72255		320
MYELGRM ENTR SPINE CER/DOR/LUM	1,859.00	72270		320
VENOGRAM LEG UNILATERAL	1,249.00	75820		320
VENIPUNCT CUTDWN >1YR	125	36425		361
INTRODUCTION NEEDLE/CATH VEIN	167	36000		360
RETROGRADE URETHROGRAM RUG P	640	74450		320
INJECTION FOR RUG	435	51610		361
VENOGRAM ARM UNILAT	1,249.00	75820		320
XR VENOGRAM ARM BILAT S&I	1,400.00	75822		320
ARTERIO ARM/BRA UNILAT	366.75			320
ARTERIOGRAM ARM/BRACH UNI S&I	2,565.00	75710		320
XR BONE SURVEY CMPL	741	77075		320
INST VENA CAVA FILTER S&I	6,475.00	37191		361
INTRAVASCULAR UMBRELA DEV INST	4,100.00	37620		361
NEPHROSTOGRAM RAD	753	74425		320
INJECTION FOR PYELOGRAPHY	396	50690		361
MYELOGRAM LUMBAR	1,457.00	72265		320
ABDOMEN 1 VIEW	294	74018		320
ABDOMEN FLAT/UPRIGHT	388	74019		320
ABDOMEN FLAT UP/DBCUB	457	74022		320
ABDOMEN ONE DECUBITUS ONLY	294	74018		320
FB SINGLE FILM COMP BODY CHILD	250	76010		320
BARIUM ENEMA/AIR CONTRAST	982	74280		320
XR ENEMA THERAPEUTIC	1,094.00	74283		320
MRI OF HEAD	799	36218		361
MRI OF PELVIS	1,177.00	36012		361
XR INTRODUCTION CATHETER AORTA	1,724.00	36200		361
ANKLE 2 VIEWS AP/LAT	603	73600		320
ANKLE 3 VIEWS	769	73610		320

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
SELECT CATH PLACE ARTER FIRST	1,405.00	36245		361
ANGIOGRAPHY PELVIC SLCTV S&I	3,415.00	75736		320
ARTERIOGRAM AORTA W/RUNOFFS	3,476.00	75630		320
INTRO OF CATHETER AORTA	1,724.00	36200		361
XR ARTHROGRAM SHOULDER S&I	1,337.00	73040		322
INJECTION PROCEDURE SHOULDER	486	23350		361
ARTERIO PELVIS W/SEL EMBOLIZ	3,415.00	75736		320
CATHETER PLACEMENT	874	36248		361
XR ARTHROGRAM KNEE S&I	813	73580		322
BONE AGE COMPLETE	597	77072		320
SCANOGRAM - BONE LENGTH	500	77073		320
BONE SURVEY LTD	978	77074		320
XR SHUNTOGRAM S&I	959	75809		320
CHEST BOTH DECUBITUS R & L	285	71046		324
SINGLE CHEST LAT PORT	548	71045	52	324
CHEST AP OR PA 1 VIEW ONLY	548	71045		324
CHEST 1 VW AP/PA PORT	548	71045		324
CHEST 2 VIEWS	610	71046		324
CHEST 2 VWS AP & LAT PORTABLE	610	71046		324
RIBS UNI W/ CHEST MIN 3 VWS	688	71101		320
CHEST DECUB 1 VIEW	285	71046		324
A-C JNT BILAT W/WO WEIGHTS	580	73050		320
CHOLANGIOGRAM T-TUBE	609	74305		320
CLAVICLE 1 VIEW	271	73000	52	320
CLAVICLE 2 VIEWS	409	73000		320
SHOULDER MIN 2 VWS	781	73030		320
BARIUM ENEMA SINGLE CONT	982	74270		320
XR CHOLANGIOGRAM OPERATIVE S&I	745	74300		320
XR CYSTOGRAM S&I	669	74430		320
INJECTION FOR RUG	435	51610		361
XR INJ FOR CYSTO/VOIDING CYSTO	451	51600		361
XR VOIDING CYSTOGRAM VCUG (P)	683	74455		320
XR DILATION STRICTURE S&I	762	74360		320
ELBOW 2 VIEWS	658	73070		320

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ELBOW COMPLETE 3 VWS	732	73080		320
BARIUM SWALLOW (ESOPHAGUS)	570	74220		320
BAR SWALLOW MODI SPEECH THER	785	74230		320
FACIAL BONES MIN 3VWS	477	70150		320
FINGER MIN 2 VWS	630	73140		320
XR FISTULAGRAM/SINOGRAM S&I	578	76080		320
FLUOROSCOPY TIME 1HR PLUS	887	76001		320
FOOT 2 VIEWS	506	73620		320
FOOT ONE VIEW SPECIFY	295	73620	52	320
FOOT 3 VIEWS	643	73630		320
FOREARM AP/LAT ROUTINE	714	73090		320
FOREARM ONE VIEW SPECIFY	326	73090	52	320
HAND ONE VIEW SPECIFY	708	73120	52	320
HAND 2 VIEWS	708	73120		320
HAND 3 VIEWS/FOREIGN BODY	701	73130		320
HIP AP/LAT OR FROG/LAT ROUTINE	490	73510		320
TRANSCATH THERAPY/INFUSION	3,011.00	75896		320
TRANS BALN ANGIOPLAST VENOUS	3,241.00	75978		320
TRANS ANGIOPLASTY PERCU VENUS	4,455.00	35476		320
FLUORO <1 HR	1,141.00	76000		320
HUMERUS AP LAT ROUTINE (ARM)	715	73060		320
HUMERUS ONE VIEW SPECIFY	337	73060	52	320
XR HSG S&I	759	74740		320
INJECTION PROCEDURE HSG	428	58340		361
KNEE 2 VIEWS	675	73560		320
KNEE SINGLE VIEW SPECIFY	675	73560		320
KNEE 3 VIEWS	795	73562		320
KNEE SUNRISE 1 VIEW ONLY	675	73560		320
KNEES AP/LAT STANDING	298	73565		320
LOWER LEG AP/LAT (ROUTINE)	693	73590		320
LOWER LEG ONE VIEW SPECIFY	332	73590	52	320
LONG BONES CHILD	472	77076		320
MANDIBLE MIN 4 VWS	439	70110		320
MANDIBLE < 4 VIEWS	301	70100		320
MYELOGRAM LUMBAR SPINE S&I	1,457.00	72265		320

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INJ MYELO CONT & LUMBAR	1,471.00	62284		361
SPINAL PUNCTURE LUMBAR DIAG	1,447.00	62270		361
MYELOGRAM THORACIC SPINE S&I	1,403.00	72255		320
INJECTION PROCED MYELO C1-C2	789	61055		361
MYELOGRAM >2 REGIONS S&I	1,859.00	72270		320
MYELOGRAM CERVICAL SPINE S&I	1,493.00	72240		320
ORBITS MIN 4 VWS	702	70200		320
HEEL/OSCALSIS TANG/LAT ROUTINE	294	73650		320
PELVIS JUDET VIEWS	546	72170		320
PELVIS ROUTINE AP	546	72170		320
NASAL BONES MIN 3VWS	812	70160		320
FLUOROSCOPY TIME ONE HOUR PLUS	887	76001		320
INJECTION FOR PYELOGRAPHY	396	50690		361
PYELOGRAM IV	912	74400		320
PYELOGRAM/IVP ROUTINE	763	74410		320
RIBS BILAT W/CHEST MIN 3 VWS	910	71111		320
RIBS UNILAT 2 VIEWS	561	71100		320
SACRUM AND COCCYX AP & LAT	697	72220		320
SELECT CATH PLACEMENT RENAL	1,405.00	36245		361
SACRO-ILIAC JOINTS > 3 VWS	397	72202		320
SCAPULA 2 VIEWS	342	73010		320
SHOULDER 1 VIEW	620	73020		320
SHOULDER ROUTINE INT/EXT ROT	781	73030		320
SHOULDER AP INT/EXT W/AXILLARY	781	73030		320
SHOULDER AXILLARY	620	73020		320
SIALOGRAM SALIVARY GLANDS S&I	605	70390		320
SINUS < 3 VWS	300	70210		320
SINUSES MIN 3 VWS	1,003.00	70220		320
SKULL 2 VIEWS	740	70250		320
SKULL SINGLE VIEW SPECIFY	740	70250		320
SKULL SERIES COMPLETE 4 VIEWS	930	70260		320
SM BOWEL SERIES	444	74250		320

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
SMALL BOWEL W/ENTEROCLYSIS TB	736	74251		320
CERVICAL SPINE 1 VIEW SPECIFY	297	72020		320
CERV SPINE 2-3 VWS	810	72040		320
C-SPINE AP/LAT/OBL/COMP 4-5V	1,003.00	72050		320
LUMBAR SPINE 1 VIEW SPECIFY	297	72020		320
LUMBAR SPINE 2 VIEWS	806	72100		320
DORSAL SPINE 1VIEW	297	72020		320
THORACIC SPINE COMPLETE 4 VWS	1,404.00	72074		320
THORACIC SPINE AP AND LAT	954	72070		320
LUMBAR SPINE 3 VIEWS ROUTINE	806	72100		320
LUMBAR SPINE 5 VWS W/OBLS	1,063.00	72110		320
STERNUM MIN 2 VWS	338	71120		320
TMJ BILAT	404	70330		320
INJECT PROCEDURE CHOLANGIOGRAM	604	47500		361
TOES MIN 2 VIEWS	329	73660		320
UPPER GI SERIES W/O KUB	675	74240		320
UP G I AND SMALL BOWEL SERIES	1,018.00	74245		320
XR RETRO URETHROGRAM RUG P S&I	640	74450		320
XR VENOGRAM LEG BILAT S&I	1,400.00	75822		320
XR VENOGRAM LEG UNI S&I	1,249.00	75820		320
CYSTOGRAM VOIDING W/FLUORO	683	74455		320
WRIST AP/LAT	877	73100		320
WRIST AP/LAT/OBL 3 VIEW ROUT	758	73110		320
WRIST NAVICULAR SERIES 4 VIEWS	758	73110		320
FACIAL BONES < = 3 VWS	337	70140		320
NASO/ORO GAST TUB PLACE W/FLOU	432	43752		361
INTRO TUBE GI LONG	1,038.00	44500		320
XR INTRO LONG GI TUBE S&I	543	74340		320
XR ARTHROGRAM WRIST S&I	698	73115		322
REPOSITION G-TUBE	957	43761		361
INJECT PROCEDURE WRIST ARTHO	258	25246		361
PELVIS 2 VIEWS AP & FROG	546	72170		320

