

Addendum 1
Community Healthcore
Request for Proposals
RFP 1004-26, Addendum 1
Revenue Cycle Management

December 4, 2025

The posted RFP # 1004-26 Revenue Cycle Management has been modified as follows:

1. Attached are the final answers for the Questions received Monday, December 1, 2025.
2. Due the date has been extended to 11 am Central Time, Wednesday, December 10, 2025. The Public Opening is moved to 1:30 pm Central Time, Wednesday, December 10, 2025 at the Woodbine Location: 107 Woodbine Place, Longview Texas 75601.
3. The Scoring of the RFP has been changed as follows:

Attachment A, **Section III, Scoring of the RFP**

B. Proposals will be scored using the following criteria:

Description	Max Score
Service Delivery	
• Specification for Delivery -Describe the services and explain how you meet specification provided.	400
• Qualifications / experience/ staffing -described how most qualified/ experience with similar/ and staffing to meet needs.	300
• Cost and Invoicing - Best value for organization	200
• References -as requested	100
• Additional Requirements	Acknowledge

Based upon the total RFP Score (see above table), the top 2 RESPONDERS will be invited to present and discuss their proposal with the evaluation team. These RESPONDERS will have the

option to meet virtually or in-person. Each of the top 2 RESPONDERS will have up to 45 minutes to present key aspects of their proposal and up to 1 hour to answer specific questions from the evaluation team. Up to an additional 500 points will be awarded based upon their presentation, answers and best value as determined by the Center.

Center reserves the right to invite more, or fewer finalists based upon the range of scores.

4. 5.1 Term of the Contract. This contract will commence on the date listed in Section I, **Contract Effective Date**. It will end on August 31, 2026, with three more renewals for the initial procurement (August 31, 2029) and the option for two, two-year extensions based upon excellent performance and mutual agreement.

All other documents in the RFP remain the same.

QUESTIONS & ANSWERS

#	Question	Answer
1	1. Number of Providers: a. Physicians: b. Nurse Practitioners/Physician Assistants: c. Other:	a. 10 b. 14 c. 96 non-licensed clinicians d. 51 licensed clinicians
2	2. Average Monthly Visits	9,500 Behavioral Health/SUD/ECI (Credible); 300 Primary Care (NextGen)
3	3. Average Charges	<i>\$43,712.86 = Total Charges for June 2025-August 2025 / 90 days – Credible</i> <i>Average Charge is \$158.37</i> <i>\$2,104.02 = Total Charges for June 2025-August 2025 / 90 days NextGen – Next Gen</i> <i>Average Charge is \$116.60</i>
4	4. Average Monthly Receipts	\$473,000 (includes both NextGen and Credible)
5	5. Current Accounts Receivable (A/R) Status	<i>\$325,322.40 (June 2025 – August 2025) – Credible (NO SELFPAY)</i> <i>\$65,679.29 (June 2025 – August 2025) – Next Gen (NO SELFPAY)</i>
6	6. Payor Mix	NextGen - 36% commercial insurance; 30% self-pay; 18% Medicaid/MCO; 10% Medicare; 6% non-contracted commercial Credible – 8% commercial insurance; 50% Medicaid; 2% Medicare; 14% self-pay; 26% contracts/grants
7	7. Medicaid Encounter Rate	\$206.26
8	8. Medicare (PPS) Encounter Rate	\$204.62
9	TERM OF THE CONTRACT: This contract will commence on the date listed in Section I, Contract Effective Date. It will end on August 31, 2029, with the option of two, two-year extension.	The date of August 31, 2029, marks the end of the initial procurement with the option of two, two-year extensions. So the contract is expected to run for 3.5 years up to 7.5 years based upon performance.

	There are references to August 31, 2029 and August 31, 2028 for a term of the contract. Can you clarify which date would be in the final contract?	Contracts themselves run fiscal year to fiscal year September 1 – August 31 and are renewed each year by the Board of Trustees in the first month of the new fiscal year based upon available funding. The Center anticipates that with a strong Revenue Cycle Management partner, the Successful Vendor will help maximize revenue and stabilize 3 rd party collections.
10	Section A - II a. Patient Eligibility & Benefits Verification. Is this a requirement for the award of the RFP?	Yes. Front-desk staff will complete the initial verification and screening; however, the vendor will be expected to resolve inaccuracies or eligibility issues.
11	Section A - II C. Pre-Authorization. Is this a requirement for the award of the RFP?	We will remove pre-authorizations as a requirement; however, this would be considered a value-added option.
12	Section A - II K. Client Statements. Can you clarify in more detail and expectations of statements?	Primary care statements are automatically mailed out by a third-party vendor. The successful vendor, when given a file for Behavioral Health and SUD, will mail statements to the responsible party. All statements (primary care, behavioral health, SUD) will have the successful vendor's information on all client statements for billing questions and/or payment options.
13	Section A - III C. Ability to have reports based on the following criteria: gross charges, contractual adjustments, and bad debt write-offs monthly. Fiscal services use these reports to post revenue, adjustments, and bad debt write-offs on the Financial statements. Ability to reconcile back to AR reports monthly Can current EHR systems provide these reports? We just want to be sure the data can be reported in the systems.	The successful vendor will be able to pull information from our EHRs (NextGen and Credible) and present this information in a reportable format. The raw information is contained in the EHR systems but we don't currently have specific reports to reflect gross charges, contractual adjustments, and/or bad debt write-offs.
14	Section III - A 7. The cost of any Community Healthcore employee training associated with the acquisition. Can you detail what training would be required? We will be co-managing NextGen and Credible and will provide any assistance needed throughout the contracting	The Center will not require and track any specific training for the Successful Vendor's employees; A Business Associates Agreement will grant access to confidential information. The Center would expect that the Successful

	time. Just want to clarify if there are any other areas where there would be a training expectation.	Vendor to train its staff in HIPAA, Fraud, Confidentiality and other similar topics.
15	Specifications for Delivery - Are these already set up in Credible and NextGen? Are you just needing to review these items? j. Patient Statement Set UP k. Claims Edit Set Up l. Insurance Company Log in Set UP m. Payor ID Set Up n. Eligibility Set Up	The successful vendor will review our current setup in both EHRs and provide guidance for improvement, as necessary.
16	I wanted to confirm the intent for - l. Review and provide feedback on the current setup of locations, including validating and inputting the following: Is the requirement - to confirm the current setup and configurations in NextGen and Credible are set up correctly?	The successful vendor will review our current setup in both EHRs and provide guidance for improvement, as necessary.
17	Please confirm that the final RFP will need to be delivered via email to RFP1004-26@communityhealthcore.com, as opposed to being sent via mail. If final RFP needs to be delivered via mail, please confirm the exact address for submission.	As stated in the RFP, please submit proposals via email to a secure email site at: RFP1004-26@communityhealthcore.com Please label the email subject: “Revenue Cycle Management”
18	How many credentialed Providers are there at Community Healthcore?	See the response to question #1.
19	What is the current RCM model (ex: In-house, outsourced, or hybrid)?	We currently use a hybrid model.
20	If outsourced – is there a contractual term/expiration/renewal date?	We currently outsource the Primary Care portion of the claims. The Successful Respondent will be responsible for all operations including both primary care and

		behavioral health/SUD/ECI. Notice to current vendor will be tied to the start of any new contract.
21	Monthly averages (last 6-12 months) Gross charges Gross patient payments Gross insurance payments Total adjustments (contractual v. non-contractual)	See Answers to 21-23 attached
22	What is the monthly visit/encounter volume?	9,500 Behavioral Health/SUD/ECI (Credible); 300 Primary Care (NextGen)
23	Can you share total A/R by payer with aging buckets?	See Answers to 21-23 attached
24	What is the payer mix? = Payers as a percentage of the business	See the response to question #6.
25	RCM staffing breakdown (if in-house or hybrid): Number of insurance A/R reps Number of patient A/R reps Number of coders Number of payment posters Number of pre-reg (eligibility + pre-cert) reps Number of charge entry reps	With our hybrid model, there is an in-house team of six (6) and a contracted team of two (2).
26	Plans for current FTEs (if applicable) Exodus Rebadging opportunities	No formal decision has been made at this time. The Center is open to proposals regarding rebadging staff.
27	Decision making details: Can you share the names/ titles of the decision-making stakeholders? Is there a buying committee or board?	No. We can share there is an evaluation team of a cross-section of staff who will be reviewing and scoring the proposals. A recommendation will be made to the Center's Board of Trustees who will vote on that recommendation.
28	Understanding that Health Prime will utilize Credible and Nextgen, is the expectation that these solutions will be used for reporting, or....is there a willingness to establish an interface from both solutions into Health Prime's environment + technology for enhanced analytics and data visualization?	We would be open to suggestions.

