

Medical Items Table of Costs

1 May 2020 to 30 November 2020

Please note: fees in the schedule are payable only to medical practitioners who meet the provider eligibility criteria outlined in the current Medicare Benefits Schedule.

Last updated: 27/04/2020

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Medical items table of costs

Rules for use

This document outlines the fees payable by workers' compensation insurers for medical service delivery to workers' compensation claimants in Queensland.

When invoicing for medical services, medical practitioners are expected to adhere to the MBS rules unless otherwise specified by WorkCover Queensland ('WorkCover') in this publication or the insurers' medical policies. WorkCover adopts the Medicare Benefits Schedule (MBS) items, explanations, definitions, rules and conditions for services provided by medical practitioners.

Fees in this schedule are payable **only** to medical practitioners who meet the provider eligibility criteria outlined in the current MBS.

Multiple Operation Rule

The Fees for two or more operations, other than amputations, performed on a patient on the one occasion should be calculated using the following rules:

Surgical procedures:

Inclusions - spinal procedures under MBS subgroup 17

Exclusions - orthopaedic procedures set out in MBS Group T8, subgroup 14 and 15

- 100 % for the item with the greatest WorkCover fee;
- plus 50% for the item with the next greatest WorkCover fee;
- plus 25% for each other item.

Orthopaedic procedures:

Inclusions – *orthopaedic procedures set out in MBS Group T8, subgroup 14 and 15* Exclusions – *spinal procedures set out in MBS subgroup 17*

- 100 per cent for the item with the greatest WorkCover fee;
- plus 75 per cent of each other item.

Where a medical practitioner performs both surgical and orthopaedic services on the one occasion, each rule applies in its entirety to the relevant items. This will result in two items with fees at 100%.

Assistance at Operations

A flat 20% surgical assistant's fee is payable when a surgical assistant is employed for Therapeutic Procedures Category 3,

- Subgroup 14 (Hand Surgery),
- Subgroup 15 (Orthopaedic) and,
- Subgroup 17 (Spinal Surgery) of the Medical Benefits Schedule (MBS).
- Therefore, payment for surgical assistants is not limited to the MBS item numbers that specify eligibility for a surgical assistant benefit.
- Where surgical assistance is provided at two or more operations performed on a patient on the one occasion
 the multiple operation rule is applied to determine the surgeon's fee.
- For further details refer to Section T9 'Assistance at Operations' of the MBS.

Perioperative Nurse Surgical Assistants (PNSA)

WorkCover recognises that Perioperative Nurse Surgical Assistants (PNSA) is filling a gap where there is a shortage of medical assistances. As a result, a 15% assistant's fee is payable based on the above rules for 'Assistance at Operations' for PNSA who are a member of the Australian Association of Nurse Surgical Assistants (AANSA Inc.)

Surgery Approval and Invoices

WorkCover Queensland requires the request for surgery form to be completed in full.

If the surgical procedure changes during the operation and subsequently the item codes, please contact the insurer to discuss. Prior to any surgical invoice being paid, the operation notes must be received.

Aftercare

All conditions detailed in the explanatory notes of the Medicare Benefits Schedule apply when treating injured workers. This includes the conditions surrounding any billing for routine post-operative care which is considered to be inclusive of the operation provided. If a patient requires additional services which are considered to be 'not normal aftercare' (NNAC), then the account should be endorsed with NNAC to enable separate payment for those services.

Other Services

Dental, nursing and allied health services for compensable injuries are covered under the relevant table of costs for those services.

Evidence based recommendations

WorkCover support the recommendations published by Choosing Wisely Australia and developed by Australia's peak colleges, societies and associations: http://www.choosingwisely.org.au/recommendations

This includes the recent joint publication from RACP and AFOEM regarding low value clinical practices, specifically:

- Do not certify a patient as totally unfit for work unless the work absence is clinically necessary and the patient is unfit for suitable alternative or restricted duties.
- Do not order X-rays or other imaging for acute nonspecific low back pain, unless there are red flags or other clinical reasons to suspect serious spinal pathology
- Do not prescribe opiates for the treatment of acute or chronic pain without assessing the patient's clinical condition, potential side effects, alternative analgesic options, work status, and capacity to perform safety critical activities such as driving a motor vehicle

Further Information

You can access more information by visiting <u>worksafe.qld.gov.au/medical</u> or contacting WorkCover on free call 1300 362 128