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
TISSUE SPECIMEN (ANY)	371	76098		320
UPPER GI & AIR CONT ROUT	752	74246		320
XR BONE SURVEY CMPL	751	77075		320
KNEE 4 VIEWS AP/LAT OBLIQUES	790	73564		320
NECK SOFT TISSUE AP/LAT (ROUT)	388	70360		320
XR PLACE ENTEROCLYSIS TUBE S&I	597	74355		320
BX BREAST NDL W/O GUIDE	1,060.00	19100		361
NEEDLE ASPIRATION	287.29			272
UPPER GI AIR CONT/SM BOWEL	998	74249		320
XR INTRO OF INTRA CATH RENAL	1,938.00	50392		361
XR CHANGE OF NEPHRTMY/TUBE	1,398.00	50398		361
XR VENOUS SAMPL W/O ANGIO S&I	2,485.00	75893		320
VENUS CATH SEL ORGN BLOOD SAMP	927	36500		361
INJ CNTR W/FLUOR EVAL G/D/J TB	685	49465		361
ARTHROGRAM TMJ S&I	752	70332		322
XR ARTHROGRAM ELBOW S&I	675	73085		322
INJECTION PROCEDURE ELBOW	581.6	24220		361
XR ARTHROGRAM HIP S&I	1,171.00	73525		322
INJ PROCEDURE HIP WO ANES	457	27093		320
XR ARTHROGRAM ANKLE S&I	718	73615		322
INJECTION PROCEDURE ANKLE	606	27648		361
FLUORO NEEDLE PLACE ASP/BIOP	646	77002		320
XR NEPHROSTOGRAM S&I	753	74425		320
INJ ANTEGRADE NEPH/URET S&I	507	50430		361
INTRO NDL/CATH CAROTD/VERT ART	1,287.00	36100		361
INTRO OF NEEDLE/INTRACATH	167	36000		361
VENIPUNCTURE AGE 3 & OVER	68	36410		361
ERCP COMBINED BIL&PANC S&I	994	74330		320
XR ORTHOPANTOGRAM PANORAMIC	305	70355		320
VENACAVA FILTER PLACEMENT	6,475.00	37191		320
INTRAVASCULAR UMBRELA DEV INST	4,100.00	37620		361
ISOVUE 200 PER ML	7	Q9966		255
ISOVUE 300 PER ML	7	Q9967		255

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
LOCM 350-399 ML IODINE	4.12	Q9967		255
CONTRAST HOCM 350MG 1ML	2.12	Q9963		255
UGI W/WO DELAYED FILMS W/ KUB	788	74241		320
XR FLUORO NEEDLE LOCALIZATION	676	77003		320
RAD CHG G-TUBE TO G-J TUBE	2,035.00	49446		361
RAD INSERT GASTRO TUBE FLUORO	952	49440		361
RAD RPLC GASTRO-JEJUN TB FLUOR	1,092.00	49452		750
INJ ARTHROGRAM SACROILIAC	2,275.00	27096		361
INJ ARTHROGRAM HIP ANES	918	27095		361
XR PHARYNX/LARYNX W/FLUORO	317	70370		320
XR FLUORO CV ACCESS PLMT S&I	771	77001		320
INJ CONTR W/FLUORO EVAL CV DEV	691	36598		361
XR CATH PANCREATIC ONLY S&I	758	74329		320
RAD DRAIN INJECT JOINT BURSA	236	20610		320
INJ ARTHROGRAM SHOULDER	434	23350		320
RPLC G/CEC/OTH TB UNDER FLUORO	903	49450		361
XR KNEE 1-2V RT	675	73560	RT	320
XR KNEE 1-2V LT	675	73560	LT	320
RAD INJ EPIL SUBARH C/T SGL	2,037.00	62320		320
RAD INJ EPIL SUBARH C/T SGL	2,713.00	62320		320
RAD ARTHRO ASP/INJ JT MAJOR	380	20610		361
XR PERITONEOGRAM S&I	640	74190		320
MECH REM OBS MAT G/D/J/G- J/CEC	701	49460		361
FLUID COLLXN DRAIN CATH PERI	5,054.00	49406		361
IOXAGLATE MEG/NA 320 20ML	2.26	Q9967		255
XR ERCP BILE DUCT S&I	884	74328		320
XR T-L SPINE SCOLI 1 VIEW	300	72081	FY	320
XR HIP UNILAT W/PELVIS 2-3 VW	521	73502		320
XR HIP UNILAT W/PELVIS 1 VIEW	247	73501		320
XR INJ PROC CHOLANGIOGRAM	630	47531		361
XR FEMUR MIN 2 VIEWS	658	73552		320
XR FEMUR 1 VIEW	329	73551		320
XR HIP UNILAT W/PELVIS 4+ VW	603	73503		320

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XR INJ CHOLANGIOM TRANSHEPATIC	1,176.00	47532		361
XR PL BIL DRN CATH PERC EXT SI	1,112.00	47533		361
XR SPINE ENTIRE AP & LATERAL	415	72082		320
XR HIP BILAT W/PELVIS 3-4 VIEW	616	73522		320
XR HIP BILAT W/PELVIS 5+ VIEWS	753	73523		320
XR HIP BILAT W/PELVIS 2 VIEWS	342	73521		320
T-L SPINE ENTIRE 4 OR 5 VIEWS	610	72083	FY	320
ABDOMEN SITZMARK INITIAL	316	74018		320
CAUT CHEM TISSUE GRANULATION	350	17250		361
CYSTO CONRAY 1ML	1	Q9958		636
INJ MYEL LUMBAR >1 INCL S&I	2,363.00	62305		361
RAD INJ EPID BLOOD/CLOT PATCH	1,700.00	62273		320
L-SPINE CMPL W/BENDING V	800	72114		320
VPAC PT TYPE C (00192112)	1,350.00			
VPAC PT TYPE F (00192120)	1,853.00			
VPAC PT TYPE G (00192138)	1,853.00			
CVR ONCOLOGY	2,946.00			
VPAC PT TYPE J (00192153)	920			
VPAC PT TYPE K (00192161)	1,378.00			
VPAC PT TYPE S (00192179)	679			
VPAC PT TYPE Y (00192203)	1,350.00			
CVR PRIVATE	2,233.00			
CVR INTERMEDIATE	3,571.00			
CVR OBSERVATION	84	G0378		762
INTER RECOVERY SUBS 15 MIN	580			710
COMPLEX RECOVERY INTL 30 MIN	1,689.00			710
COMPLEX RECOVERY SUBS 15 MIN	358			710
RECOVERY INTL 30 MIN	1,611.00			710
MINOR RECOVERY SUBS 15 MIN	300.76			710
MINOR RECOVERY INTL 30 MIN	1,052.66			710
AUD-PURE TONE AUDIOMETRY (AIR)	99	92552		471
AUD-SPEECH AUDIO THRESHOLD	99	92555		471
AUD-SPCH AUDIO W SPCH RECOGNIT	99	92556		471

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
AUD-EVAL AUDIO COMPREHEN - ST	99	92557		471
AUD-TYMPANOMETRY IMPEDANCE TST	182	92567		471
AUD-VISUAL REINFORCE AUDIOMETR	450	92579		471
AUD-CONDITIONING PLAY AUDIOMET	450	92582		471
AUD-AUDITORY EVOKED COMPREHEN	531	92585		471
AUD-DISTORT EVOKED OTOAC COMP	199	92588		471
AUD-AUDITORY EVOK RESP LIMITED	241	92586		471
AUD IMMITTANCE TESTING	151	92570		471
AUD STENGER TEST PURE TONE	85	92565		471
AUD SCREEN PURE TONE AIR ONLY	71	92551		471
ADS OUTPATIENT HEMODIALYSIS	1,491.00	90935		821
ADS OUTPATIENT CCPD TREATMENT	1,560.00	90945		761
ACUTE INPATIENT HEMODIALYSIS	2,124.00	90935		801
PEDIATRIC HEMO W/SINGLE PASS	1,831.00			801
IP CCPD TREATMENT	884	90945		804
THERAPEUTIC A-PHERISIS	2,527.00			801
CRRT DAILY SUPERVISION	1,711.00			801
PED CCPD TX EA ADDL HR	314			804
CVVH INITIATION AND SETUP	2,300.00			801
ESRD EMERGENCY O/P DIA TX	1,579.00	G0257		801
AEROSOL-MDI TREATMENT	177	94640		410
VENT PER DAY INTL	3,586.00	94002		410
VENT PER DAY SUBS	3,124.00	94003		410
CARDIOPUMONARY RESUSCITATION	822	92950		410
SPIROMETRY - BEDSIDE	229	94010		460
PRE SPIROMETRY BREATHING CAP	276	94010		460
CPAP - BIPAP PER DAY	491	94660		410
PFT-PRE-POST SPIROMETRY	743	94060		460
PULSE OXIMETER SINGLE	80	94760		460
CHEST PHYSIO THERAPY SUBS	120	94668	76	410

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SPUTUM INDUCTION FOR SPECIMEN	126	89220		410
VITAL CAPACITY TEST	180	94150		460
PNEUMOCARDIOGRAM/24 HR	804	94772		460
PENTAM AEROSOL TREATMENT	431	94642		412
PFT - BRONCHO CHALLENGE	742	94070		460
PFT-MVV	155	94200		460
PULSE OX OVERNIGHT TREND	255	94762		460
PULSE OX MULTIPLE	42	94761		460
CHEST PHYSIO THERAPY INT	150	94667		410
ENDOTRACHEAL INTUB EMERG	598	31500		410
NASOTRACHEAL SUCTIONING	176	31720		410
DEMO-EVAL OF INHALED THERAPY	129	94664		410
NITRIC OXIDE ADDL HR	412			270
NITRIC OXIDE 1ST HR	824			270
GLUCOSE SERUM QT	54	82947		301
LACTATE/LACTIC ACID BLOOD	118	83605		301
SURFACTANT ADMINISTRATION	112	94610		460
PLETHYSMOGRAPHY LUNG VOL	847	94726		460
DIFFUSING CAPACITY	799	94729		460
SELF-MGMNT EDUC&TRAIN 1 PT	74	98960		942
OXYGEN 4HRS	41.49			271
HELIOX 2 HRS	48.13			271
CONTINUOUS AER INHAL TX 1ST HR	199	94644		412
CONTINUOUS INHAL TX EA ADDL HR	160	94645		412
AEROSOL TREATMENT	112	94640	76	412
RESPCAPILLARYFINGER/HEEL/S TICK	26	36416		410
NEO TRACHTUBE 2.5-4.0 UNCUFFED	198	A7520		278
PEDS TRACH ADJUSTABLE FLANGE	480	A7521		278
PED TRACHTUBE TTS CUFF 3.5-5.5	480	A7521		278
IPPB/IPV TREATMENT	112	94640	76	412
MDI TREATMENT	112	94640	76	412
MECHANICAL CHEST WALL VEST OSC	249	94669		410
RESP ATTENDANCE AT DELIVERY	210	99464		460

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CONSCIOUS SED BY SAME MD EA AD	124	99153		370
CONSCIOUS SED S/MD >5YR 1ST 30	347	99152		370
O2 UPTAKE EXPIRED GAS W/CO2	419	94681		460
BIV+ 4.5TTS FLX SNECK CUFFLESS	335	A7520		278
TRACH TUBE SIZE 6 (CUFFED)	100	A7521		278
TRACH TUBE SIZE 6 (CUFFLESS)	100	A7520		278
BIVONA TTS CUFFED 4.0X41X4.0MM	485	A7521		278
4.0MM FLX PED STD CUFFED	230	A7521		278
BIV 4.0 TTS FLEX SNECK CUFFED	445	A7521		278
BIV 4.5 TTS FLX SNECK CUFFLESS	230	A7520		278
BIVONA TTS CUFFED 4.5X42.0X4.5	485	A7521		278
TRACH TUBE SIZE 6 - CUFFED	100	A7521		278
BIV+ TTS 4.0MM FLEXTEND-CUFFED	445	A7521		278
BIV 4.5TTS FLX SNECK (CUFFED)	445	A7521		278
BIV+ 4.5 TTS FLX SNECK CUFFED	445	A7521		278
BIV+ 4.0TTS FLX SNECK CUFFLESS	190	A7520		278
BIVONA TTS CUFFED 3.5X40.0X3.5	485	A7521		278
3.5 TTS BIVONA FS S CUFFLESS	235	A7520		278
RESP - EKG ROUTINE	260	93005		730
BLOOD GAS AND CO-OXIMETRY	280	82805		301
RESP SODIUM	61	84295		301
RESP CHLORIDE	44	82435		301
RESP POTASSIUM	35	84132		301
CALCIUM IONIZED	151	82330		301
RESP ARTERIAL PUNCTURE	81	36600		410
CD4/CD8 ABS. COUNT/RATIO	199.96	86360		302
T CELLS / TOTAL COUNT	157.59	86359		302
FLOW CYTOMETRY 1ST MARKER	192.79	88184		311
FLW CYTOMETRY EA SUR MRKR 1	170	88185		311
FLW CYTOMETRY EA SUR MRKR 2	107.96	88185		311
FLOW CYTOMETRY EA SUR MKER 3	170	88185		311