29	<p>1. What level and type of interaction or engagement should bidders anticipate if they choose to attend the Public Opening scheduled for December 9, 2025, at 1:30 PM in the Ben Ban Room, 107 Woodbine, Longview, TX?</p> <p>Specifically:</p> <ul style="list-style-type: none"> • <i>Will bidders have an opportunity to ask questions or seek clarification during the opening?</i> • <i>Will any additional information beyond the proposal submissions be shared at this event?</i> • <i>Is attendance at the Public Opening considered advantageous or recommended for bidders in terms of evaluation or relationship-building?</i> • <i>Will attendance be documented or noted as part of the procurement process?</i> • <i>Are there any restrictions on communication or engagement during the opening?</i> 	<p>It is a public opening, and Vendors are welcomed to attend. The purpose is to formally identify the vendors who submitted their proposals on time. No evaluation of the bids is done at the opening and members of the evaluation team typically do not attend.</p> <ul style="list-style-type: none"> • No • No • No • There is a sign in sheet for all participants at the opening as well as a record of the Proposals Received. • Yes. The purpose of the opening is to publicly share who submitted bids. Subject Matter Experts would not be in attendance to answer questions regarding current operations; that is the purpose of this Q&A. Contracts Staff will be present to answer any questions regarding the process in broad terms. These can also be emailed after the opening.
30	<p>2. In Attachment A Scope of Work under Section A, pg 2, <u>Specifications for Service Delivery</u>, are you billing out of both Credible and NextGen platforms?</p> <p>1. If yes, what is the number of visits per system for FY 2023 and 2024?</p>	<p>Yes, we are billing out of both Credible and NextGen.</p> <p>See response to question #2.</p>
31	<p>3. Will awarded proposer be allowed to connect to Community Healthcore database(s) remotely to perform RCM operations and other contracted functions?</p>	<p>Yes.</p>
32	<p>4. What clearinghouse(s) does Community Healthcore currently utilize for claims processing and receipt of ERA's and with which EHR platform?</p>	<p>Credible uses Claim MD. NextGen uses Waystar.</p>
33	<p>5. Does Community Healthcore currently have active licenses for additional ancillary NextGen products? If yes, please indicate.</p>	<p>1. Yes 2. Yes</p>

	<p>Examples:</p> <ol style="list-style-type: none"> 1. Real-Time eligibility (Formally known as RTS) 2. In-line claim edits (Formally known as Real-Time claim edits) 3. NextGen Financial Analytics 4. Luma – portal 5. NextGen Payment Management Services (If clearinghouse is Waystar) 6. NextGen Rules Engine 	<ol style="list-style-type: none"> 3. Yes 4. Yes 5. No, not that we are aware of. 6. No
34	6. Can you provide annual third-party payer revenue for FY 2023 and 2024?	See response to #4.
35	7. Can you indicate the number of billable encounters/visits to third-party payers for FY 2023 and 2024?	See response to #22
36	8. Can you indicate the number of billable encounters/visits for self-pay for FY 2023 and 2024?	In FY2023, we were working under two EHRs (one of which we no longer use), and we don't believe it is representative data during that transition. Therefore, we can report the self-pay encounter/visit data for FY2024 was 19,838.
37	9. What is your current payer mix (Medicare, Medicaid, Commercial, self-pay, grants, etc)?	See response to #6.
38	10. What system(s) do you currently utilize to generate and send patient statements?	See response to #12.
39	11. How many patient statements are sent monthly?	For NextGen only, 245 statements are sent monthly. Currently, no statements are being sent for Behavioral Health/SUD (Credible).
40	<p>12. Will the Scope of Work (SOW) include all outstanding AR?</p> <p>a. If yes, could you please include an aging analysis by financial class?</p>	A firm decision regarding this question has not been made at this time.
41	13. How many locations are you providing services for?	Community Healthcore provides services from eighteen different locations across a ten-county catchment area.
42	14. When is the start of your fiscal year?	September 1st

43	15. Are you currently using a bad debt agency? If yes, what vendor is used?	No, not currently.
44	16. In Attachment A, under section A. Specifications for Service Delivery (pg 2) could you clarify and expand on what is being requested of the contractor?	Attachment A. Section A is a list of deliverables that the Successful Vendor will provide as a part of this contract. Beyond the specific questions that have been asked and answered in this Q&A, no additional details will be provided.
45	17. Please expand on what your expectations are on "limited" in Section A, IV, c (pg 3) regarding Provider CPT/ICD-10 guidance.	The Center anticipates that as the Successful Vendor is processing claims it will identify trends in CPT/ICD 10 coding. Training in best practices to appropriate staff regarding this is expected. Limited is to imply it is not daily but perhaps a topic that is covered during each quarterly meeting.
46	18. Please expand on what your expectations are on Section A, IV, e (pg 3) regarding training and technical assistance.	The successful vendor will identify areas for improvement and efficiencies with front-desk operations and assist Community Healthcore to train staff in those areas.
47	<p>19. What are the expected services related to patient account management/Accounts Receivable?</p> <p>Ex: Will the awarded bidder be expected to receive and initiate patient phone calls, regarding outstanding patient balances, insurance issues, payment plan management, or declined payments, etc. If yes, are translation services required and for what languages?</p> <p>If so, are translation services required and for what languages?</p>	<p>The successful vendor will be expected to participate in this process. Community Healthcore's front-desk staff will complete the initial verification and screening; however, the vendor will be expected to resolve inaccuracies or eligibility issues. This could include (but not limited to) receiving patient phone calls regarding outstanding patient balances, insurance issues, and payment plan management.</p> <p>Regarding language translation services, the vendor will be expected to have access to this service. In our region, the predominant language second to English is Spanish. However, there may be situations where translation is needed for another, less common, language.</p>
48	Who will be contacting references - I just want to make sure if a message is left, the reference will know the importance of returning the call/ email.	Lee Brown will be the lead regarding reference checks.

	<p>1.E. References Community Healthcore requests to RESPONDER to supply the following with this RFP:</p> <ol style="list-style-type: none"> 1. Provide three (3) references where similar services have been received by their firm. 2. Must be professional references of similar. 3. RESPONDERS who have the best scores will have their references checked. <p>Include name of firm, address, telephone number, email and name of representative</p>	<p>When leaving a message Mr. Brown will state that this is a call regarding a reference check for ABC company, please call me back at <u>xxx-xxx-xxxx</u>.</p> <p>It is recommended that the Vendor verify contact information prior to submitting proposal so references are aware that Mr. Brown will be making a reference check.</p>
49	<p>Would it be acceptable for Health Prime to provide proof of insurance coverages, as opposed to the full policies for the RFP? Our fear is that the full policies may contain clauses that could be misinterpreted or create unintended obligations if reviewed out of context. Health Prime would be happy to schedule a meeting to walk through the full policy and addendums.</p>	<p>YES, a current <u>Declaration of Insurance Coverage</u> from the Insurance Carrier is sufficient.</p>
50	<p>Can Health Prime provide redlines to the Services Contract?</p>	<p>Yes, RESPONDERS may redline the Services Contract. Know that Community Healthcore is a unit of local government and is unable to indemnify the Vendor by Texas State Law. There is also other required language that must be retained in the contract. The Center is willing to negotiate in good faith and the Center must accept any proposed language.</p> <p>In the event of Community Healthcore is unable to reach contractual agreement with the first choice, the Center will move on to the second choice.</p>
51	<p>Can you explain the need for attachment B. We do not have a relationship with any local officials at any capacity. How do we reply to the negative in filling out the document?</p>	<p>As a unit of local government we are required to check for Conflicts of Interest. If none, on ATTACHMENT B CIQ, list name of vendor in box 1, write None (or Not Applicable) for name of Officer in box 3, and sign box 7.</p>

52	Systems Access and Configuration Does the Center expect the vendor to directly access and configure the Credible and NextGen platforms, or will system configuration and permissions be managed internally by the Center's IT department?	Community Healthcore does not expect the vendor to configure Credible or NextGen platforms. However, we are open to the vendor's recommendations regarding changes to the system that could promote better revenue-cycle management.
53	Historical Revenue Cycle Data for Transition and Pricing To properly assess scope and pricing, will the Center provide: <ul style="list-style-type: none"> ○ A current full Accounts Receivable aging (ATB) ○ Historical denial and appeal trends ○ Current payer mix ○ Monthly claim volume by specialty/service line ○ Any available productivity and charge data 	<ul style="list-style-type: none"> ○ See Answer #5 above ○ Since transitioning to the new electronic health record in 2023, historical denial and appeal trend data has not been maintained. During June-August 2025, 1,807 services remain in non-final statuses, including, "pending", "batched" and "resubmitted". ○ Yes, see response to # 6 ○ See response to #3 & 6 ○ See Attached Chargemaster for Primary Care and Behavioral Health, ECI and Substance Use
54	Clarification of Revenue Percentage Fee Attachment A references a percentage of collections but does not specify the basis. Could the Center clarify: <ul style="list-style-type: none"> ○ What is included in the definition of "collected revenue"? ○ When revenue is considered collected? ○ How are adjustments handled? ○ Should the percentage be based on net collections, gross receipts, or net of payer adjustments? ○ Should patient responsibility, refunds, or recoupments be included or excluded? 	<ul style="list-style-type: none"> ○ "Collected revenue" includes money actually received. ○ Revenue is considered "collected" when payments are received and posted in the EHR. ○ In general, the successful vendor will make the adjustments in the EHR in real time, and Community Healthcore will provide oversight, as necessary. In the event of multiple large adjustments, Community Healthcore will discuss and approve the changes before any adjustments are made. ○ The Center is open to proposals from vendors. Multiple options may be included in the proposals. ○ The Center is open to proposals from vendors. Multiple options may be included in the proposals.