Medical Items Table of Costs

* See Appendix A for o		
Item	Medical	
No.	Fee	
3	\$41 *Darived	
4	*Derived	
23	\$83	
24	*Derived	
36 37	\$152 *Derived	
44	\$230 *Derived	
52 53	\$41 \$83	
	,	
54	\$152	
57	\$230	
58	*Derived	
59	*Derived	
60	*Derived	
65	*Derived	
99	*Derived	
104	\$182	
105	\$97	
106	\$182	
107	\$245	
108	\$160	
109	\$280	
110	\$345	
111	\$97	
112	*Derived	
113	\$128	
114	\$226	
115	\$97	
116	\$158	
117	\$151	
119	\$86	
120	\$86	
122	\$410	
128	\$220	
131	\$159	
132	\$595	
133	\$300	
141	\$780	
143	\$520	
145	\$945	
147	\$635	
149	*Derived	
160	\$355	
161	\$575	
162	\$775 \$070	
163	\$970 \$1145	
164	\$1145 \$305	
170 171	\$305 \$315	
171	\$315 \$395	
172	\$395 \$41	
173	\$115	
177	\$27	
181	*Derived	
185	\$59	
187	*Derived	
189	\$115	
191	*Derived	
193	\$83	
195	*Derived	
197	\$152	
199	\$230	
203	\$230 \$169	
203	*Derived	
214	\$349	
215	\$581	
218	\$813	
219	\$1046	
220	\$1040	
	ψ110 2	

Item	Medical
No. 221	Fee \$185
222	\$195
223	\$237
224	\$93
225	\$217
226 227	\$300 \$423
	\$334
228 229	\$227
230	\$180
231	\$111
232	\$111
233	\$113
235	\$111
236	\$190
237	\$317
238	\$82
239	\$140
240	\$233
243	\$128
244	\$60
259	\$58
260	*Derived
261	\$113
262	*Derived
263	\$166
264	*Derived
265	\$58
266	*Derived
268	\$113
269	*Derived
270	\$166
271	*Derived
272	\$113
276	\$166
277	\$113
279	\$113
281	\$143
282	\$211
283	\$146
285	*Derived
286	\$209
287	*Derived
288	
	Bonvoo
289	\$595
291	\$780
293	\$520
296	\$425
297	\$425
299	\$505
300	\$95
302	\$190
304	\$285
306	\$430
308	\$475
319	\$430
320	\$95
322	\$190
324	\$285
326	\$430
328	\$480
330	\$156
332	\$250
334	\$345
336	\$495
338	\$530
342	\$118
344	\$152
346	\$230
348	\$285

14	
ltem	Medical
No. 350	Fee \$380
352	\$194
353	\$112
355	\$225
356	\$330
357	\$505
358	\$550
359	\$600
361 364	\$485 \$95
366	\$190
367	\$285
369	\$430
370	\$475
371	\$146
372	\$209
384	\$128
385	\$345
386	\$158
387	\$410
388 389	\$220 *Derived
410	\$41
411	\$83
412	\$152
413	\$230
414	*Derived
415	*Derived
416	*Derived
417	*Derived
585	\$255
588	\$255
591 594	\$197 \$83
599	\$490
600	\$490
699	\$143
721	\$275
723	\$240
729	\$110
731	\$110
732 733	\$138 \$46
735	\$270
737	\$77
739	\$380
741	\$132
743	\$490
745	\$185
747	\$164
750	\$220
758	\$270
761	*Derived
763 766	*Derived *Derived
769	*Derived
788	*Derived
789	*Derived
812	\$36
820	\$290
822	\$435
823	\$580
825	\$178
826	\$285
827	*Derived
828	\$390
830	\$290
833	G12E
832 834	\$435 \$580

Item	Medical
No.	Fee
837	\$285
838	\$390
855	\$270
857	\$400
858	\$535
861	\$270
864	\$400
866	\$535
867	\$79
868	*Derived
871	\$160
872	\$75
873	\$152
876	*Derived
880	\$94
885	\$224
891	*Derived
894	\$70
896	\$135
898	\$198
900	\$395
2100	\$45
2121	\$87
2122	*Derived
2125	*Derived
2126	\$98
2137	*Derived
2138	*Derived
2143	\$191
2147	*Derived
2150	\$168
2179	*Derived
2195	\$280
2196	\$248
2199	*Derived
2220	*Derived
2461	\$34
2463	\$74
2464	\$143
2465	\$211
2471	\$21
2472	\$41
2475	\$74
2478	\$118
2480	\$27
2481	\$59
2482	\$115
2483	\$169
2631	*Derived
2633	*Derived
2635	*Derived
2700	\$141
2700	\$208
2712	\$205
2713	\$190
2715	\$190
2717 2721	\$340 \$183
	*Derived
2723 2725	\$261
2727 2729	*Derived
	\$183
2731	\$261 \$226
2799	
2801	\$345
0000	\$158
2806	
2814	\$86
2814 2820	*Derived
2814	