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
FLOW CYTOMETRY EA SUR MKER 4	170	88185		311
FLOW CYTOMETRY EA SUR MKER 5	170	88185		311
FLOW CYTOMETRY EA SUR MKER 6	170	88185		311
FLOW CYTOMETRY EA SUR MKER 7	170	88185		311
FLOW CYTOMETRY EA SUR MKER 8	170	88185		311
FLOW CYTOMETRY EA SUR MKER 9	170	88185		311
ARTERIAL LACTATE	118	83605		301
MICROABLUMIN RANDOM URINE QN	77	82043		301
RUBELLA AB SCREEN	91	86762		302
PHENYTOIN (DILANTIN), TOTAL	141	80185		301
ISTAT ACTIVATED CLOTTING TIME	78	85347		305
ISTAT BTYPE NATIURETIC PEPTIDE	124	83880		301
ISTAT GLUCOSE	51	82947		301
ISTAT PH PCO2 PO2	78	82803		301
ISTAT PCO2 PH	218	82803		301
ISTAT GLUCOSE	54	82947		301
ISTAT SODIUM	61	84295		301
ISTAT POTASSIUM	35	84132		301
ISTAT CHLORIDE	44	82435		301
ISTAT BUN	43	84520		301
ISTAT HEMATOCRIT	38	85014		305
ISTAT SODIUM	49	84295		301
ISTAT POTASSIUM	51	84132		301
ISTAT IONIZED CALCIUM	151	82330		301
ISTAT HEMATOCRIT	40	85014		305
ARTERIAL BLOOD GASES	218	82803		301
ARTERIAL ELECTROLYTES	110	80051		301
ARTERIAL LACTIC ACID	115	83605		301
ARTERIAL GLUCOSE	52	82947		301
GLUCOSE REAGENT STRIP	34	82948		300
CHLAMYDIA TRACHOMATIS PCR	149	87491		306
NEISSERIA GONORRHOEAE PCR	163.68	87591		306
GLYCOHEMOGLOBIN (A1C)	92	83021		301
FOLIC ACID	237	82746		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
T4 FREE	121	84439		301
TOTAL T4	90	84436		301
ELECTROPHORESIS SER PROTEIN	122	84165		301
SWEAT CHLORIDE ANALYSIS	67	82438		301
T3 UPTAKE	80	84479		301
TSH	150.82	84443		301
URINE PREGNANCY TEST	53	84703		301
VITAMIN B12	130	82607		301
LM TOX PANEL #2	136	G0431		301
NON D.O.T. TOX-5	136	G0431		301
GROSS & MICRO LEVEL IV	288.32	88305		312
IMMUNOHISTO/CYTO PER ANTIBODY	326.4	88341		310
CHEM PSA SCREEN MEDICARE	134	G0103		301
CHEM RHEUMATOID FACTOR QN	68.2	86431		302
PHOSPHORUS URINE 24 HR	47	84105		301
CALCIUM URINE 24 HR	60.35	82340		301
24 UA CREATININE	55	82570		301
E HYSTOLYTICA AG RAPID	85.33	87337		306
GIARDIA ANTIGEN RAPID	94.66	87329		306
CRYPTOSPORIDIUM AG RAPID	95.56	87328		306
MUMPS ANTIBODY IGG	85.86	86735		302
VARICELLA-ZOSTER AB(EIA)	170	86787		302
PRO-CALCITONIN	228.43	84145		301
1 25-DIHYDROXYVITAMIN D	209.09	82652		301
11-DEOXYCORTISOL	165	82634		301
PROTEIN C RESISTANCE	135.56	85307		305
APOLIPOPROTEIN B-100	77	82172		301
17-HYDROXYPROGESTERONE SERUM	134.62	83498		301
CA 19-9 ANTIGEN	28	86301		302
CENTROMERE ANTIBODY IGG	134.72	83520		302
ADENOVIRUS AB	71.71	86603		302
*CHLAMYDIA IGG SPECIES 2	57	86631		302
SPC ALPHA SUBUNIT	167	83519		301
TISSUE CULTURE BONE MARROW	1,006.00	88237		311
25-HYDROXYVITAMIN D2 & D3	183.86	82306		301
SPC PREGNENOLONE 17-HYDROXY	106	84143		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CHROMOSOME ANALYSIS 20-25 CELL	1,042.00	88264		311
ADRENOCORTICOTROPIC HORMONE	195	82024		301
MATERNAL AFP	131	82105		301
*APTT SENDOUT	36	85730		300
BILE ACIDS TOTAL	82	82239		301
ALDOLASE	49	82085		301
*CHLAMYDIA IGM SPECIES 2	59	86632		302
*ALBUMIN SERUM	52	82040		309
*REPORT	145	88291		311
ALDOSTERONE SERUM	111	82088		301
*ALBUMIN CSF	52	82042		301
ALK PHOS TOTAL SENDOUT	55	84075		301
ALK PHOS ISOENZYME SENDOUT	82	84080		301
SPC *CYTOMEGALOVIRUS ABS IGM	56	86645		302
ACETYL RECEPTOR BINDING AB	183	84238		301
*ALPHA-1ANTITRYPSIN	67	82103		301
FACTOR IX BETHESDA QUANT	349	85250		305
*CMV ABS IGG	110	86644		302
CMV ABS IGM	188	86645		302
*ALPHA-1ANTITRYPSIN PHENO	117	82104		301
SPC AMINO ACID SCREEN PLASMA	248	82128		301
*COCCI AB 1	25	86635		302
CHLAMYDIA IGM SPECIES 1	59	86632		302
*CHLAMYDIA IGG SPECIES 1	57	86631		302
CRYPTOCOCCU AG	42	87327		306
ANDROSTENEDIONE	147	82157		301
*CHLAMYDIA IGM SPECIES 3	59	86632		302
*IGG SUBCLASS 1	24	82787		301
ADENOSINE DEAMINASE	192.11	82657		301
SPC AMITRIPTYLINE	96	80335		301
ANGIOTENSION-1-CONVERTING	115	82164		301
BASEMENT MEMBRANE ZONE AB	169	88347		312
INTERCELL SUBSTANCE IGG AB	169	88347		312
BIOTINIDASE EA	63	82261		301
SPC ENA AB JO1	114.03	86235		302
CHROMOSE ANALYS ADDTL KAROTY	115	88280		311

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
ANTI-SMOOTH MUSC AB IGG SCR N	55	86255		302
TISSUE CULTURE AMNIOTIC	822	88235		311
CHROMOSOME AMINIO 6-12 COL	1,236.00	88269		310
*IGG SUBCLASS 2	24	82787		301
ANTIDIURETIC HORMONE	159	84588		301
*IGG SUBCLASS 3	24	82787		301
CADMIUM BLOOD	77	82300		301
ANTIMITOCHONDRIAL M2 AB	32	83516		301
PLATELET ANTIBODY INDIRECT	213	86022		302
PHOSPHOLIPID-CARDIOLIPIN IGM	120.3	86147		302
PHOSPHOLIPID-CARDIOLIPIN) IGG	120.3	86147		302
ANTISCLERODERMA ANTIBODY	65	86235		302
ANTI SS-A	65	86235		302
ANTI-SSB	65	86235		302
ANTITHROMBIN III ANTGN	57	85301		305
MUMPS ANTIBODY IGM	85.86	86735		302
ANTITHYROGLOBULIN ANTIBODY	117	86800		302
*METHEMOGLOBIN	80	83050		301
*SULFHEMOGLOBIN	72	83060		301
COPPER - URINE	94	82525		301
IGG SUBCLASS 4	70.86	82787		301
ACYLCARNITINE QUANT	155	82017		301
ARSENIC BLOOD	91	82175		301
SPECTROPHOTOMETRY	99.6	84311		301
*CHLAMYDIA IGG SPECIES 3	57	86631		302
*BARBITURATES	101	G0480		301
*PHENOBARBITAL	129	80184		301
C1 ESTERASE INHIBITOR	128	83520		301
C-PEPTIDE SERUM	57	84681		301
*ASO TITER SENDOUT	28	86060		302
DEOXYRIBONUCLEASE ANTIBODY	135	86215		302
LYMPH TRANSFORM	341.77	86353		302
CALCITONIN	148	82308		301
*LIPID PANEL SENDOUT	163	80061		301
*LIPID ELECTROPHORESIS	141	82664		301
ENTEROVIRUS PROVE&REVERS TRNS	225.78	87498		306

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CALCULUS ANALYSIS INFRARED	87	82365		301
*DIPHTHERIA TOXOID IGG AB	111	86648		302
LYME DISEASE AB WEST BLOT 1	141	86617		302
LYME DISEASE AB WEST BLOT 2	141	86617		302
*TETANUS TOXOID IGG AB	111.65	86774		302
CAROTENE SERUM TOTAL	68.56	82380		301
FACTOR VII INHIBITOR	739	85335		305
CARNITINE TOTAL/FREE QUANT	159	82379		301
SPC CATECHOL FRAC PLASMA	105	82384		301
CATECHOLAMINES FRACTION URINE	73	82384		301
*COCCI AB 2	25	86635		302
*COCCI AB 3	25	86635		302
COCCIDIODES ABS 4	71	86635		302
*BARTONELLA ABS 4	62.52	86611		302
CERULOPLASMIN	54	82390		301
*BARTONELLA ABS 1	62.52	86611		302
*BARTONELLA ABS 2	62.52	86611		302
*BARTONELLA ABS 3	62.52	86611		302
COXSACKIE ABS 6	73	86658		302
COXSACKIE ABS 2	73	86658		302
COXSACKIE ABS 3	73	86658		302
COXSACKIE ABS 4	73	86658		302
COXSACKIE ABS 5	73	86658		302
URINE CITRATE SEND OUT	134	82507		301
COXSACKIE ABS 2	73	86658		302
COXSACKIE ABS 3	73	86658		302
COXSACKIE ABS 4	73	86658		302
COMPLEMENT C2	127.51	86160		302
COMPLEMENT TOTAL SERUM CH50	143.1	86162		302
COPPER SERUM	94	82525		301
*CORTISOL URINE FREE	81	82530		301
NON-AMMONIATED LATEX IGE	65	86003		302
LATEX GLOVE IGE	65	86003		302
SPC AMMONIATED LATEX IGE	65	86003		302
SPC AMPLIFICATION HEP C	229	87521		306
GENOTYPE ANALYSIS HEP C	581	87902		306
*SGPG AUTOANTIBODY	128	83520		301
CYCLOSPORINE A BLOOD	110	80158		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
HIV GENOTYPING	764	87901		306
*ENTEROVIRUS ANTIBODY 2	73	86658		302
VIRUS ID EA ISOLATE	105	87254		306
VIRUS ID TISSUE CULTURE	200	87252		306
AMINOLEVULINIC ACID 24 HR UR	108	82135		301
*COXSACKIE B AB 1	73	86658		302
DHEA SERUM	253	82626		301
DHEA-SULFATE SERUM	275	82627		301
*ENTEROVIRUS ANTIBODY 3	73	86658		302
*ENTEROVIRUS ANTIBODY 4	73	86658		302
*ENTEROVIRUS ANTIBODY 5	73	86658		302
ENDOMYSIAL AB 1GA	298	86256		302
LAB SPC INTRINSIC FACTOR AB	95.34	86340		302
AT III ENZYMES	145.49	85300		305
EBV EARLY ANTIGENS	151	86663		302
EBV NUCLEAR ANTIGEN IGG	77	86664		302
PYRUVATE KINASE	129.78	84220		301
EBV VIRAL CAPSID ANTGN IGG	91	86665		302
*ASSAY OF ESTRADIOL	181.97	82670		301
*ASSAY OF ESTRONE	101	82679		301
SPC IMMUNO QN GM 1 AB	128	83520		301
ANTI-NEUTROPHIL AB	121	86021		302
ERYTHROPOIETIN	130	82668		301
LAB SPC ESTRIOL SERUM	109	82677		301
ESTROGEN RECEPTOR ASSAY FROZ	322	84233		300
EBV CAPSID AG IGM	91	86665		302
ETHOSUXIMIDE	114	80168		301
SPC *CULTURE CHLAMYDIA	119.27	87110		306
SPC *CULTURE TYPING	51.5	87140		306
*TISSUE CULTURE LYMPHCYTE	802	88230		310
GLIADIN ABS IGA	104.94	83516		301
GLIADIN ABS IGG	98	83516		301
FACTOR VIII ANTIGEN MULTIMERIC	308	85247		305
NEPHELOMETRY EACH NOT SPEC	92	83883		301
*MAG AUTOANTIBODY	128	83520		301
*MICROALBUMIN URINE	141	82043		301
*IMMUNOFIXATION (BJP)	167	86335		302
CHLAMYDIA PCR	149	87491		306