55	Payer and Clearinghouse Information Can the Center provide a list of contracted payers, fee schedules, clearinghouse vendor, and any out-of-network payer relationships?	<ul style="list-style-type: none"> - <u>Contracted payors (the primary payors):</u> Aetna, BCBS Medical Group, Cigna/EverNorth, Superior Health Plan, Texas Children's Health Plan, United Healthcare, Amerigroup/Wellpoint, Christus Health Plan, Magellan, Molina, Humana, TriWest, Medicaid, Medicare - <u>Clearinghouse vendors</u> are Waystar and Claim MD - For fee schedules, see <u>Chargemaster Credible & Next GEN</u> as apart of the Q&A addendum - No identified <u>out-of-network payer relationships</u> at this time.
56	Center Contract and Access Permissions Attachment A states that the successful vendor will use the Center's contract. Will the Center issue vendor credentials for access to Credible and NextGen, and are there any limitations on role-based access or data permissions?	Yes, the Center will issue credentials for access to Credible and NextGen. The level of access is dependent on the role of each contracted team member, and there is no unlimited access to the EHR systems.
57	Existing AR and Denial Management Is AR and denial management currently performed internally or by another vendor? If so, is there an expectation to assume responsibility for existing claims or accounts mid-cycle?	The AR and denial management are currently performed via a hybrid model. We have a third-party vendor that processes primary care claims, while the Center handles all other claims internally. Regarding existing claims, a firm decision has not been made at this time.
58	Scope of Vendor Responsibilities Will the vendor be expected to standardize front-office workflows (e.g., eligibility, documentation, scheduling), or focus solely on back-office revenue cycle functions?	The primary emphasis of this RFP is on the back-end revenue cycle functions. The successful vendor will also identify areas for improvement and efficiencies with front-desk operations and assist Community Healthcore in training staff in those areas.
59	Performance Expectations Are there baseline expectations for key revenue cycle metrics	At this time, we do not have defined baseline expectations for any of the items cited; however, we encourage such baseline expectations to be included in

	such as clean-claim rate, denial rate, AR days, or collection percentages?	the proposal, and the vendor would be accountable to that level of performance.
60	Contract Renewal Criteria Does the Center intend to base renewals or optional extensions on performance KPIs, pricing, or both?	Renewals/extensions are based upon performance as defined in the contract. This RFP and the vendor's response are a part of the contract.
61	Pricing Model Expectations Does the Center expect pricing proposals to include variable scenarios based on volume, specialty services, or payer mix?	The vendor's response to this RFP may include multiple pricing models. The Center will evaluate and determine what is best-value.
62	1. Why is Community Healthcore issuing this RFP (i.e., replacing an existing vendor, need to reduce costs, strategic decision to outsource, supplement existing staff, contract renewal, etc.)? Is this RFP intended to replace an incumbent vendor?	Community Healthcore is issuing the RFP to move to a higher level of claims management as envisioned by the scope of work as outlined in the RFP and this Q&A. Most of this work is currently done in-house and the Center welcomes a wide range of proposals / models to achieve that Best Value for the Center.
63	2. Is any of the revenue cycle management currently outsourced or handled inhouse? If currently outsourced, who is the incumbent vendor?	With our hybrid model, there is an in-house team of six (6) and a contracted team of two (2).
64	3. What is your current level of satisfaction with incumbent vendor (or internal staff) for revenue cycle management? If it is outsourced, how much was paid to incumbent vendor last year for the revenue cycle management services listed in the RFP?	Only Primary Care services were outsourced to a third-party vendor as seen above this is currently the smaller service line. For FY25, we paid out a total of \$1,701.26 to that Vendor. Now that we are a licensed FQHC, this is a service growth area for the Center.
65	4. Does Community Healthcore have a preferred pricing model (i.e., contingency, FTE, gain-share, etc.)? Can we provide alternative pricing models?	The vendor's response to this RFP may include multiple pricing models. The Center will evaluate and determine what is best-value.

66	5. How many FTE's are providing the revenue cycle services listed in the RFP?	See response to #63.
67	6. Can vendor utilize offshore based staff? This assumes all data will reside on US based servers and vendor uses Community Healthcore's revenue cycle systems.	<p>The strong preference is not to use offshore based staff even if the data remains in the US based servers.</p> <p>Contracts with the Texas Health and Human systems require that any consumer information that is used, disclosed, created, maintained, stored or transmitted outside of the United States requires special permission. Given that the information is being "used" outside the US even on US based servers would require special permission by the Texas Health and Human Systems.</p>
68	7. Are there any on-site requirements for staffing? Can work be done remotely?	There are no requirements for on-site staffing.
69	8. Will outsource vendor have access to all Community Healthcore's revenue cycle systems?	The successful vendor will have access to both EHRs.
70	9. Who will be on the evaluation and selection committee for this RFP? Is a third party consultant being used to evaluate RFP proposals?	An internal team of subject matter experts has been compiled to review and score responses to this RFP. No third-party consultants will be used to evaluate proposals.
71	10. When will responses to these questions be made available to us? Where will responses be posted back to proposers?	Responses will be posted on the Website as soon as possible as an addendum to the RFP.
72	11. Can Community Healthcore provide additional financial information including a detailed age trial balance report with volume of accounts and dollars and monthly cash collections for past 12 months?	The Center was unable to gather this information by the deadline for posting responses to the Q&A.
73	12. Please provide financial statements including income statement and balance sheet. What are Community Healthcore's gross and net patient revenues for past 2 years?	The Center was unable to gather this information by the deadline for posting responses to the Q&A.
74	13. Is the expectation that vendor will rebadge all Community Healthcore revenue cycle staff? Any management positions to be rebadged?	No formal decision has been made at this time. The Center is open to proposals regarding rebadging staff.
75	14. Is Community Healthcore's AR stated as net or gross or a combination?	The Center was unable to gather this information by the deadline for posting responses to the Q&A.

76	15. Can vendor submit a proposal electronically or are printed copies required?	<p>As stated in the RFP, please submit proposals via email to a secure email site at:</p> <p>RFP1004-26@communityhealthcore.com</p> <p>Please label the email subject:</p> <p>“Revenue Cycle Management”</p> <p>p</p>
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Answers to 21 – 23 RFP

Time Period			
6/1/2025 - 8/31/2025			
#21	Gross Charges	\$ 189,362.00	NextGen
	Gross Charges	\$ 322,138.86	Credible
	Patient Payments	\$ 6,632.00	NextGen
	Patient Payments	\$ 8,184.36	Credible
	Insurance Payment	\$ 14,168.00	NextGen
	Insurance Payment	\$ 1,001,277.86	Credible
#23	Commercial	\$ 64,190.59	Credible
	Medicaid	\$ 203,969.31	
	Medicare	\$ 57,162.46	
		\$ 325,322.36	
#23	Contracted Commerical	\$ 19,212.89	NextGen
	Medicaid	\$ 4,857.74	
	Medicaid MCO	\$ 22,282.81	
	Medicare	\$ 15,493.83	
	Non-Contracted Commercial	\$ 3,832.02	
		\$ 65,679.29	

Credible CHARGEMASTER

CREDIBLE CHARGEMASTER - BH, SUD AND ECI		
Service Description	CPT CODE	Rate
<i>Duplicate lines of CPT codes with variations in rate could be due to staff credentials and/or setting of service.</i>		
DRUG SCREENING	80101	\$ 30.00
EVAL-LPHA	90791	\$ 165.00
PSYCH DX EVAL W/OMED SERV	90791	\$ 250.00
COUNSELING	90832	\$ 75.41
COUNSELING	90834	\$ 113.12
COUNSELING	90837	\$ 150.82
FAMILY COUNSELING W/O PT	90846	\$ 150.82
FAMILY COUNSELING W/PT	90847	\$ 150.82
GROUP COUNSELING	90853	\$ 35.00
ECI SPEECH THERAPY	92507	\$ 163.30
ECI SPEECH THERAPY	92507	\$ 130.64
ECI SPEECH THERAPY-HOME	92507	\$ 179.64
ECI SPEECH THERAPY-HOME	92507	\$ 143.71
ECI ST INT EVAL-FLUENCY	92521	\$ 153.21
ECI ST INT EVAL-FLUENCY-VIDEO IN HOME(10)	92521	\$ 116.79
SLP INITIAL EVAL-FLUENCY	92521	\$ 108.00
ECI ST INT EVAL-FLUENCY-HOME	92521	\$ 168.53
SLP INITIAL EVAL-FLUENCY-PHONE IN HOME(10)	92521	\$ 186.79
SLP INITIAL EVAL-FLUENCY-PHONE NOT IN HOME(02)	92521	\$ 169.81
ECI ST INT EVAL-ARTIC ONLY	92522	\$ 192.97
SLP INITL EVAL-ARTIC ONLY	92522	\$ 108.00
ECI ST INT EVAL-ARTIC ONLY-HOME	92522	\$ 212.27
SLP INITL EVAL-ARTIC ONLY-PHONE IN HOME(10)	92522	\$ 140.10
SLP INITL EVAL-ARTIC ONLY-PHONE NOT IN HOME(02)	92522	\$ 127.36
ECI ST INT EVAL	92523	\$ 144.70
ECI ST INT EVAL-VIDEO IN HOME(10)	92523	\$ 196.13
SLP INITIAL EVAL	92523	\$ 108.00
ECI ST INT EVAL	92523	\$ 257.29
SLP INITIAL EVAL-PHONE IN HOME(10)	92523	\$ 111.23
SLP INITIAL EVAL-PHONE NOT IN HOME(02)	92523	\$ 101.12
ECI ST INT EVAL-HOME	92523	\$ 283.02
ECI ST INT EVAL-VOICE	92524	\$ 131.56
SLP INITIAL EVAL-VOICE	92524	\$ 108.00