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
N. GONORRHEA AMPLIFIED DNA	147	87591		306
*DNA PROBE	161.23	88271		310
FREE FATTY ACIDS	94	82725		301
DRUG SCREEN - BLOOD	143.13	G0431		301
PROTOPORPHYRIN RBC QN	77.7	84202		301
G-6-PD	74	82955		301
SPC CHROMAT SPECTOMETRY QN	183.34	82542		301
*INTERP & REPORT	145	88291		310
GLOMERULAR BASE MEMB IGG SCRN	128	83520		301
URINE URIC ACID SEND OUT	112	84560		301
CYCLIC CITRULLINATED PEPTIDE	171	86200		301
GROWTH HORMONE	84	83003		301
URINE CALCIUM SEND OUT	53	82310		301
H.I.V. WESTERN BLOT	236	86689		302
SPC HIV-1 QN	289.92	87535		306
HAPTOGLOBIN SERUM QT	63	83010		301
MATERNAL HCG	151	84702		301
*IN SITU HYBRIDIZATION	203	88273		310
H. PYLORI IGA	117	86677		302
H. PYLORI IGG	117	86677		302
VON WILLEBRAND FACTOR ANTG	453	85246		305
HEMOGLOBIN ELECTROPHORESIS	113.28	83020		301
HEMOGLOBIN CHROMOTOGRAPHY	103.88	83021		301
H. PYLORI FECAL AG	110	87338		306
SPC *HEP A ANTIBODY IGM	106	86709		302
SPC *HEP A ANTIBODY TOTAL	34	86708		302
*STREP PNEUMONIAE SEROTYPE 1	76	86317		302
HEPATITIS BE ANTIGEN	62	87350		306
*STREP PNEUMONIAE SEROTYPE 5	76	86317		302
*STREP PNEUMONIAE SEROTYPE 4	76	86317		302
IGF BINDING PROTEIN - 3	128	83519		301
*STREP PNEUMONIAE SEROTYPE 7	76	86317		302
HISTO IMMUNFLUORSCENT STAIN	191.73	88346		310

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
HLA-B27	293	86812		302
HOMOCYSTEINE	85	83090		301
FACTOR VIII AHG	443	85240		305
HOMOVANILLIC ACID URINE	86	83150		301
HYDROXYINDOLEACETIC ACID, URIN	98.37	83497		301
INHIBIN	175.87	83519		301
*STREP PNEUMONIAE SEROTYPE 3	76	86317		302
IGD SERUM	153	82784		301
TOTAL PROTEIN SENDOUT	65	84155		302
*BLASTOMYCES AB 2	27	86612		302
IGE SERUM	116.56	82785		301
*BLASTOMYCES AB 1	25	86612		302
ASPERGILLIS AB	112	86606		302
*DESIPRAMINE SERUM	84	80335		301
SPC IN SITU HYBRIDIZA	314.6	88365		312
*IMIPRAMINE SERUM	84	80335		301
*PROTEIN TOTAL	65	84156		302
*TISSUE CULTURE	802	88230		310
FRUCTOSAMINE	69	82985		301
*CHROMSOME ANALYSIS	1,172.00	88262		310
THYROID STM IMMUN GLOB	254.26	84445		301
*IGG SERUM	86.81	82784		301
*IGG CSF	153	82784		301
HERPES SIMPLEX (PCR	100	87529		306
LECITHIN:SPINGOMYELIN RATIO	201	83661		301
PG	147	84081		301
*BRUCELLA ABS 1	59	86622		302
*BRUCELLA ABS 2	59	86622		302
*ANTIGEN DETECT POLY 2	122	87300		306
LEAD WHOLE BLOOD	33	83655		301
SPC CHROMOSOME CT 15-20/2	669.5	88262		311
IMMUNOGLOBULIN A (IGA) SENDOUT	62	82784		301
*ANTIGEN DETECT POLY 1	122	87300		306
FLOW CYTOMETRY CELL CYCLE/DNA	290.67	88182		311
MERCURY BLOOD	81	83825		301
SPC- ELECTRON MICRO DIAG	1,081.50	88348		312

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
METHYLMALONIC ACID, SER QUANT	239	83921		301
PROTEIN ELECTROPHORESIS	114	84166		302
CD4 / CD8 ABSOLUTE	128	86360		302
LAMBDA LIGHT CHAIN	92	83883		301
KAPPA LIGHT CHAIN	92	83883		301
*MORPHOMETRIC ANALYSISMANUAL3	380	88368		310
*MORPHOMETRIC ANALYSISMANUAL1	380	88368		310
*MORPHOMETRIC ANALYSISMANUAL4	380	88368		310
*STREP PNEUMONIAE SEROTYPE 2	76	86317		302
*STREP PNEUMONIAE SEROTYPE 6	76	86317		302
DIHYDROTESTOSTERONE	86	G0480		301
*THYROGLOBULIN ANTIBODY	177	86800		302
PHENYLALANINE	63	84030		301
METANEPHRINES 24 HR URINE	46	83835		301
TYROSINE	81	84510		301
HEPATITIS E ANTIBODIES	98.8	86790		302
*MORPHOMETRIC ANALYSISMANUAL2	380	88368		310
LEVETIRACETAM (KEPPRA)	159	82542		300
PYRUVIC ACID BLOOD	159	84210		301
MYELIN BASIC PROTEIN, CSF	126	83873		301
NEWBORN SCREEN #1 (INITIAL)	38	99001		300
NEWBORN SCREEN #2 (FOLLOW-UP)	38	99001		300
NEWBORN SCREEN #3 (ABNORMAL)	38	99001		300
*OLIGOCLONAL BANDS, SERUM	145	83916		301
ORGANIC ACID SCREEN	149.81	83919		301
URINE OXALATE SEND OUT	78	83945		301
*OLIGOCLONAL BANDING (CSF)	145	83916		301
LEGIONELLA ANTIBODY (EA)	44	86713		302
*PORPHOBILINOGEN QUANT	40	84110		301
*INFLUENZA ABS 2	57	86710		302
*INFLUENZA ABS 1	57	86710		302
PORPHYRINS QN & FRACTION URINE	264	84120		301
RAST MILK	37.08	86003		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
RAST EGG WHITE IGE	65	86003		302
RAST EGG YOLK IGE	65	86003		302
*INFLUENZA ABS 3	57	86710		302
INFLUENZA ABS 4	57	86710		302
PROGESTERONE SERUM	272	84144		301
*PENICILLIN G IGE	65	86003		302
PROGESTERONE RECEPTOR FROZEN	328	84234		301
*PENICILLIN V IGE	65	86003		302
*PROTEIN C ANTIGEN	135	85302		305
PROTHROMBIN TIME SENDOUT	61	85610		305
*AMOXICILLIN IGE	65	86003		302
LIVER KIDNEY MICROSOME ABS	133	86376		302
*AMPICILLIN IGE	65	86003		302
ELCTROPHOR FRACT/QUANT URINE	114	84166		301
PROTEIN S FREE	162.18	85306		305
ORTIC ACID, URINE	239	83921		301
RUSSELL VIPER VENOM (DILUT)	82	85613		305
RBC FOLATE	189	82747		301
IGF-1	107	84305		301
RENIN PLASMA	60	84244		301
RUBEOLA AB IGG	85	86765		302
*NORTRIPTYLINE	84	80335		301
CHROMOSME REPORT	160	88291		311
*HISTOPLASMA 3	49	86698		302
*HISTOPLASMA 2	49	86698		302
SMITH (ENA) AB IGG	113.63	86235		302
*HCV GENOTYPE	581	87902		306
PSA TOTAL SENDOUT	104	84153		301
SPC HEMOGLOBIN PLASMA	67	83051		301
SEROTONIN	156	84260		301
SWEAT TEST COLLECTION	195	89230		309
*HCV AMPLIFICATION	229	87521		306
*HISTOPLASMA 1	49	86698		302
*MYCOPLASMA ABS IGG	36	86738		302
*TOTAL TESTOSTERONE	71	84403		301
HIV-1 RNA PCR	380	87536		306
*MYCOPLASMA ABS IGM	36	86738		302
PLATELET ABS IGM	88	86023		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PLATELET ANTIBODY	116.6	86023		302
MUMPS AB IGG	85.86	86735		302
THYROXINE BINDING GLOBULIN	88	84442		301
HISTONE AB IGC	98	83516		301
*FREE TESTOSTERONE	133	84402		301
PSA FREE	106	84154		301
SPC *HERPES SIMPLEX TYPE 1	85	86695		302
SPC *HERPES SIMPLEX TYPE 2	53	86696		302
SPC *HERPES SIMPLX NON-SPC	88	86694		302
TACROLIMUS	85	80197		301
*THYROGLOBULIN	166	84432		301
THYROID PEROXIDASE AB	103	86376		302
*PARVOVIRUS ABS IGG	104	86747		302
VANILLYLMANDELIC ACID URINE	94	84585		301
*PARVOVIRUS ABS IGM	102	86747		302
SPC OXCARBAMAZEPINE	138.54	80183		301
HERPES SMPX II ANTIBODY IGG	95.79	86696		302
VITAMIN A SERUM	163	84590		301
*RUBELLA ABS, IGM	49	86762		302
SPC VITAMIN B1 (THIAMINE)	121.03	84425		301
TOPIRAMATE	105	80201		301
*TOXOPLASMA AB IGG	68	86777		302
*TOXOPLASMA ABS IGM	168	86778		302
VITAMIN B6, PLASMA	138	84207		301
*PROTEIN S ANTIGEN	351	85305		305
*LD ISOENZYMES	85	83625		301
VIT C (ASCORBIC ACID)	76.93	82180		301
VITAMIN E, SERUM	81	84446		301
*LD TOTAL	79	83615		301
LAMOTRIGINE LEVEL	49	82542		301
ZINC	75	84630		301
*UREAPLASMA UREALYTICUN CULTUR	118	87109		306
*MYCOPLASMA HOMINIS CULTURE	118	87109		306
VITAMIN B1, WB	121.03	84425		301
*VZV IGM	170	86787		302
*VZVIGG	170	86787		302
LAB SPC COLLAGEN CROSS LINKS	148.14	82523		301
*CRYOFIBRINOGEN	46	82585		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
METHOTREXATE	169	80299		301
IMMUNOGLOBULIN A (IGA)	153	82784		301
*PHOSPHATIDYLSERINE AB IGA	123	86148		302
*PHOSPHATIDYLSERINE AB IGM	65	86147		302
*PHOSPHATIDYLSERINE AB IGG	118	86147		302
*PHENOBARBITOL	129	80184		301
*PRIMIDONE	89	80188		301
*ELECTROPHORESIS #1	141	82664		301
SPC *CRYOGLOBULIN	61	82595		301
*ELECTROPHORESIS #2	141	82664		301
SPC *CK ISOENZYMES	117	82552		301
*ELECTROPHORESIS #3	141	82664		301
*UNSTABLE HGB SCREEN	64	83068		301
*SICKLING RBC	63	85660		301
*FLOW CYTOMETRY	287	88184		310
ACH RECEPTOR BINDING AB	167	83519		301
CHROMOSOME TISSUE CULTURE	802	88230		311
CHROMOSOME COUNT 15-20 CELLS	1,172.00	88262		311
ADDITIONAL KAROTYPES	270	88280		311
*CALCIUM CHANNEL BINDING AB N-	167	83519		301
*CK TOTAL	59	82550		301
HERPES SMPX I ANTIBODY IGG	82.81	86695		302
HERPES SIMPLEX VIRUS II IGM	98.58	86696		302
*CALCIUM CHANNEL BINDING AB P/	167	83519		301
*FLOW MARKER 1 RBC	287	88184		311
*FLOW MARKER 1 WBC	287	88184		311
*FLOW EA ADDIT MARKER WBC	170	88185		311
*FLOW EA ADDIT MARKER WBC	170	88185		311
*ACHR GANGLIONIC NEURONAL AB	167	83519		301
*STRIATED MUSCLE ABS	128	83520		301
*AMPHIPHYSIN	167	86256		302
*ANNA-1	167	86256		302
*MASS SPECTRO QUANT	214	83789		301
*ANNA-2	167	86256		302
*ANNA-3	167	86256		302
*CRMP-5-IGG	167	86256		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
*PCA-2	167	86256		302
*PCA-TR	167	86256		302
ACH RECEPTOR BLOCKING ABS	167	83519		301
ACH RECEPTOR MODULATING ABS	167	83519		301
*GAD65 AB ASSAY	135.54	86341		302
TISSUE TRANSGLUTAMINASE IGA	111	83516		301
TISSUE TRANSGLUTAMINASE IGG	111	83516		301
RI AUTOANTIBODY TEST	236	84182		301
*DNA PROBE 1	142	88271		310
*DNA PROBE 2	142	88271		310
*DNA PROBE 3	142	88271		310
*DNA PROBE 4	142	88271		310
*MOLECULAR CYTO 100-300 CELLS	243.42	88275		310
FECAL FAT QUANTITATIVE	148	82710		301
THRYOGLOBULIN AB	103.84	86800		302
*ALLERGEN IGE 1	65	86003		302
*ALLERGEN IGE 2	65	86003		302
*ALLERGEN IGE 3	65	86003		302
*ALLERGEN IGE 4	65	86003		302
*ALLERGEN IGE 5	65	86003		302
*ALLERGEN IGE 6	65	86003		302
*TISSUE CULTURE INOCULATION	71	87252		306
*SHELL VIAL INCL ID W IMMUNOFL	53	87254		306
*ALLERGEN IGE 7	65	86003		302
*ALLERGEN IGE 8	65	86003		302
*ALLERGEN IGE 9	65	86003		302
*ENA AB 1	143	86235		302
*ENA AB 2	143	86235		302
*ENA AB 3	143	86235		302
IMMUNOASSAY INFEC AGENT 1	76	86317		302
IMMUNOASSAY INFEC AGENT 2	76	86317		302
IMMUNOASSAY INFEC AGENT 3	76	86317		302
IMMUNOASSAY INFEC AGENT 4	76	86317		302
*ENA AB 4	143	86235		302
*ENA AB 5	143	86235		302
ENA AB 6	143	86235		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
*RUBELLA AB IGG	41	86762		302
YEAST SUSCEPTIBILITY PANEL	110.33	87186		306
*IMMUNOASSAY INFEC AGENT 5	76	86317		302
*IMMUNOASSAY INFEC AGENT 6	76	86317		302
*IMMUNOASSAY INFEC AGENT 7	76	86317		302
*IMMUNOASSAY INFEC AGENT 8	76	86317		302
VERY LONG CHAIN FATTY ACID	251	82726		301
*IMMUNOASSAY INFEC AGENT 9	76	86317		302
*IMMUNOASSAY INFEC AGENT 10	76	86317		302
*IMMUNOASSAY INFEC AGENT 11	76	86317		302
*IMMUNOASSAY INFEC AGENT 12	76	86317		302
*IMMUNOASSAY INFEC AGENT 13	76	86317		302
*IMMUNOASSAY INFEC AGENT 14	76	86317		302
*IMMUNOASSAY INFEC AGENT 15	76	86317		302
VITAMIN B2	124	84252		301
VONWILLEBRAND FACTOR (RCF)	449	85245		305
LUPUS ANTICOAGULANT (PTT)	84	85732		305
FACTOR II ASSAY	1,006.00	85210		305
FACTOR V ASSAY	577	85220		305
FACTOR VII ASSAY	352	85230		305
FACTOR X ASSAY	378	85260		305
FACTOR XI ACTIVITY, CLOTTING	183.17	85270		305
FACTOR XII ASSAY	1,006.00	85280		305
FACTOR XIII ASSAY	542	85240		305
DRUG TEST FEE	40			300
VENIPUNCTURE ROUTINE	24	36415		300
HANDLING FEE	38	99001		300
MOPATH PROCEDURE LEVEL 8	1,590.00	81407		300
URINE VOLUME MEASUREMENT EA	94	81050		307
24HR MICROALBUMIN URINE	78.28	82043		301
C7 COMPLEMENT ANTIGEN	127.51	86160		302
FIRST CELL MARKER	287	88184		311
CELL MARKER #2	170	88185		311
CELL MARKER #3	170	88185		311
CELL MARKER #4	170	88185		311
CELL MARKER #5	170	88185		311
CELL MARKER #6	170	88185		311
CELL MARKER #7	170	88185		311
CELL MARKER #8	170	88185		311

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
CELL MARKER #9	170	88185		311
CELL MARKER #10	170	88185		311
RICKETTSIA AB 1	120.58	86757		302
RICKETTSIA AB 2	120.58	86757		302
RICKETTSIA AB 3	120.58	86757		302
RICKETTSIA AB 4	120.58	86757		302
IMMUNOASSAY ANALYTE 1 QUANT	128	83520		301
IMMUNOASSAY ANALYTE 2 QUANT	128	83520		301
IMMUNOASSAY ANALYTE 3 QUANT	128	83520		301
IMMUNOASSAY ANALYTE 4 QUANT	128	83520		301
IMMUNOASSAY ANALYTE 5 QUANT	128	83520		301
*CELL SURFACE MARKER 1ST	287	88184		311
*CELL SURFACE MARKER ADDITIONA	170	88185		311
ACH RECEPTOR BINDING ABS	167	83519		301
ACH RECEPTOR MODULATING ABS	167	83519		301
CA CHANNEL BIND AB P/Q TYPE	167	83519		301
CA CHANNEL BIND AB N-TYPE	167	83519		301
STRATIONAL MUSCLE ABS	128	83520		301
RIA INFECTIOUS AGENT	167	83519		301
METANEPHRINES RANDOM URINE	148	83835		301
TISSUE CULTURE LYMPHO	433.28	88230		311
DNA PROBE	175	88271		311
HYBRIDIZATION 10-30 CELLS	139	88273		311
*CYTOGENETICS INTERP & REPORT	145	88291		311
PARATHYROID HORMON-RELATED PEP	387	82397		301
PATH IMMUNO QL SQ MLT	92	83520		302
ARSENIC URINE	91	82175		301
CADMIUM	77	82300		301
LEAD URINE	75	83655		301
MERCURY	81	83825		301
URINE CHLORIDE SEND OUT	58	82436		301
URINE CREATININE SEND OUT	66	82570		301
URINE MAGNESIUM SEND OUT	146	83735		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
URINE OSMOLALITY SEND OUT	84	83935		301
URINE PH SEND OUT	46	83986		301
URINE PHOSPHORUS SEND OUT	57	84105		301
URINE POTASSIUM SEND OUT	60	84133		301
SODIUM URINE	60	84300		301
URINE SULFATE SEND OUT	41	84392		301
CALIFORNIA ENCEPHALITIS IGG	59	86651		302
CALIFORNIA ENCEPHALITIS IGM	59	86651		302
EAST EQUINE ENCEPHALITIS IGG	59	86652		302
EAST EQUINE ENCEPHALITIS IGM	59	86652		302
ST. LOUIS ENCEPHALITIS IGG	61	86653		302
ST. LOUIS ENCEPHALITIS IGM	61	86653		302
WEST EQUINE ENCEPHALITIS IGG	58	86654		302
WEST EQUINE ENCEPHALITIS IGM	58	86654		302
FIBROBLAST	639.38	88233		310
*CYTOGENETICS INTERP & REPORT	145	88291		311
GROUP II STAINS	156	88313		310
TUMOR	310	88358		310
IN SITU HYBRID PROBE 1	551	88365		310
IN SITU HYBRID PROBE 2	548	88362		310
ENDOMYSIAL IGA	222	86255		302
RETICULIN IGA	222	86255		302
RETICULIN IGG	222	86255		302
GLIADIN PEPTIDE IGA	132	83520		302
GLIADIN PEPTIDE IGG	132	83520		302
TRANSGLUTAMINASE	132	83516		301
ENZYME ACTIVITY RADIOACTIVE	551	82658		301
HGB COPPER SULFATE NON- AUTO	39	83026		301
ASPERGILLUS AGENT ENZYME INFE	300	87305		306
CARBAMAZEPINE TOTAL	157	80156		301
CARBAMAZEPINE-1011 EPOXIDE	139	80299		301
LAB SPC CMV AMP PROBE	234.89	87496		306
MOLECULAR CYTO DNA PROBE 1	142	88271		311
MOLECULAR CYTO DNA PROBE 2	142	88271		311
MOLECULAR GENE 10-30 CELL	289.38	88273		311
CYTOGENIC REPORT	145	88291		311