Credible CHARGEMASTER

ECI ST INT EVAL-VOICE-HOME	92524	\$ 144.70
SLP INITIAL EVAL-VOICE-PHONE IN HOME(10)	92524	\$ 95.50
SLP INITIAL EVAL-VOICE-PHONE NOT IN HOME(02)	92524	\$ 86.82
ECI ST FEEDING THERAPY	92526	\$ 195.97
ECI ST FEEDING THERAPY	92526	\$ 172.45
ECI ST FEEDING THERAPY-HOME	92526	\$ 215.56
ECI ST FEEDING EVAL	92610	\$ 310.79
SLP FEEDING THERAPY-EVAL	92610	\$ 108.00
ECI ST FEEDING EVAL-HOME	92610	\$ 341.86
THRAPUTC Inj W Supvn	96372	\$ 25.00
ECI PHYSICAL THERAPY	97110	\$ 51.14
ECI PHYSICAL THERAPY	97110	\$ 40.91
ECI PHYSICAL THERAPY-HOME	97110	\$ 45.00
ECI PHYSICAL THERAPY-HOME	97110	\$ 56.26
ECI PT INT EVAL LOW	97161	\$ 176.05
ECI PT INT EVAL -HOME	97161	\$ 193.65
ECI PT INT EVAL MOD	97162	\$ 176.05
ECI PT INT EVAL-HOME	97162	\$ 193.65
ECI PT INT EVAL HIGH	97163	\$ 176.05
ECI PT INT EVAL-HOME	97163	\$ 193.65
ECI PT RE EVAL	97164	\$ 158.44
ECI PT RE EVAL-VIDEO IN HOME(10)	97164	\$ 120.78
PT RE-EVAL	97164	\$ 108.00
ECI OT INT LOW	97165	\$ 176.05
ECI OT INT LOW-VIDEO IN HOME(10)	97165	\$ 193.65
ECI OT INT MOD	97166	\$ 176.05
ECI OT INT -HOME	97166	\$ 193.65
ECI OT INT HIGH	97167	\$ 176.05
ECI OT INT- HOME	97167	\$ 193.65
OT RE-EVAL	97168	\$ 158.44
OT RE-EVAL-VIDEO IN HOME(10)	97168	\$ 174.29
OT RE-EVAL	97168	\$ 140.00
OT RE-EVAL-VIDEO NOT IN HOME (02)	97168	\$ 108.00
ECI OT THERAPY	97530	\$ 51.14
ECI OT THERAPY	97530	\$ 40.91
ECI OT THERAPY-HOME	97530	\$ 45.00
ECI OT THERAPY-HOME	97530	\$ 56.10
ECI NUTRITION INT EVAL	97802	\$ 45.92
ECI NUTRITION RE EVAL	97803	\$ 39.55
E&M NPT-VIDEO NOT IN HOME (02)	99202	\$ 204.00

Credible CHARGEMASTER

E&M NPT-VIDEO NOT IN HOME (02)	99203	\$ 236.00
E&M NPT-VIDEO NOT IN HOME (02)	99204	\$ 380.00
E&M NPT-VIDEO NOT IN HOME (02)	99205	\$ 497.00
E&M EPT	99211	\$ 40.00
E&M EPT	99212	\$ 81.83
E&M EPT	99213	\$ 137.97
E&M EPT	99214	\$ 194.44
E&M EPT	99215	\$ 225.55
EXTENDED OBS LOW	99218	\$ 1.00
EXTENDED OBS MODRATE	99219	\$ 1.00
EXTENDED OBS HIGH	99220	\$ 1.00
SBIRT BRIEF INTERVIEW	99408	\$ 35.98
SBIRT BRIEF SCREENING 15-30	99408	\$ 47.49
SBIRT BRIEF SCREENING >30 MINS	99409	\$ 96.43
SUD ASSESSMENT	H0001	\$ 95.00
SUD COUNSELING IND	H0004	\$ 23.75
SUD COUNSELING GRP	H0005	\$ 35.00
SUD COUNSELING GRP	H0005	\$ 10.21
COPSD CASE MANAGEMENT	H0006	\$ 16.75
CRISIS RESIDENTL BDY	H0018	\$ 425.00
MEDICATION TRNG&SUPP IND	H0034	\$ 29.62
MEDICATION TRNG&SUPP GRP	H0034	\$ 14.82
PEER-TO-PEER SERV GRP	H0038	\$ 1.61
PEER-TO-PEER SERV IND	H0038	\$ 12.00
FAMILY SUPPORT GRP	H0038	\$ 6.25
SUD INTENSIVE RESIDENTIAL	H0047	\$ 113.02
SUD WC TRF RESIDENTIAL	H0047	\$ 217.67
SBIRT SCREENING ONLY	H0049	\$ 35.95
CRISIS INTERVENTION	H2011	\$ 73.10
DAY PROGRAM FOR ACUTE NEEDS	H2012	\$ 64.40
SKILLS TRNG IND	H2014	\$ 37.12
SKILLS TRNG S HSG GRP	H2014	\$ 9.85
SKILLS TRNG IND	H2014	\$ 56.10
COMM LIVING SUPP - IND	H2015	\$ 25.02
PSYCHO REHAB IND	H2017	\$ 56.10
PSYCHO REHAB GRP	H2017	\$ 10.80
FAMILY TRAINING	H2019	\$ 1.00
PARAPROFESSIONAL SVCS IND	H2021	\$ 6.15
SUPPORT EMPLOYMNT	H2025	\$ 6.25
SUD PSYCHO EDU	H2027	\$ 4.45

Credible CHARGEMASTER

yCOGENTIN PER 1 MG	J0515	\$ 45.00
yHALOPERIDOL DEC 50 MG	J1631	\$ 22.00
yATIVAN 2 MG	J2060	\$ 9.50
ZYPREXA RELPREVV (1MG)	J2358	\$ 1.00
INVEGA SUSTENNA (1MG)	J2426	\$ 1.00
FLUPHENAZINE DEC 25 MG	J2680	\$ 14.45
RISPERADOL CONSTA (MG)	J2794	\$ 5.06
TELEMEDICINE REMOTE SITE	Q3014	\$ 30.00
ECI ST RE EVAL	S9152	\$ 180.11
SLP RE-EVAL	S9152	\$ 108.00
ECI ST RE EVAL-HOME	S9152	\$ 198.12
ECI NUTRITION SERV	S9470	\$ 92.33
FAMILY PARTNER	S9482	\$ 19.10
ROUTINE CASE MANAGEMENT	T1017	\$ 42.14
C&A INTENSIVE CASE MGMT	T1017	\$ 45.62
ECI TARGETED C MGMT	T1017	\$ 49.86
ECI SST	T1027	\$ 47.92
OBRA ASSESSMENT PE MH	T2011	\$ 12.73

Next Gen Chargemaster

NEXT GEN SERVICE ITEMS WITH COST			
Sv It Desc	CPT4	CPT4 Desc	Facility Cost
OFFICE/OUTPATIENT VISIT, EST	**99214	OFFICE/OUTPATIENT VISIT, EST	\$189.00
10060 - INCISION & DRAINAGE ABSCESS SIMPLE/SINGLE	10060	DRAINAGE OF SKIN ABSCESS	\$232.00
10080 - INCISION & DRAINAGE PILONIDAL CYST SIMPLE	10080	DRAINAGE OF PILONIDAL CYST	\$357.00
11000 - DBRDMT EXTENSV ECZMT/INFCT SKIN UP 10% BDY SURF	11000	DEBRIDE INFECTED SKIN	\$108.00
11055 - PARING/CUTTING BENIGN HYPERKERATOTIC LESION 1	11055	TRIM SKIN LESION	\$109.00
11056 - PARING/CUTTING BENIGN HYPERKERATOTIC LESION 2-4	11056	TRIM SKIN LESIONS 2 TO 4	\$130.00
11200 - REMOVAL SKIN TAGS MLT FIBRQ TAGS ANY UP TO & INC 15	11200	REMOVAL OF SKIN TAGS <W/15	\$172.00
15853 - REMOVAL OF SUTURES/STAPLES NOT REQUIRING ANESTESIA	15853	REMOVAL SUTR/STAPL XREQ ANES	\$25.00
36415 - COLLECTION VENOUS BLOOD VENIPUNCTURE	36415	ROUTINE VENIPUNCTURE	\$15.00
69209 - REMOVAL IMPACTED CERUMEN IRRIGATION/LVG UNILAT	69209	REMOVE IMPACTED EAR WAX UNI	\$52.00
REMOVE IMPACTED EAR WAX	69210	REMOVE IMPACTED EAR WAX UNI	\$46.58
DRUG SCREENING	80101	DRUG SCREEN SINGLE	\$30.00
80305 - DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE	80305	DRUG TEST PRSMV DIR OPT OBS	\$49.00
80306 - DRUG TEST PRSMV READ INSTRMNT ASSTD DIR OPT OBS	80306	DRUG TEST PRSMV INSTRMNT	\$58.00
81002 - URNLS DIP STICK/TABLET RGNT NON-AUTO W/O MICRSCP	81002	URINALYSIS NONAUTO W/O SCOPE	\$20.23

Next Gen Chargemaster

81003 - URNLS DIP STCK/TABLET RGNT AUTO W/O MICROSCOPY	81003	URINALYSIS AUTO W/O SCOPE	\$18.00
81005 - URINALYSIS QUAL/SEMIQUANT EXCEPT IMMUNOASSAYS	81005	URINALYSIS	\$20.23
URINALYSIS/MICROSCOP	81015	MICROSCOPIC EXAM OF URINE	\$20.08
81025 - URINE PREGNANCY TEST VISUALCOLOR CMPSRN METHS	81025	URINE PREGNANCY TEST	\$50.00
82075 - ASSAY OF ALCOHOL (ETHANOL) BREATH	82075	ASSAY OF BREATH ETHANOL	\$31.00
82270 - BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1 DETER	82270	OCCULT BLOOD FECES	\$16.00
82948 - GLUCOSE BOOLD REAGENT STRIP	82948	REAGENT STRIP/BLOOD GLUCOSE	\$19.00
82962 - GLUC BLOOD GLUC MNTR DEVE XLEARED FDA SPEC HOME USE	82962	GLUCOSE BLOOD TEST	\$19.00
83014 - HPYLORI DRUG ADMINISTRATION	83014	H PYLORI DRUG ADMIN	\$20.00
83036 - HEMOGLOBIN GLYCOSYLATED A1C	83036	HEMOGLOBIN GLYCOSYLATED A1C	\$50.00
BLOOD LEAD TEST	83655	ASSAY OF LEAD	\$81.16
84443 - ASSAY OF THYROID STIMULATING HORMONE TSH (CLIA)	84443	ASSAY THYROID STIM HORMONE	\$94.00
85610 - PROTHROMBIN TIME (CLIA)	85610	PROTHROMBIN TIME	\$23.09
86308 - HETEROPHILE ANTIBODIES SCREEN (CLIA)	86308	HETEROPHILE ANTIBODY SCREEN	\$50.00
86580 - SKIN TEST TUBERCULOSIS INTRADERMAL	86580	TB INTRADERMAL TEST	\$25.00
87088 - CULTURE BACTERIA CULTURE ISOL& PRSMPTV ID ISOLATE EA URINE	87088	URINE BACTERIA CULTURE	\$20.13
87275 - IAADI INFLUENZA B RAPID TEST	87275	INFLUENZA B AG IF	\$60.00
87276 - IAADI INFLUENZA A VIRUS	87276	INFLUENZA A AG IF	\$60.00
87339 - IAAD IA HPYLORI (CLIA)	87339	H PYLORI AG IA	\$25.00
87400 - IAAD IA INFLUENZA A/B	87400	INFLUENZA A/B EACH AG IA	\$16.00
87430 - IAAD IA STREPTOCOCCUS GROUP A (CLIA)	87430	STREP A AG IA	\$50.20
CHYLMD TRACH, DNA, DIR PROBE	87490	CHLMYD TRACH DNA DIR PROBE	\$34.13