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PHENYTOIN, TOTAL	141	80185		301
PHENYTOIN, FREE	94	80186		301
RUBELLA IGM ABS	91	86762		302
VITAMIN K	157	84597		301
HISTOPLASMA ATGN	166	87385		306
SINGLE STRANDED DNA	94	86226		302
METANEPHRINES PLASMA	173.84	83835		301
LEPTOSPIROSIS CULTURE	93	87081		306
SMEAR PRIMARY SOURCE	73	87206		306
SPC CHLAMYDIA TRAC AMP PROBE	156.56	87491		306
DESMOGLEIN AB #2	98	83516		301
NEPHLOMETRIC ANALYTE ASSAY #2	92	83883		301
IMMUNOFLUORES AGENT #2	188	86255		302
CODEINE FREE - QUANT	142	G0480		301
DIHYDROCODEINE FREE - QUANT	142	G0480		301
ETHYLMORPHINE FREE - QUANT	142	G0480		301
HYDROCODONE FREE - QUANT	142	G0480		301
HYDROMORPHONE FREE - QUANT	142	G0480		301
MORPHINE FREE - QUANT	142	G0480		301
NORCODEINE FREE - QUANT	142	G0480		301
OXYCODONE FREE - QUANT	142	80361		301
FLECAINIDE QUANTITATIVE LEVEL	138.54	80299		301
MOLECULAR CYTOGENETICS REPORT	145	88291		311
DNA PROBE #2	142	88271		311
DNA PROBE #1	142	88271		311
HYBRID INSITU 100-300 CELLS #1	218	88275		311
HYBRID INSITU 100-300 CELLS #2	218	88275		311
SPC CYTOGENETICS & MCG REPORT	145	88291		311
HIV-1 QUAL, PCR	281.72	87535		306
FRACTION / QUANT LIPIDS	101	83701		301
TRIGLYCERIDES SENDOUT	63	84478		301
RIA IMMUNOASSY #1	167	83519		301
RIA IMMUNOASSY #2	167	83519		301
RIA IMMUNASSAY #3	167	83519		301
SPC AMIODARONE QT	139	80299		301

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
SOLUBLE TRANSFERRIN RECEPTOR	183	84238		301
RABIES ABS, POST VACINE	76	86317		302
FLOW CYTO 1ST MARKER	192.79	88184		311
FLOW CYTO EACH ADDTL MARK	108.12	88185		311
FLOW CYTO EACH ADDTL MARKER	108.12	88185		311
H. PYLORI AB IGM	165	86677		302
COLLAGEN TYPE 1 C-TELOPEPTIDE	120.99	82523		301
OSTEOCALCIN	157	83937		301
SEX HORMONE BINDING GLOBULIN	93	84270		301
POLIO VIRUS AB TYPE I	73	86658		302
POLIO VIRUS AB TYPE II	73	86658		302
POLO VIRUS AB TYPE III	73	86658		302
DETECT AGENT NOS DNA QUANT	352.85	87799		306
DNA PROBE 1 CHIC 2 DELETION	142	88271		311
DNA PROBE 2 CHIC 2 DELETION	142	88271		311
DNA PROBE 3 CHIC 2 DELETION	142	88271		311
DNA PROBE 4 CHIC 2 DELETION	142	88271		311
INTERPHASE ANALYSIS 100-300 CEL	218	88275		311
INTERPHASE ANALYSIS 100-300 CEL	218	88275		311
CHIC 2 DELETION REPORT	145	88291		311
EGG WHITE ALLERGEN IGE	65	86003		302
MILK ALLERGEN IGE	65	86003		302
WHEAT ALLERGEN IGE	36.3	86003		302
OAT ALLERGEN IGE	65	86003		302
SOYBEAN ALLERGEN IGE	65	86003		302
OAK TREE ALLERGEN IGE	65	86003		302
TIMOTHY GRASS ALLERGEN IGE	65	86003		302
JN/KT BLUE GRASS ALLERGEN IGE	65	86003		302
COM SHT RAGWD ALLERGEN IGE	65	86003		302
LAMBS QUARTERS ALLERGEN IGE	65	86003		302
CAT EPITHELIUM ALLERGEN IGE	65	86003		302
DOG DANDER ALLERGEN IGE	65	86003		302
CLADOSPORIUM ALLERGEN IGE	65	86003		302
ALTERNARIA TENUIS ALLERGEN IGE	65	86003		302

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
D. FARINAE ALLERGEN IGE	65	86003		302
SPC ALMOND ALLERGEN IGE	65	86003		302
SESAME SEED ALLERGEN IGE	65	86003		302
PEANUT ALLERGEN IGE	65	86003		302
PECAN ALLERGEN IGE	65	86003		302
COCONUT ALLERGEN IGE	65	86003		302
RYE GRASS ALLERGEN IGE	65	86003		302
JN/KT BLUE GRASS ALLERGEN IGE	65	86003		302
COM SHT RAGWD ALLERGEN IGE	65	86003		302
ENGLISH PLANTAIN ALLERGEN IGE	65	86003		302
LAMB'S QUARTERS ALLERGEN IGE	65	86003		302
MAPLE BX ELDER ALLERGEN IGE	65	86003		302
OAK TREE ALLERGEN IGE	65	86003		302
ELM TREE ALLERGEN IGE	65	86003		302
TIMOTHY GRASS ALLEREGN IGE	65	86003		302
BIRCH ALLERGEN IGE	65	86003		302
CAT EPITHELIUM ALLERGEN IGE	65	86003		302
DOG EPITHELIUM ALLERGEN IGE	65	86003		302
PENECILLIUM ALLEREGEN IGE	65	86003		302
CLADOSPORIUM ALLERGEN IGE	65	86003		302
ASPERGILLUS ALLERGEN IGE	65	86003		302
ALTERNARIA TENIUS ALLERGEN IGE	65	86003		302
GREER HOUSE DUST ALLERGEN IGE	65	86003		302
HOLLISTER HOUSE DUST ALLERGEN	65	86003		302
D. PTERONYSSINUS ALLERGEN IGE	65	86003		302
D. FARINAE ALLEREGN IGE	65	86003		302
CODFISH ALLERGEN IGE	65	86003		302
CRAB ALLERGEN IGE	65	86003		302
SHRIMP ALLERGEN IGE	65	86003		302
TUNA ALLERGEN IGE	65	86003		302
LOBSTER ALLERGEN IGE	65	86003		302
WILLIAMS SYNDROME FISH REPORT	145	88291		311
ANALYZE 10-30 CELLS IN SITU	203	88273		311
DNA PROBE #1	142	88271		311

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
DNA PROBE #2	142	88271		311
CYSTATIN C	115	82610		301
CMV QN	334.1	87497		306
SPC IGM SERUM	34	82784		301
IGG SERUM	34	82784		301
ASO TITER SERUM	18	86060		302
SKIN PUNCH BIOPSY IMMUNO RPT	238	88323		310
DIRECT IMMUN FLORES IGG	192	88346		310
DIRECT IMMUN FLORES IGM	192	88346		310
DIRECT IMMUN FLORES IGA	192	88346		310
DIRECT IMMUN FLORES C3	192	88346		310
DIRECT IMMUN FLORES FIBRINOGEN	192	88346		310
BETA 2 GLYCO ANTIBODY EAC	107	86146		302
BETA 2 GLYCO ANTIBODY EAC	103	86146		302
BETA 2 GLYCO ANTIBODY EAC	103	86146		302
A.F.P. CSF	131	86316		302
SELENIUM, SERUM	109	84255		301
DNA PROBE EACH	142	88271		311
10-30 CELL ANALYSIS	203	88273		311
FISH DIGEORGE REPORT	145	88291		311
DNA PROBE EACH	142	88271		311
LYMPHOCYTE CULTURE	802	88230		311
CHROMOSOME ANALYSIS 15 - 20	1,172.00	88262		311
CONGENITAL CHROMSOME REPORT	145	88291		311
RETINOL BINDING PROTEIN	92	83883		301
CULT TYPE PULSE	176.23	87152		306
PANCREATIC ELASTASE	266	82656		301
LIPOPROTEIN A, SERUM	39	83520		302
HEPATITIS B VIRAL LOAD (QUANT)	247	87517		306
DNA PROBE 1	142	88271		311
DNA PROBE 2	142	88271		311
ANALYZE 10-30 CELLS	203	88273		311
SMITH-MAGENIS SYNDROME REPORT	145	88291		311
SPC CUTANEOUS IF ABS EA	233.2	88346		310
ELECTRON MICROSCOPY DIAGNOSTIC	721.41	88348		971
SPC ELECTRON MICRO DIAG	1,081.50	88348		310

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
PREGNENOLONE	173	84140		301
RUBEOLA IGM	85	86765		302
RIBOSOME P ABS IGG	134.72	83520		301
INSULIN ANTIBODIES	129	86337		302
GANGLIOSIDE GDA1 IGG	128	83520		301
SPC RAST ALLERG IGE QN SQ EA	22.45	86003		302
SPC RAST ALLERG IGE QN SQ EA	37.08	86003		302
SPC RAST ALLERG IGE QN SQ EA	37.08	86003		302
SPC RAST ALLERG IGE QN SQ EA	37.08	86003		302
EPSTEIN BARR VIRUS C.S.F. PCR	234	87798		306
TRYPTASE SERUM	128	83520		301
MYCOBACTERIUM TB PCR	260	87556		306
PLASMINOGEN ACTIVITY	228	85420		305
SIROLIMUS	78	80195		301
HISTAMINE LEVELS	175	83088		301
B. PERTUSSIS PT IGG	75	86615		302
STRONGYLOIDES AB IGG	105.8	86682		302
B. PERTUSSIS FHA IGG	87.55	86615		302
SHIGA TOXIN ATGN FECES	67	87427		306
IMMUNOASSAY QN OTHER NOS	141.71	83520		301
IMMUNOASSAY QN OTHER NOS	128	83520		301
NEUTROPHIL SPECIFIC ABS	188	86255		302
SPC INFECTIOUS AGT AMP PROBE	246.45	87798		306
CRYPTOSPORIDIUM ATGN FECES	101	87328		306
PORPHOBILINOGEN RANDOM UA QN	57	84110		301
TRYPSIN FECAL	54	84488		301
HERPES SIMPLEX TYPE 1	81	86695		302
RUBELLA AB	91	86762		302
TOXOPLASMA AB	170	86777		302
CMV AB	175	86644		302
ACTIVATED PROTEIN C RESISTANCE	132.53	85307		305
PLASMINOGEN ACTIVATOR INHIBITO	159.65	85415		305
MYOGLOBULIN URINE	76	83874		301
THIOPURINE METHYLTRANSFERASE	214	83789		301
ADDTL FISH PROBE (CCL)	50	88271		311

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ADD INTERPHASE IN SITU 100-300	218	88275		311
ADDTL FISH PROBES EACH (CLL)	25	88271		311
ADD INTERPHASE IN SITU 100-300	218	88275		311
PHOSPHOLIPID (CARDIOLIPID) IGA	120.3	86147		302
HEP. B CORE AB TOTAL	89	86704		302
BLASTOMYCES AB #1	72	86612		302
BLASTOMYCES AB #2	72	86612		302
HANTAVIRUS ANTIBODY ID #1	94	86790		302
HANTAVIRUS ANITBODY ID #2	94	86790		302
HERPES 6 AMP PROBE	284.85	87532		306
SPC THPY DRUG ASSAY OTH	151.43	80299		301
T3 REVERSE	107	84482		301
GUANIDINOACETATE	214	83789		301
CREATINE	65	82540		301
CREATININE, OTHER	66	82570		301
GUANIDINOACETATE, GCMS	214	83789		301
TOXOCARA ANTIBODY, ELISA	105.8	86682		302
ANTI-PHOSPHTIDYLSERINE IGM	97.85	86148		302
DNA PROBE #1	142	88271		311
DNA PROBE #2	142	88271		311
PSEUDOCHOLESTERASE SERUM	63	82480		301
DIBUCAINE NUMBER INHIBITOR	62	82638		301
WEST NILE VIRUS IGM	94.34	86788		302
WEST NILE VIRUS ANTIBODY	92.22	86789		302
INTERPHASE IN SITU HYBRIDIZATI	218	88275		311
GIARDIA ANTIGEN	54	87329		306
MYCOPLASMA P AMP PROBE	226.64	87581		306
IGA SUBCLASS I	234	82787		301
IGA SUBCLASS II	234	82787		301
IGA SUBCLASS III	234	82787		301
HAEMOPHILIUS INFLU TYPE B ANTB	234	86684		302
CMV CULTURE PRESUMPTIVE ID	220	87252		306
CMV DEFINITIVE ID	63	87254		306
SPC ORG ACID SGL QN	136.88	83921		301
FACTOR VIII VW MULTIMETRIC	575	85247		305
SPC INFECTIOUS AGT AMP PROBE	246.45	87798		306

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TSH RECEPTOR BINDING AB	175.87	83519		302
LEUKOCYTE HISTAMINE RELEASE	136.69	86343		302
IMMUNE CPLX ASY	138.32	86332		302
MURAMIDASE	108.12	85549		305
CRYOPRESERVATION FREEZE & STOR	162.09	88240		310
SPC IMMUNO QL SQ MLT	104.94	83516		302
LYMPHOCYTIC CHORIOMEN AB	83.21	86727		302
BARTONELLA AMP PROBE	267.23	87471		306
SPC THPY DRUG ASSAY OTH3	144.55	80299		301
RAST ALLERGEN IGE QN SQ EA	65	86003		302
SPC INHIBIN A	105.06	86336		302
CHEMILUMINESCENT ASSAY	109.18	82397		301
SPC IMMUNO QN RIA TRYPSIN	145.83	83520		301
SPECIAL STAIN I	146.26	88312		312
SPECIAL STAIN II	149.93	88313		312
INHIBIN B	112.36	82397		301
MCG DNA PROBE	142	88271		311
COXIELLA BRUNETII (Q FEVER) AB	60.77	86638		302
NOREPINEPHRINE	149.35	82542		301
SPC MORPHO ANLYS TUMOR MAN	245.14	88360		312
AMYLASE BLOOD	112.19	82150		301
AMYLASE ISOENZYMES	113.52	84999		301
TB TEST CELL IMM AG MEAS GAMMA	205	86480		302
IN SITU HYBRIDIZATION (FISH)	551	88365		310
SPC_LAB HISTOPLASMA AB	78.99	86698		302
SPC ALPHA-1ANTIRYPSIN PHNOTYPE	101.97	82104		301
SPC SPECTROPHOTOMETRY1	86.73	84311		301
NMDA RECEPTOR (NRI) FLOR AB SC	118.71	86255		302
SPC FLOW CYTOM 9-15 MRKR	206	88188		311
OSMOTIC FRAGILITY RBC INCUBATE	134.5	85557		305
NUCLEIC ACID QN HEPATITIS C	501	87522		306
C4 BINDING PROTEIN	106.68	86329		302
DESOXYCORTICOSTERONE	189.55	82633		301
TYROSINE	85.18	84510		301

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ESTROGEN TOTAL SERUM	143.29	82672		301
SPC VIRUS NOT ELSWHR SPEC	98.8	86790		302
COCCIDIODES ATGN DETECT	120.84	87449		306
HEMOGLOBIN OXYGEN AFFINITY	142.69	82820		301
FUNGUS AB NOT SPECIFIED	89.6	86671		302
B CELLS TOTAL	147.29	86355		302
MONONUCLEAR CELL ANTIGEN QN	124.63	86356		302
NATURAL KILLER CELLS TOTAL	141.11	86357		302
ENA AB RNP	113.63	86235		302
POLYMYOSITIS ABS	114.03	86235		302
HERPES SMPX I ANTIBODY IGM	82.81	86695		302
HERPES SMPX VIRUS REFLEX	287	86696		302
SPC FIBRINLY ACT NOS ANALYTE	215.18	85397		305
LYME DISEASE DNA, QL, RTPCR	212.04	87801		306
SPC ISLET CELL AB	135.54	86341		302
REFRACTOMETER	65	84157		301
ELCTROPHOR FRACT/QUANT CSF	114	84166		301
SPC IMMUNO TUMR AG QN4	138.02	86316		302
AMP PROBE CLOSTRIDIUM	193.27	87493		306
SPC INFECTIOUS AGT AMP PROBE	246.45	87798		306
SPC IMMUNO QL SQ MLT-	103.56	83516		302
CHEMISTRY UNLSTD PROC	87.13	84999		301
FIBRINOGEN AG	94.25	85385		305
SPC IMMUNO QN RIA	290	83519		301
DOPAMINE	154.14	82542		301
SPC A/A 6+ ACIDS QN	260.38	82139		301
COMPLEMENT C1 ESTERASE	97.83	86160		302
NUCLEIC ACID QN HERPES SMPX	172	87530		306
SPC -IMMUNO INFECTIOUS AB QN	71.02	86317		302
CALPROTECTIN STOOL	483	83993		301
BABESIA MICROTI ABS	60.7	86753		302
HLA-A29 DNA TYPING	252.09	81374		300
IMMUNO INFECTIOUS AB QN	75.68	86317		302
SPC COMPLEMENT AG EA CMP	127.51	86160		302
SPC ENA AB7	114.03	86235		302
SPC TISSUE CULT NONNEO LYMPH	802	88230		311

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CHROM ANALYS BREAKAGE	226.63	88249		310
CELL FUNC STM/DETEC BIOM	375.17	86352		302
SPC GASTRIN SERUM	120	82941		301
SPC MICROSOMAL ANTIBODY	106	86376		302
SPC PARTICLE AGG SCREEN	109.07	86403		302
SPC BLASTOMYCES ANTIBODY	71.65	86612		302
COCCIDIOIDES ANTIBODY	71.06	86635		302
PHOSPHOHEXOSE ISOMERASE	124.63	84087		301
ENZYME ACT NONRAD SUBS	443	82657		301
FUNGITELL(R) -B-D-GLUCAN	317	84311		301
MOPATH PROCEDURE LEVEL 9	655.5	81408		300
CULTURE TYPING ID NUCLEIC ACID	166.86	87149		306
MOPATH PROCEDURE LVL 9	2,057.76	81408		301
SPC RAST ALLERGEN IGG QN SQ EA	42.4	86001		302
ANALYSIS GENE FLT3 ITD VARIANT	448.7	81245		300
SPC PIS ANALY CFTR FULL SEQ	1,856.00	81223		300
SPC PIS MOPATH LEVEL 5	649.81	81404		300
HEAVY METALS PANEL BLD	123	82175		301
EUGLOBULIN LYSIS	259	85360		305
FDP/FSP AGGLUTINATION SQ	256	85362		305
FIBRIN DEGRADATION D DIMER QN	157.94	85379		305
ALPHA 2 ANTIPLASMIN	440	85410		305
PLASMINOGEN ACTIVATOR	399	85415		305
PLASMINOGEN NONANTIGENIC	258	85420		305
FAT LIPIDS FECES QL	73	82705		301
ANALYSIS GENE JAK2	444.64	81270		310
LEUKOCYTE ANTIBODIES	151.91	86021		302
CYSTIC FIBROSIS SCREEN	497	81220		310
SPC ANALYSIS BCR/ABL TR-PCR	434.6	81206		300
ANALYSIS GENE MTHFR COMMON	285	81291		310
ANALYSIS GENE F5 LEIDEN VAR	285	81241		310
ALPHA-GLOBULIN GENE SEQUENCE	945	81479		300
PRADER-WILLI/ANGELMAN SYN	450.5	81331		300
B-CELL GENE REARRANGEMENT	550.14	81402		300
B-CELL GENE REARRANG IGH AMP	581.88	81261		300

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SPC FRAGILE X DNA ANALYSIS	382.4	81243		300
TPMT GENOTYPE	481	81401		310
SPC POC CHROMOSOME MICROARRAY	2,247.20	81229		300
C1 INHIBIT FUNCTIONAL ACTIVITY	109	86161		302
HIV-2 DNA/RNA PCR QUAL	238.7	87538		306
SPC SPASTIC EVAL MOPATH 6	828.92	81405		300
SPC SPASTIC EVAL MOPATH 7	2,501.62	81406		300
ANALYSIS GENE REARRANG TRG	553.32	81342		300
HERPES SIMPLEX VIRUS ID	162.18	87255		306
NPM MUTATION ANALYSIS EXON 12	523.64	81310		300
T-CELL RECEPTOR BETA GENE AMP	601.49	81340		300
UNLISTED MOLECULAR PATH PROC	1,408.40	81479		300
IMMUNOLOGY UNLSTD PROC	163.98	86849		302
CYTOTOXIC AB SCREENING	342.38	86808		302
MITOCHON NUERO MOPATH 2	529.52	81401		300
ANALY GENE UGT1A1 COMMON VAR	479	81350		300
OTC UNL MO PATH PROC	340	81479		300
SPC BK & JC DNA VIRUS QUAL PCR	221.6	87798		306
SPC FLUORESCENT ANTIBODY SCR	121.03	86255		302
FTA-ABS	84.53	86780		302
CHROM IN SITU HYBRID 3-5 CELL	71	88272		311
CHROM COUNT BREAK 50-100/20/2	0.01	88248		310
SPC CAPILLARY BLOOD DRAW	25.44	36416		300
GRP A STREP DNA AMP PROBE	121	87651		306
TSH QD	261	84443		301
FT4 QD	112.2	84439		301
ENZYME CELL ACTIVITY	252.2	82657		301
CORTISOL QD	288	82533		301
VITAMIN D 25 HYDROXY	168	82306		301
PROLACTIN QD	169.92	84146		301
GRP A STRP NOS DNA AMP	237	87798		306
ANALY CYTOGEN MICROARRAY COPY	1,666.00	81228		310
SPC FOLLICLE STIM HORMONE	157	83001		301

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LUTEINIZING HORMONE (LH)	153.7	83002		301
SPC INFLIXMAB	151.43	80299		301
SPC NEUTROPHIL FUNC. OXI BURST	185	82657		301
ETHYLENE GLYCOL	139.71	82693		301
UNLISTED MOLECULAR PATH PROC	352.93	81479		300
CELIAC-ASSOC HLA-DQ TYPES	278.86	81376		300
MOPATH PROCEDURE LEVEL 7	1,410.00	81406		310
UNLISTED MOLECULAR PATH PROC	749	81479		300
SPC CORTISOL SALVIA EA LC/MS	122.49	82530		301
ZINC TRANSPORTER 8 AB	139.48	86341		302
RUFINAMIDE	108.12	80339		301
ORGANIC ACIDS URINE QN	251.72	83918		301
DIHYDROTTESTOSTERONE	86	G0480		301
ANALYSIS GENE IGK	507	81264		300
IF 1ST AB STAIN	233.2	88346		310
IF PER SPECIMEN EA ADDL STAIN	175.44	88350		310
PROTHROMBIN AB, IGG	145.83	83520		301
FLT3 GENE ANALYSIS TKD VARIANT	318	81246		300
EXOME SEQUENCE ANALYSIS	10,500.00	81415		300
EVEROLIMUS LEVEL	193.98	80169		301
IMMUNOHISTO/CYTO PER ANTIBODY	201	88341		310
PROTEIN ELECTROPHORESIS	105.79	84165		301
REDUCING SUBSTANCES, FECES	45.32	84376		301
GASTROINTESTINAL PATHO PANEL	815.02	87507		306
CULT STOOL SALMONELLA/SHIGELLA	126.83	87045		306
ENTEROVIRUS RNA, QUAL, PCR	225.78	87498		306
UNLISTED MOLECULAR PATHOLOGY	352.93	81479		310
BETA GLOBIN GENE DOSAGE ANYL	214.54	81363		300
RESPA VIRUS 12-25 TARGETS	892	87633		306
HLA II TYPING 1 LOC HR	481.24	81382		300
HERPESVIRUS 6 DNA, QUANT PCR	394.32	87533		306
T CELLS CD4 COUNT	152.64	86361		302