Next Gen Chargemaster

87502 - INFECTIOUS AGENT DNA/RNA INFLUENZA 1ST 2 TYPES	87502	INFLUENZA DNA AMP PROBE	\$240.96
N.GONORRHOEAE, DNA, DIR PROB	87590	N.GONORRHOEAE DNA DIR PROB	\$40.32
HPV LOW-RISK TYPES	87623	HPV LOW-RISK TYPES	\$52.64
HPV HIGH-RISK TYPES	87624	HPV HIGH-RISK TYPES	\$10.00
HPV TYPES 16 & 18 ONLY	87625	HPV TYPES 16 & 18 ONLY	\$60.83
87635 - IADNA SARS-COV-2 COVID-19 AMPLIFIED PROBE TQ	87635	SARS-COV-2 COVID-19 AMP PRB	\$100.00
SARSCOV2&INF A&B&RSV AMP PRB	87637	SARSCOV2&INF A&B&RSV AMP PRB	\$156.89
87651 - IADNA STREPTOCOCCUS GROUP A AMPLIFIED PROBE TQ	87651	STREP A DNA AMP PROBE	\$53.18
87804 - IAADIADOO INFLUENZA	87804	INFLUENZA ASSAY W/OPTIC	\$50.20
87807 - IAADIADOO RESPIRATORY SYNCTIAL VIRUS	87807	RSV ASSAY W/OPTIC	\$50.20
STREP A ASSAY W/OPTIC	87880	STREP A ASSAY W/OPTIC	\$18.18
CYTOPATH, C/V, THIN LAYER	88142	CYTOPATH C/V THIN LAYER	\$20.26
90281 - IMMUNE GLOBULIN IG HUMAN IM USE	90281	HUMAN IG IM	\$184.85
90283 - IMMUNE GLOBULIN IGIV HUMAN IV USE	90283	HUMAN IG IV	\$96.75
90284- IMMUNE GLOBULIN HUMAN SUBQ INFUSION 100 MG EA	90284	HUMAN IG SC	\$82.92
90287 - BOTULINUM ANTITIOXIN EQUINE ANY ROUTE	90287	BOTULINUM ANTITOXIN	\$58.74
90288 - BOTULISM IMMUNE GLOBULIN HUMAN INTRAVENOUS USE	90288	BOTULISM IG IV	\$58.74
90291 - CYTOMEGALOVIRUS IMMUNE GLOBULIN HUMAN IV	90291	CMV IG IV	\$212.49
90296 - DIPHTHERIA ANTITOXIN EQUINE ANY ROUTE	90296	DIPHTHERIA ANTITOXIN	\$58.74
90371 - HEPATITIS B IMMUNE GLOBULIN HBIG HUMAN IM	90371	HEP B IG IM	\$431.90
90375 - IMMUNE GLOBULIN RIG HUMAN IM/SUBQ	90375	RABIES IG IM/SC	\$594.29
90376 - RABIES IG HEAT -TREATED HUMAN IM/SUBQ	90376	RABIES IG HEAT TREATED	\$906.98
90378 - RABIES IG HEAT -TREATED HUMAN IM/SUBQ	90378	RSV MAB IM 50MG	\$906.98

Next Gen Chargemaster

RSV MONOCLONAL ANTB SEASONAL DOSE 0.5ML IM USE	90380	RSV MONOC ANTB SEASN .5ML IM	\$1,114.30
RSV MONOCLONAL ANTB SEASONAL DOSE 1 ML IM USE	90381	RSV MONOC ANTB SEASN 1 ML IM	\$1,145.39
90384 - RHO(D) IMMUNE GLOBULIN HUMAN FULL-DOSE IM	90384	RH IG FULL-DOSE IM	\$231.50
90385 - IMMUNE GLOBULIN HUMAN MINI-DOSE IM	90385	RH IG MINIDOSE IM	\$91.56
90386 - RHO(D) IMMUNE GLOBULIN HUMAN IV	90386	RH IG IV	\$266.05
90389 - TETANUS IMMUNE GLOBULIN TIG HUMAN IM	90389	TETANUS IG IM	\$172.76
90393 - VACCINIA IMMUNE GLOBULIN HUMAN IM	90393	VACCINA IG IM	\$58.74
90396 - VARICELLA-ZOSTER IMMUNE GLOBULIN HUMAN IM	90396	VARICELLA-ZOSTER IG IM	\$399.07
90399 - UNLISTED IMMUNE GLOBULIN	90399	UNLISTED IMMUNE GLOBULIN	\$1.00
90460 - IM ADM THRU 18YR ANY RTE 1ST/ONLY COMPT VAC/TOX	90460	IM ADMIN 1ST/ONLY COMPONENT	\$60.00
90461 - IM ADM THRU 18YR ANY RTE ADDL VAC/TOX COMPT	90461	IM ADMIN EACH ADDL COMPONENT	\$40.00
90471 - IM ADM PRQ ID SUBQ/IM NJXS 1 VACCINE	90471	IMMUNIZATION ADMIN	\$32.00
90472 - IM ADM PRQ ID SUBQ/IM NJXS EA VACCINE	90472	IMMUNIZATION ADMIN EACH ADD	\$25.00
90473 - IM ADM INTRANSL/ORAL 1 VACCINE	90473	IMMUNE ADMIN ORAL/NASAL	\$32.00
90474 - IM ADM INTRANSL/ORAL EA VACCINE	90474	IMMUNE ADMIN ORAL/NASAL ADDL	\$25.00
90476 - ADENOVIRUS VACCINE TYPE 4 LIVE ORAL	90476	ADENOVIRUS VACCINE TYPE 4	\$107.11
90477 - ADENOVIRUS VACCINE TYPE 7 LIVE FOR ORAL	90477	ADENOVIRUS VACCINE TYPE 7	\$58.74
90480 - IMM ADMN SARSCOV5 VACCINE SINGLE DOSE	90480	90480 - IMM ADMN SARSCOV5 VACCINE SINGLE DOSE	\$40.00
90585 - BACILLUS CALMETTE -GUERIN VACCINE FOR TB LIVE PERQ	90585	BCG VACCINE PERCUT	\$120.93
90619 - MENACWY-TT CONJ VACC SEROGROUPS ACWY FOR IM USE	90619	MENACWY-TT VACCINE IM	\$300.20

Next Gen Chargemaster

90620 - MENB-4C RECOMBENT PROT & OUTER MEMB VESIC VACC IM	90620	MENB-4C VACC 2 DOSE IM	\$375.71
90621 - MENB-FHBP RECOMBNT LIPOPROTEIN VACC 2/3 DOSE IM	90621	MENB-FHBP VACC 2/3 DOSE IM	\$267.78
90623 - MENIGCCAL PNTVLNT MENACWY TT MENB FHBP VACC IM	90623	MENACWY-TT MENB-FHBP VACC IM	\$1.00
90625 - CHOLERA VACCINE ADULT 1 DOSE LIVE FOR ORAL USE	90625	CHOLERA VACCINE LIVE ORAL	\$388.71
90630 - INFLUENZA VACC IIV4 SPLIT VIRUS PRSRV FREE ID	90630	FLU VACC IIV4 NO PRESERV ID	\$57.01
90632 - HEPA VACCINE ADULT DOSE FOR INTRAMUSCULAR USE	90632	HEPA VACCINE ADULT IM	\$141.66
90633 - HEPA VACCINE 2 DOSE SCHEDULE PED/ADOLESC IM USE	90633	HEPA VACC PED/ADOL 2 DOSE IM	\$67.13
90634 - HEPA VACCINE 3 DOSE SCHEDULE PED/ADOLESC IM USE	90634	HEPA VACC PED/ADOL 3 DOSE	\$100.20
90636 - HEPATITIS A & B VACCINE HEPA-HEPB ADULT IM	90636	HEP A/HEP B VACC ADULT IM	\$205.58
90647 - HIB PRP-OMP VACCINE 3 DOSE SCHEDULE IM USE	90647	HIB PRP-OMP VACC 3 DOSE IM	\$50.20
HIB PRP-T VACCINE 4 DOSE SCHEDULE IM USE	90648	HIB PRP-T VACCINE 4 DOSE IM	\$59.68
90651 - 9VHPV VACC 2/3 DOSE SCHED IM USE	90651	9VHPV VACCINE 2/3 DOSE IM	\$375.75
90654 - INFLUENZA VACC IIV3 SPLIT VIRUS PRSRV FREE ID	90654	FLU VACC IIV3 NO PRESERV ID	\$44.92
90655 - IIV3 VACC PRESRV FREE 0.25 ML DOSAGE IM USE	90655	IIV3 VACC NO PRSV 0.25 ML IM	\$39.73
90656 - IIV3 VACC PRESERVATIVE FREE 0.5 ML DOSAGE IM USE	90656	IIV3 VACC NO PRSV 0.5 ML IM	\$34.55
90657 - IV3 VACCINE SPLIT VIRUS 0.25 ML DOSAGE IM USE	90657	IIV3 VACCINE SPLT 0.25 ML IM	\$32.82