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VASOACTIVE INTESTINAL PEPTIDE	189.74	84586		301
ALPHA FETOPROTEIN L3	234.61	82107		301
ALLERGEN SPECIFIC IGE	23.47	86008		302
GENE ANALYSIS DUP/DEL VRNTS	214.54	81269		300
CORTICOSTERONE	112.02	82528		301
CNS DNA AMP PROBE TYPE 12-25	672	87483		300
MR-STAPH DNA AMP PROBE	198.22	87641		306
FACTOR VIII RELATED ANTIGEN	205.64	85244		305
EBV CAPSID AG IGA	111.3	86665		302
CARBOHYDRATE, URINE	59.74	84377		301
ZIKA VIRUS	65.25	87662		306
MOLEC AND CYTO INTERP AND RPT	263	88291		311
TISSUE CULT NONNEO LYMPH	933	88230		311
CHROM COUNT 15-20/2	1,804.00	88262		311
CHROM ADD KARYO	334	88280		311
METHOTREXATE NOS	158	80299		301
MCG CHROM INSITU 3-5	280	88272		311
TISSUE CULT TUMR	1,878.00	88239		311
DETECT AGENT NOS DNA AMP	221.6	87798		306
SPC ALPHA 2 ANTIPLASMIN	214	85410		305
CLAM ALLERGEN IGE	65	86003		302
DRUG SCREEN SGL MECONIUM	113.3	80101		301
PROTHROMBIN (F2) MUTATION ANAL	254.4	81240		310
HSV TYPE 1, 2 DNA RT-PCR	180	87529		306
A. FUMIGATUS IGE (M3)	37.08	86003		302
BODY FLUID CELL COUNT W DIFF	176	89051		309
FECAL FAT QUALITATIVE	73	82705		301
ASPERGILLUS ANTIGEN	300	87305		306
CLOT FACTOR VIII AHG 1 STAGE	434	85240		305
FACTOR INHIBITOR TEST	210.29	85335		305
PED VENIPUNCTURE	24.72	36415		300
THYROID BX GUIDANCE S&I	1,304.00	76942		402
THYROID BX PROCEDURE	937	60100		361
ABDOMEN COMPLETE SONO	1,412.00	76700		402
ABDOMEN LIMITED	1,230.00	76705		402
ABD PARACENTESIS INTL	538	49080		361

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PARACENTESIS PROCEDURE SUBSEQU	651	49081		361
CHEST PLEURAL EFFUSION	374	76604		402
NEONATAL HEAD SONO	967	76506		402
NEONATAL HEAD SONO/PORTABLE	967	76506		402
GALLBLADDER SONO	1,230.00	76705		402
HEPATIC/LIVER	1,230.00	76705		402
PELVIC NON-OB TRANSAB	1,326.00	76856		402
PERCUTAN CHOLECYSTOTOMY DRAIN	3,008.00	47490		361
US PERCUT DRAIN ABSCESS S&I	1,418.00	75989		402
PYLORUS ULTRASOUND	1,230.00	76705		402
RENAL (ROUTINE)	718	76770		402
TESTICULAR SONO W COLOR DOP	943	76870		402
ECHO HEAD AND NECK SOFT TISSUE	647	76536		402
URINARY BLADDER	943	76857		402
CAROTID DOPPLER BILATERAL	1,084.00	93880		921
CAROTID DOPPLER UNILATERAL	708	93882		921
PENILE ULTRASOUND W/DOPPLER	719	93980		921
PELVIC OB > 14 WEEKS TRANSABD	706	76805		402
PELVIC OB <14 WKS TRANSABD	553	76801		402
PELVIC OB TRANSVAGINAL	542	76817		402
PREGANCY LIMITED	423	76815		402
ADDL GEST FETAL ANATOMY DTAIL	439	76812		402
PREGNANCY W FETAL DTL ANATOMY	806	76811		402
ADDITIONAL GESTATION < 14 WKS	378	76802		402
DOPPLER PERIPH ART LWR EXT UNI	270	93926		921
PELVIC NON-OB TRANSVAGINAL	672	76830		402
US COMP RPR ART PSEUDO-ANEUR	1,487.00	76936		402
INTRAOPERATIVE SONO	891	76998		402
ABDOMINAL ARTERY W/DOPPLER	595	93975		921
ABDOMINAL VEIN W/DOPPLER	595	93975		921
SPINAL CANAL & CONT NWBORN	461	76800		402

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ECHO INFANT HIPS	959	76886		402
RENAL BX GUIDANCE S&I	1,304.00	76942		402
PROSTATE BX PROCEDURE	1,562.00	55700		361
PROSTATE BX GUIDANCE S&I	1,304.00	76942		402
LIVER BX PROCEDURE	1,653.00	47000		361
ULTRASOUND GUIDANCE	1,304.00	76942		402
US GUID NDL/CATH PLACE S&I	1,304.00	76942		402
RENAL BX PROCEDURE	1,653.00	50200		361
LIVER BX GUIDANCE S&I	1,304.00	76942		402
DUPX PERIPH VEIN LWR EXT UNI	898	93971		921
DUPX PERIPH VEIN UPPR EXT UNI	898	93971		921
PERIPH ARTRY DOPP UP EXTRM UNI	701	93931		921
DOPPLER TRANS-CRANIAL (ADULT)	1,024.00	93886		921
DUPLEX HEMODIALYSIS ACCESS	616	93990		921
POPLITEAL FOSSA W COLOR	942	76880		402
PERIPH ARTERY DOP UP EX BILAT	974	93930		921
PERIPH ARTERY DOP LWD EX BILAT	406	93925		921
PERIPH VEIN DOPP UP EXT BILAT	1,559.00	93970		921
PERIPH VEIN DOPP LWR EXT BILA	1,559.00	93970		921
FOUR EXTREMITY VENOUS DOPPLER	1,559.00	93970		921
US PELVIS NON-OB LTD	943	76857		402
MAP VESSEL HEMODIAL ACCESS	882	G0365		402
ASP FINE NDL W/IMAGING GUIDE	952	10022		361
US EXTREMITY NON VASCULAR COMP	1,183.00	76881		402
US EXTREMITY NON VASCULAR LTD	719	76882		402
BX/EXC LMPH NODE SUPER NDL	1,390.00	38505		361
ABD PARACENTESIS WITH IMAGING	1,018.00	49083		361
US BX MUSCLE NEEDLE PERC	1,294.00	20206		361
USD BX BONE NEEDLE SUPERFIC	1,454.00	20220		361
BX BONE NEEDLE DEEP	1,960.00	20225		361
BX GLAND SALIVARY NEEDLE	1,123.00	42400		361
BX LIVER W/PROC	880	47001		361

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H- Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
BX MASS ABDOMINAL PERC	1,571.00	49180		361
BX LUNG/MEDIASTINUM PERC NDL	1,643.00	32405		361
BX TISSUE PELVIS/HIP SUPERFIC	1,700.00	27040		361
INJ SCLERO SOLN VEIN SGL	355	36470		361
SPINAL PUNCTURE, THERA, DRAIN	1,416.00	62272		361
US INJ SCL SOLN VEIN LMB/TRNK	240	36468		361
US GUID/PERICARDIOCENT S&I	490	76930		402
THORACENTESIS W/IMAGING GUID	1,378.00	32555		361
US GUIDED VASCULAR ACCESS	703	76937		402
ASP/INJ CYST RENAL PERC	1,330.00	50390		361
USD INJ INTRALESNAL <7 LESNS	171	11900		361
BX BREAST DVC US ADD LESION	1,710.00	19084		361
US GUIDED NEEDLE BX S&I	895	76942		402
PLEUR DRAIN W/INSRT CATH W/IMG	1,489.00	32557		361
SPINAL FLUID TAP DIAGNOSTIC	1,447.00	62270		361
ASP CYST BREAST	693	19000		361
VASC EMBLZ/OCCL ART S&I	12,356.00	37242		361
DRAIN CYST OVARIAN ABD APPR	4,343.00	58805		361
VASC EMBLZ/OCCL VEN NO HEMO SI	21,906.00	37241		361
FLUID COLLXN DRAIN CATH PERI	5,054.00	49406		361
DUPLEX PENILE VESSELS LTD	400	93981		921
INJ EDRL LUMBAR/SACRAL US GUID	2,637.00	0230T		402
US INTRAOPERATIVE	1,162.00	76998		402
FLUID COLLECT ST PERC IMAGE	1,055.00	10030		361
US BREAST UNILAT COMPLETE LT	1,054.00	76641	LT	402
US BREAST LMTD W/AXILA LT	1,054.00	76642	LT	402
US BREAST UNILAT COMPLETE RT	1,054.00	76641	RT	402
US BREAST UNILAT LIMITED RT	299	76642	RT	402
BX LESN SKIN/SUBQ/MUCOUS SGL	325	11100		361
US BREAST LMTD W/AXILA RT	1,054.00	76642	RT	402
US KIDNEY TRANSPLANT W/DOPPLER	675	76776		402
INS CATH CV NON-TUNL <5 YRS	1,758.00	36555		361

Description	Primary Price	*H-Medicare HCPCS - CPT/HCPCS Code	*H-Medicare HCPCS - Modifier	*A - Medicare Rev Code - Revenue Code
US CONSCI SED S/MD >5YR 1ST 30	291	99152		761
CH ARTHROCENT JT MAJOR W/US	1,235.00	20611		361
US BREAST BX US 1ST LESION	2,375.00	19083		361
ABLAT CRYOSURGICAL FIBROADE	3,650.00	19105		361
INST NEPHRO CATH DRAIN S&I	2,565.00	50432		361
CHEMODENERV SALIV GLANDS BILAT	530	64611		361
CONSC SED <5Y 1ST 15 MIN	291	99151		761
USD INS CATH CV NON-TUNL >5YRS	1,758.00	36556		361
ASP ABSC/HEMA/CYST/BULLA	450	10160		402
US ABD AORTA SCRN AAA	665	76706		402
INCISION/REM FB SUBQ CPLX	3,665.00	10121		361
SCLERO LYMPHATIC FLUID COLL.	1,450.00	49185		361
INCISION/REM FB SUBQ SMP	864	10120		361
INJ ANES NRV GREAT OCCIPITAL	930	64405		761
INJ ANES GANGLION SPHENOPALAT	725	64505		761
CATH/CANN ARTERY PERC	595	36620		761
INJ ANES NERVE INTERCOSTAL MLT	1,720.00	64421		761
USD THERAPY/DX IV PUSH SAME	170	96376		761
THERAPYPRO//DX IV PUSH ADDIT	191	96375		761
THERAPYPRO/DX IV PUSH INITIAL	238	96374		761
INJ ANES NERVE SCIATIC SGL	1,500.00	64445		761
EYE US	395	76512		402
SONO GUID FOR TISSUE ABLATION	519	76940		402