Next Gen Chargemaster

90658 - IIV3 VACCINE SPLIT VIRUS 0.5 ML DOSAGE IM USE	90658	IIV3 VACCINE SPLT 0.5 ML IM	\$25.05
90660 LAIV3 VACCINE LIVE FOR INTRANASAL USE	90660	LAIV3 VACCINE INTRANASAL	\$58.74
90661 - CCIIV3 VACCINE PRESERVATIVE FREE 0.5 ML IM USE	90661	CCIIV3 VAC NO PRSV 0.5 ML IM	\$53.56
90662 - IIV VACCINE PRESERV FREE INCREASED AG CONTENT IM	90662	IIV NO PRSV INCREASED AG IM	\$85.17
90670 - PCV 13 VACCINE FOR INTRAMUSCULAR USE	90670	PCV13 VACCINE IM	\$247.82
90671 - PCV15 VACCINE FOR INTRAMUSCULAR USE	90671	PCV15 VACCINE IM	\$25.00
90672 -LAIV4 VACCINE FOR INTRANASAL USE	90672	LAIV4 VACCINE INTRANASAL	\$25.00
90673 - RIV3 VACCINE PRESERVATIVE FREE FOR IM USE	90673	RIV3 VACCINE NO PRESERV IM	\$25.00
90674 - CCIIV4 VACCINE PERSERVATIVE FREE 0.5 ML IM USE	90674	CCIIV4 VAC NO PRSV 0.5 ML IM	\$25.00
90677 - PCV20 VACCINE FOR INTRAMUSCULARPNEUMO CONJ 20 VALENT	90677	PCV20 VACCINE IM	\$308.51
90678 - RSV VACCINE PREF SUBUNIT BIVALENT FOR IM USE	90678	RSV VACC PREF BIVALENT IM	\$1.00
RV5 VACC 3 DOSE LIVE ORAL	90680	RV5 VACC 3 DOSE LIVE ORAL	\$115.23
90681 - RV1 VACCINE 2 DOSE SCHEDULE LIVE FOR ORAL USE	90681	RV1 VACC 2 DOSE LIVE ORAL	\$117.01
90682 - RIV4 VACCINE RECOMBINANT DNA PRSRV ANTIBIO FREE IM	90682	RIV4 VACC RECOMBINANT DNA IM	\$25.00
90685 - IIV4 VACC PRERV FREE 0.25 ML DOS FOR IM USE	90685	IIV4 VACC NO PRSV 0.25 ML IM	\$50.10
90686 - IIV4 VACC PRESRV FREE 0.5 ML DOS FOR IM USE	90686	IIV4 VACC NO PRSV 0.5 ML IM	\$45.09
90687 - IIV4 VACC SPLIT VIRUS 0.25 ML DOS FOR IM USE	90687	IIV4 VACCINE SPLT 0.25 ML IM	\$41.46

Next Gen Chargemaster

90688 - IIV4 VACC SPLIT VIRUS 0.5 ML DOS FOR IM USE	90688	IIV4 VACCINE SPLT 0.5 ML IM	\$25.00
90696 - DTAP-IPV VACCINE CHILD 4-6 YRS FOR IM USE	90696	DTAP-IPV VACCINE 4-6 YRS IM	\$111.27
90697 - DTAP-IPV/HIB VACCINE FOR INTRAMUSCULAR USE	90697	DTAP-IPV-HIB-HEPB VACCINE IM	\$288.86
DTAP-IPV/HIB VACCINE FOR INTRAMUSCULAR USE	90698	DTAP-IPV/HIB VACCINE IM	\$194.39
90700 - DIPHTH TETANUS TOX ACELL PERTUSSIS VACC<7 YRS IM	90700	DTAP VACCINE < 7 YRS IM	\$68.78
90702 - DT VACCINE YOUNGER THAN 7 YRS FOR IM USE	90702	DT VACCINE UNDER 7 YRS IM	\$55.28
90707 - MEASLES MUMPS RUBELLA VIRUS VACCINE LIVE SUBQ	90707	MMR VACCINE SC	\$110.44
90710 - MEASLES MUMPS RUBELLA VARICELLA VACC LIVE SUBQ	90710	MMRV VACCINE SC	\$328.74
90713 - POLIOVIRUS VACCINE INACTIVATED SUBQ/IM	90713	POLIOVIRUS IPV SC/IM	\$58.67
90714 - TD VACCINE PRSRV FREE 7 YRS OR OLDER FOR IM USE	90714	TD VACC NO PRESV 7 YRS+ IM	\$53.11
TDAP VACCINE 7 YRS /> IM	90715	TDAP VACCINE 7 YRS/> IM	\$70.28
VAR VACCINE LIVE FOR SUBCUTANEOUS USE	90716	VAR VACCINE LIVE SUBQ	\$175.11
90723 - DTAP-HEPB-IPV VACCINE, INTRAMUSCULAR	90723	DTAP-HEP B-IPV VACCINE IM	\$120.24
90732 - PPSV23 VACCINE 2 YRS OR OLDER FOR SUBQ/IM USE	90732	PPSV23 VACC 2 YRS+ SUBQ/IM	\$145.29
90734 - MENACWYD/MENMENINGOCOCCAL VAC GRPS ACWY IM USE	90734	MENACWYD/MENACWYCRM VACC IM	\$200.40
90739 - HEPB VACCINE ADULT 2/4 DOSE SCHEDULE FOR IM USE	90739	HEPB VACC 2/4 DOSE ADULT IM	\$256.63
90743 - HEPB VACCINE ADOLESCENT 2 DOSE SCHEDULE IM	90743	HEPB VACC 2 DOSE ADOLESC IM	\$108.84

Next Gen Chargemaster

90744 - HEPB VACCINE PED/ADOLESC 3 DOSE SCHEDULE IM	90744	HEPB VACC 3 DOSE PED/ADOL IM	\$72.14
90746 - HEPB VACCINE ADULT 3 DOSE SCHEDULE FOR IM USE	90746	HEPB VACCINE 3 DOSE ADULT IM	\$100.14
90750 HZV ZOSTER VACCINE RECOMBINANT ADJUVANTED IM NJX	90750	HZV VACC RECOMBINANT IM	\$225.45
90756 - CCIIV4 VACCINE ANTIBIOTIC FREE 0.5 ML DOSE IM USE	90756	CCIIV4 VACC ABX FREE IM	\$40.08
90758 - Zaire EBOLAVIRUS VACCINE LIVE FOR IM USE	90758	Zaire EBOLAVIRUS VAC LIVE IM	\$1.00
90759 - HEP B VACC 3 AG 10MCG 3 DOSE SCHEDULE FOR IM USE	90759	HEP B VAC 3AG 10MCG 3 DOS IM	\$165.82
90791 - PSYCHIATRIC DIAGNOSTIC EVALUATION	90791	PSYCH DIAGNOSTIC EVALUATION	\$165.00
90791 - PSYCHIATRIC DIAGNOSTIC EVALUATION	907919502	90791 - PSYCHIATRIC DIAGNOSTIC EVALUATION	\$165.00
90791 - PSYCHIATRIC DIAGNOSTIC EVALUATION	907919510	90791 - PSYCHIATRIC DIAGNOSTIC EVALUATION	\$165.00
90792 - PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERVICES	90792	PSYCH DIAG EVAL W/MED SRVCS	\$250.00
90792 - PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERVICES	907929502	90792 - PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERV	\$250.00
90792 - PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERVICES	907929510	90792 - PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERV	\$250.00
90832 - PSYCHOTHERAPY W/PATIENT 30 MINUTES	90832	PSYTX W PT 30 MINUTES	\$75.41
90832 - PSYCHOTHERAPY W/PATIENT 30 MINUTES	908329502	90832 - PSYCHOTHERAPY W/PATIENT 30 MINUTES	\$75.41
90832 - PSYCHOTHERAPY W/PATIENT 30 MINUTES	908329510	90832 - PSYCHOTHERAPY W/PATIENT 30 MINUTES	\$75.41
90833 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 30 MINUTES	90833	PSYTX W PT W E/M 30 MIN	\$80.00

Next Gen Chargemaster

90833 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 30 MINUTES	908339502	90833 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$80.00
90833 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 30 MINUTES	908339510	90833 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$80.00
90834 - PSYCHOTHERAPY W/PATIENT 45 MINUTES	90834	PSYTX W PT 45 MINUTES	\$113.12
90834 - PSYCHOTHERAPY W/PATIENT 45 MINUTES	908349502	90834 - PSYCHOTHERAPY W/PATIENT 45 MINUTES	\$113.12
90834 - PSYCHOTHERAPY W/PATIENT 45 MINUTES	908349510	90834 - PSYCHOTHERAPY W/PATIENT 45 MINUTES	\$113.12
90836 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 45 MINUTES	90836	PSYTX W PT W E/M 45 MIN	\$125.00
90836 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 45 MINUTES	908369502	90836 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$125.00
90836 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 45 MINUTES	908369510	90836 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$125.00
90837 - PSYCHOTHERAPY W/PATIENT 60 MINUTES	90837	PSYTX W PT 60 MINUTES	\$150.82
90837 - PSYCHOTHERAPY W/PATIENT 60 MINUTES	908379502	90837 - PSYCHOTHERAPY W/PATIENT 60 MINUTES	\$150.82
90837 - PSYCHOTHERAPY W/PATIENT 60 MINUTES	908379510	90837 - PSYCHOTHERAPY W/PATIENT 60 MINUTES	\$150.82
90838 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 60 MINUTES	90838	PSYTX W PT W E/M 60 MIN	\$175.00
90838 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 60 MINUTES	908389502	90838 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$175.00

Next Gen Chargemaster

90838 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MANANGEMENT SERVICE 60 MINUTES	908389510	90838 - PSYCHOTHERAPY W/PATIENT W/EVALUATION & MAN	\$175.00
90846 - FAMILY PSYCOTHERAPY W/O PATIENT PRESENT 50 MINUTES	90846	FAMILY PSYTX W/O PT 50 MIN	\$121.38
90847 - FAMILY PSYCHOTHERAPY W PATIENT PRESENT 50	90847	FAMILY PSYTX W/PT 50 MIN	\$151.73
90853 - GROUP PSYCHOTHERAPY	90853	GROUP PSYCHOTHERAPY	\$165.75
SARSCOV2 VAC AD26 .5ML IM	91303	SARSCOV2 VAC AD26 .5ML IM	\$1.00
91304 - SARSCOV2 VACC SAPONIN-BSN ADJT 5MCG/0.5ML IM USE	91304	SARSCOV2 VAC 5MCG/0.5ML IM	\$193.49
SARSCOV2 VAC 50MCG/0.5ML IM	91309	SARSCOV2 VAC 50MCG/0.5ML IM	\$1.00
91318 - SARCOV2 VACC MCG/0.3ML TRIS-SUCROSE IM USE	91318	91318 - SARCOV2 VACC MCG/0.3ML TRIS- SUCROSE IM USE	\$191.76
91319 - SARSCOV2 VACC 10MCG/0.3ML TRIS- SUCROSE IM USE	91319	91319 - SARSCOV2 VACC 10MCG/0.3ML TRIS-SUCROSE IM	\$222.86
91320 - SARSCOV2 VACC 30MCG/0.3ML TRIS- SUCROSE IM USE	91320	91320 - SARSCOV2 VACC 30MCG/0.3ML TRIS-SUCROSE IM	\$302.93
91321 - SARSCOV2 VACCINE 25 MCG/0.25 ML FOR IM USE	91321	91321 - SARSCOV2 VACCINE 25 MCG/0.25 ML FOR IM USE	\$304.06
91322 - SARSCOV2 VACCINE 50 MCG/0.5 ML FOR IM USE	91322	91322 - SARSCOV2 VACCINE 50 MCG/0.5 ML FOR IM USE	\$167.38
PURE TONE HEARING TEST, AIR	92551	PURE TONE HEARING TEST AIR	\$18.44
92552 - PURE TONE AUDIOMETRY AIR ONLY	92552	PURE TONE AUDIOMETRY AIR	\$50.58
92567 - TYMPANOMETRY	92567	TYMPANOMETRY	\$38.44
ELECTROCARDIOGRAM, COMPLETE	93000	ELECTROCARDIOGRAM COMPLETE	\$50.00
94640 - PRESSURIZED/NONPRESSURIZED INHALATION TREATMENT	94640	AIRWAY INHALATION TREATMENT	\$31.18
IMMUNOTHERAPY, ONE INJECTION	95115	IMMUNOTHERAPY ONE INJECTION	\$15.53
IMMUNOTHERAPY INJECTIONS	95117	IMMUNOTHERAPY INJECTIONS	\$17.95

Next Gen Chargemaster

95874 - NEEDLE EMG GUID W/CHEMODENERVATION	95874	GUIDE NERV DESTR NEEDLE EMG	\$179.67
96110 - DEVELOPMENTAL SCREEN W/SCORING & DOC STD INSTRM (MCHAT)	96110	DEVELOPMENTAL SCREEN W/SCORE	\$40.16
DEVELOPMENTAL SCREEN W/SCORE	96110	DEVELOPMENTAL SCREEN W/SCORE	\$40.16
PHQ- 9 COMPLETED BY PATIENT	96160	PT-FOCUSED HLTH RISK ASSMT	\$1.00
PHQ- 9 COMPLETED BY PATIENT	96160EP	PHQ- 9 COMPLETED BY PATIENT	\$1.00
96161 - CAREGIVER HLTH RISK ASSMT SCORE DOC STND INSTRM(PHQ-9 COMPLTD-CAREGIVER)	96161	CAREGIVER HEALTH RISK ASSMT	\$60.24
96161 - CAREGIVER HLTH RISK ASSMT SCORE DOC STND INSTRM(PHQ-9 COMPLTD-CAREGIVER)	96161EP	96161 - CAREGIVER HLTH RISK ASSMT SCORE DOC STND I	\$60.24
96372 - THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/IM (THERAPEUTIC INJECTION)	96372	THER/PROPH/DIAG INJ SC/IM	\$25.00
96380 - ADMIN RSV MONOC ANTB SEASONAL DOS IM CNSL PHY/QHP	96380	96380 - ADMIN RSV MONOC ANTB SEASONAL DOS IM CNSL	\$35.00
96381 - ADMIN RSV MONOCLONAL ANTB SEASONAL DOS IM NJX	96381	96381	\$25.00
ACTIVE WOUND CARE/20 CM OR <	97597	RMVL DEVITAL TIS 20 CM/<	\$65.76
ACTIVE WOUND CARE > 20 CM	97598	RMVL DEVITAL TIS ADDL 20CM/<	\$145.08
SPECIMEN HANDLING OFFICE-LAB	99000	SPECIMEN HANDLING OFFICE-LAB	\$1.00
VISUAL ACUITY SCREEN	99173	VISUAL ACUITY SCREEN	\$3.00
99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (MEDICAL E&M NPT)	99202	OFFICE O/P NEW SF 15-29 MIN	\$204.00
99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (MEDICAL E&M NPT)	992029502	99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (M	\$204.00
99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (MEDICAL E&M NPT)	992029510	99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (M	\$204.00
99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (MEDICAL E&M NPT)	99202FP	99202 - OFFICE/OUTPATIENT NEW SF MDM 15 MINUTES (M	\$204.00

Next Gen Chargemaster

99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (MEDICAL E&M NPT)	99203	OFFICE O/P NEW LOW 30-44 MIN	\$236.00
99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (MEDICAL E&M NPT)	992039502	99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (M	\$236.00
99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (MEDICAL E&M NPT)	992039510	99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (M	\$236.00
99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (MEDICAL E&M NPT)	99203FP	99203 - OFFICE/OUTPATIENT NEW SF MDM 30 MINUTES (M	\$236.00
99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (MEDICAL E&M NPT)	99204	OFFICE O/P NEW MOD 45-59 MIN	\$380.00
99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (MEDICAL E&M NPT)	992049502	99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (M	\$380.00
99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (MEDICAL E&M NPT)	992049510	99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (M	\$380.00
99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (MEDICAL E&M NPT)	99204FP	99204 - OFFICE/OUTPATIENT NEW SF MDM 45 MINUTES (M	\$380.00
99205- OFFICE/OUTPATIENT NEW SF MDM 60 MINUTES (MEDICAL E&M NPT)	99205	OFFICE O/P NEW HI 60-74 MIN	\$497.00
99205- OFFICE/OUTPATIENT NEW SF MDM 60 MINUTES (MEDICAL E&M NPT)	992059502	99205- OFFICE/OUTPATIENT NEW SF MDM 60 MINUTES (ME	\$497.00
99205- OFFICE/OUTPATIENT NEW SF MDM 60 MINUTES (MEDICAL E&M NPT)	99205FP	99205- OFFICE/OUTPATIENT NEW SF MDM 60 MINUTES (ME	\$497.00
99211 - OFFICE/OUTPATIENT EST PT MAY NOT REQ PHYS/QHP	99211	OFF/OP EST MAY X REQ PHY/QHP	\$194.44
99211 - OFFICE/OUTPATIENT EST PT MAY NOT REQ PHYS/QHP	99211FP	99211 - OFFICE/OUTPATIENT EST PT MAY NOT REQ PHYS/	\$194.44
99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MIN (E&M EPT)	99212	OFFICE O/P EST SF 10-19 MIN	\$108.22
99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MIN (E&M EPT)	992129502	99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MI	\$81.83

Next Gen Chargemaster

99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MIN (E&M EPT)	992129510	99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MI	\$81.83
99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MIN (E&M EPT)	99212FP	99212 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 10 MI	\$108.22
99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MIN (E&M EPT)	99213	OFFICE O/P EST LOW 20-29 MIN	\$137.97
99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MIN (E&M EPT)	992139502	99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MI	\$137.97
99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MIN (E&M EPT)	992139510	99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MI	\$137.97
99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MI	99213	OFFICE O/P EST LOW 20-29 MIN	\$137.97
99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MIN (E&M EPT)	99213FP	99213 - OFFICE/OUTPATIENT ESTABLISHED SF MDM 20 MI	\$137.97
99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN (E&M EPT)	99214	OFFICE O/P EST MOD 30-39 MIN	\$194.44
99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN (E&M EPT)	992149502	99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN	\$194.44
99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN (E&M EPT)	992149510	99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN	\$194.44
99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN (E&M EPT)	99214FP	99214- OFFICE/OUTPATIENT ESTABLISHED SF MDM 30 MIN	\$194.44
99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN (E&M EPT)	99215	OFFICE O/P EST HI 40-54 MIN	\$225.55
99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN (E&M EPT)	992159502	99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN	\$225.55
99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN (E&M EPT)	992159510	99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN	\$225.55
99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN (E&M EPT)	99215FP	99215- OFFICE/OUTPATIENT ESTABLISHED SF MDM 40 MIN	\$225.55

Next Gen Chargemaster

99381 - INITIAL PREVENTIVE MEDICINE NEW PATIENT <1 YEAR	99381	INIT PM E/M NEW PAT INFANT	\$226.00
99381 - INITIAL PREVENTIVE MEDICINE NEW PATIENT <1 YEAR	99381EP	99381 - INITIAL PREVENTIVE MEDICINE NEW PATIENT <1	\$226.00
99382 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 1-4YRS	99382	INIT PM E/M NEW PAT 1-4 YRS	\$229.00
99382 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 1-4YRS	99382EP	99382 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AG	\$229.00
99383 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 5-11YRS	99383	PREV VISIT NEW AGE 5-11	\$253.00
99383 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 5-11YRS	99383EP	99383 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AG	\$253.00
99384- INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 12-17YRS	99384	PREV VISIT NEW AGE 12-17	\$257.00
99384- INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 12-17YRS	99384EP	99384- INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE	\$257.00
99385 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 18-39YRS	99385	PREV VISIT NEW AGE 18-39	\$290.00
99385 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 18-39YRS	99385EP	99385 - INITIAL PREVENTIVE MEDICINE NEW PATIENT A	\$290.00
99386 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 40-64YRS	99386	PREV VISIT NEW AGE 40-64	\$305.00
99387 - INITIAL PREVENTIVE MEDICINE NEW PATIENT AGE 65YRS	99387	INIT PM E/M NEW PAT 65+ YRS	\$336.00
99391 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT <1YR	99391	PER PM REEVAL EST PAT INFANT	\$198.00
99391 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT <1YR	99391EP	99391 - PERIODIC PREVENTIVE MED ESTABLISHED PATIEN	\$198.00
99392 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 1-4YRS	99392	PREV VISIT EST AGE 1-4	\$198.00

Next Gen Chargemaster

99392 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 1-4YRS	99392EP	99392 - PERIODIC PREVENTIVE MED ESTABLISHED PATIEN	\$198.00
99393 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 5-11YRS	99393	PREV VISIT EST AGE 5-11	\$192.00
99393 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 5-11YRS	99393EP	99393 - PERIODIC PREVENTIVE MED ESTABLISHED PATIEN	\$192.00
99394 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 12-17YRS	99394	PREV VISIT EST AGE 12-17	\$203.00
99394 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 12-17YRS	99394EP	99394 - PERIODIC PREVENTIVE MED ESTABLISHED PATIEN	\$203.00
99395 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 18-39YRS	99395	PREV VISIT EST AGE 18-39	\$229.00
99395 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 18-39YRS	99395EP	99395 - PERIODIC PREVENTIVE MED ESTABLISHED PATIEN	\$229.00
99396 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 40-64YRS	99396	PREV VISIT EST AGE 40-64	\$255.00
99397 - PERIODIC PREVENTIVE MED ESTABLISHED PATIENT 65YRS	99397	PER PM REEVAL EST PAT 65+ YR	\$275.00
BEHAV CHNG SMOKING 3-10 MIN	99406	BEHAV CHNG SMOKING 3-10 MIN	\$20.86
99408 - ALCOHOL/SUBSTANCE SCREEN & INTERVENTION (SBIRT BRIEF INTERVIEW)	99408	AUDIT/DAST 15-30 MIN	\$35.98
99409 - ALCOHOL/SUBSTANCE SCREEN & INTERVENTION >30 MINS (SBIRT BRIEF SCREENING)	99409	AUDIT/DAST OVER 30 MIN	\$96.43
UNLISTED PREVENTIVE MEDICINE SERVICE (ORAL EVALUATION & FLOURIDE VARNISH)	99429	UNLISTED PREVENTIVE SERVICE	\$1.00
99441 - PHYS/QHP TELEPHONE EVALUATION 5-10 MIN EST PATIENT	99441	PHONE E/M PHYS/QHP 5-10 MIN	\$50.02
99442 - PHYS/QHP TELEPHONE EVALUATION 11-20 MIN EST PATIENT	99442	PHONE E/M PHYS/QHP 11-20 MIN	\$203.49

Next Gen Chargemaster

99443 - PHYS/QHP TELEPHONE EVALUATION 21-30 MIN EST PATIENT	99443	PHONE E/M PHYS/QHP 21-30 MIN	\$288.28
99455 - WORK RELATED DBLT XM TREATING PHYS	99455	WORK RELATED DISABILITY EXAM	\$250.00
CA screen;pelvic/breast exam	G0101	Ca screen;pelvic/breast exam	\$56.77
G0402 - INITIAL PREVENTIVE EXAM (WELCOME TO MEDICARE VISIT)	G0402	Initial preventive exam	\$229.00
G0404 - EKG TRACING FOR INITIAL PREV	G0404	Ekg tracing for initial prev	\$50.00
G0434	G0434	Drug screen multi drug class	\$18.00
G0438 - PPPS, INITIAL VISIT (ANNUAL WELLNESS INITIAL VISIT 65+)	G0438	Ppps, initial visit	\$290.00
G0439 - PPPS, SUBSEQ VISIT (ANNUAL WELLNESS INITIAL VISIT 65+)	G0439	Ppps, subseq visit	\$290.00
G0445 - HIGH INTEN BEH COUNS STD 30MINS	G0445	High inten beh couns std 30m	\$65.00
G0466 - FQHC VISIT NEW PATIENT	G0466	Fqhc visit new patient	\$204.62
G0467 - FQHC VISIT, ESTABLISHED PATIENT	G0467	Fqhc visit, estab pt	\$204.62
G0468 - FQHC VISIT, IPPE OR AWV	G0468	Fqhc visit, ippe or awv	\$274.52
G0469 - FQHC VISIT, MH ESTABLISHED PATIENT	G0469	Fqhc visit, mh new pt	\$204.62
G0470 - FQHC VISIT, MH ESTABLISHED PATIENT	G0470	Fqhc visit, mh estab pt	\$204.62
G2025 - DIS SITE TELE SERVICE RHC/FQHC	G2025	Dis site tele svcs rhc/fqhc	\$100.03
G8431 - SCR CLIN DEPR DOC POS & F/U PLAN IS DOCUMENTED	G8431	Pos clin depres scrn f/u doc	\$1.00
G8510 - SCREENING DEPRESSION DOCUMENT NEG A F/U PLAN NOT RQR	G8510	Scr dep neg, no plan reqd	\$1.00
COUNSEL DIET PHYS ACTIVITY	G8780	Counsel diet phys activity	\$25.00
G9012 - OTHER SPECIFIED CASE MANAGEMENT SERVICE NEC	G9012	Other specified case mgmt	\$1.00
G9509 - ADULT 18YR/OLDER MD/DYSTHYMIA REMISS AT 12 MO	G9509	Adit mdd dys rem 12 mnths	\$25.00
H0049 - ALCOHOL/DRUG SCREENING (SBIRT HIGH-RISK SCR & REFER)	H0049	Alcohol/drug screening	\$35.98

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J0515 - INJECTION BENZTROPINE MESYLATE PER 1 MG (yCOGENTIN PER 1 MG)	J0515	Inj benztropine mesylate	\$9.50
J0561 - PENICILLIN G BENZATHINE INJ	J0561	Penicillin g benzathine inj	\$50.00
J0696 - CEFTRIAXONE SODIUM INJECTION	J0696	Ceftriaxone sodium injection	\$2.00
J0697 - STERUKE CEFUROXIME INJECTION	J0697	Sterile cefuroxime injection	\$4.02
J0702 - BETAMETHASONE ACET&SOD PHOSP	J0702	Betamethasone acet&sod phosp	\$10.00
Clonidine hydrochloride	J0735	Clonidine hydrochloride	\$92.65
Medroxyprogesterone acetate	J1050	Medroxyprogesterone acetate	\$2.00
J1631 - HALOPERIDOL DECANOATE INJ (yHALOPERIDOL DEC 50 MG)	J1631	Haloperidol decanoate inj	\$22.00
J1632 - INJ, BREXANOLONE, 1 MG	J1632	Inj., brexanolone, 1 mg	\$101.80
INJ, INSULIN, PER 5 UNITS	J1815	Insulin injection	\$140.00
KETOROLAC TROMETHAMINE INJECTION 15MG	J1885	Ketorolac tromethamine inj	\$7.50
J2358 - OLANZAPINE LONG-ACTING INJECTION (ZYPREXA RELPREVV (1MG))	J2358	Olanzapine long-acting inj	\$5.01
J2426 - INJECTION, INVEGA SUSTENNA, 1 MG	J2426	Paliperidone palmitate inj	\$20.00
J2794 - INJECTION RISPERDAL CONSTA, 0.5 MG	J2794	Inj risperdal consta, 0.5 mg	\$12.02
J3420 - VITAMIN B12 INJECTION	J3420	Vitamin b12 injection	\$5.00
J7297 - LLILETTA, 52 MG	J7297	Liletta, 52 mg	\$1,305.00
J7298 - MIRENA, 52 MG	J7298	Mirena, 52 mg	\$1,666.80
J7300 - INTRAUT COPPER CONTRACEPTIVE	J7300	Intraut copper contraceptive	\$1,438.66
J7301 - SKYLA, 13.5 MG	J7301	Skyla, 13.5 mg	\$1,337.00
J7307 - ETONOGESTREL IMPLANT SYSTEM	J7307	Etonogestrel implant system	\$1,560.90
Albuterol concentrated form	J7611	Albuterol non-comp con	\$7.46
J7613 - ALBUTEROL NON-COMP UNIT	J7613	Albuterol non-comp unit	\$7.50
Q0091 - OBTAINING SCREEN PAP SMEAR (yCLIAPAP SMEAR/TEST)	Q0091	Obtaining screen pap smear	\$50.00
Q3014 - TELEHEALTH FACILITY FEE (TELEMEDICINE REMOTE SITE)	Q3014	Telehealth facility fee	\$30.00

Next Gen Chargemaster

T1015 - CLINIC SERVICE	T1015	Clinic service	\$188.22