Item	Medical
No. 2840	Fee \$159
2946	\$290
2949	\$435
2954	\$580
2958	\$178
2972	\$285
2974	\$390
2978	\$290
2984	\$435
2988 2992	\$580
2992	\$178 \$285
3000	\$390
3003	\$226
3005	\$345
3010	\$158
3014	\$86
3015	*Derived
3018	\$410
3023	\$220
3028	\$159
3032	\$290
3040	\$435
3044	\$580
3051	\$178
3055	\$285
3062	\$390
3069	\$290
3074 3078	\$435 \$580
3083	\$178
3088	\$285
3093	\$390
5000	\$62
5001	\$130
5003	*Derived
5004	\$220
5011	\$220
5012	\$345
5014	\$435
5016	\$580
5019	\$670
5020	\$124
5021	\$130
5023	*Derived
5027	\$220 \$345
5030 5032	\$345 \$435
5032	\$435 \$580
5036	\$670
5039	\$315
5040	\$225
5041	\$595
5042	\$315
5043	*Derived
5044	\$595
5060	\$350
5063	*Derived
5200	\$62
5203	\$124
5207	\$225
5208	\$350
5220	*Derived
5223	*Derived
5227	*Derived
5228 6004	*Derived
6004 6007	\$194 \$275
6007	\$275
6011	\$194
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Item No.	Medical
6013	Fee \$270
6015	\$340
6016	*Derived
6018	\$301
6019	\$151
6023	\$527
6024	\$264
6025	\$226
6026	*Derived
6028	\$98 \$85
6029 6031	\$151
6032	\$226
6034	\$301
6035	\$68
6037	\$121
6038	\$181
6042	\$241
6051	\$301
6052	\$151
6057	\$527
6058	\$264
6059	\$226
6060	*Derived
6062	\$366
6063	\$221
6064	\$85
6065 6067	\$151 \$226
6068	
6071	\$301 \$68
6072	\$121
6074	\$181
6075	\$241
10801	\$290
10802	\$290
10803	\$290
10804	\$290
10805	\$290
10806	\$290
10807	\$290
10808	\$290
10809	\$290
10816	\$290
10905	\$131
10907	\$66 \$131
10910 10911	\$131 \$131
10911	\$131
10912	\$131
10914	\$131
10915	\$131
10916	\$66
10918	\$66
10921	\$326
10922	\$326
10923	\$326
10924	\$412
10925	\$326
10926	\$326
10927	\$412
10928	\$326
10929	\$412
10930	\$326 \$125
10940	\$125 \$76
10941 10942	\$76 \$66
10942	\$142
10945	\$66
10946	\$131

Item	Medical
No.	Fee
10947	\$66
10948	\$131
11000	\$375
11003	\$760
11004	\$1675
11005 11006	<u>\$1675</u> \$390
11000	\$590 \$520
11012	\$290
11015	\$395
11018	\$575
11021	\$395
11024	\$260
11027	\$385
11200	\$93
11204	\$210
11205	\$210
11210	\$210
11211	\$210
11215	\$370
11218	\$470
11219	\$136
11220	\$136
11221	\$265
11224	\$146
11235	\$370
11237	\$210
11240	\$210
11241	\$315
11242	\$210
11243	\$210
11244	\$210
11300	\$455
11303	\$450
11304	\$735
11306	\$51
11309	\$59
11312	\$87
11315	\$114
11318 11324	\$142
11324	<u>\$87</u> \$54
11327	\$34 \$44
11332	\$275
11332	\$275 \$99
11336	\$99 \$99
11339	\$99 \$99
11503	\$380
11505	\$95
11506	\$48
11507	\$250
11508	\$730
11512	\$142
11600	\$142
11602	\$104
11604	\$104
11605	\$104
11610	\$104
11611	\$104
11612	\$196
11614	\$104
11615	\$156
11627	\$560
11700	\$114
11701	\$57
11702	\$57
11708	\$325
11709	\$430
11710	\$118

Item	Medical
No.	Fee
11712	\$395
11713	\$230
11715	\$260
11718	\$114
11719	\$220
11720	\$220
11721	\$230
11722	\$78
11724 11725	\$475
	\$620
11726	\$310
11727	\$310
11728	\$78
11800	\$510
11801	\$860
11810	\$425
11820	\$2769
11823	\$3040
11830	\$535 \$600
11833	\$600
11900	\$70
11903	\$280
11906	\$280
11909	\$420
11912	\$420
11915	\$420
11917	\$1070
11919	\$1070
11921	\$220
12000	\$106
12001	\$106
12002	\$106
12003	\$160
12004	\$164
12005	\$178
12012	\$47
12017	\$200
12021	\$325
12022	\$393
12024	\$450
12200	\$80
12201	\$3315
12203	\$1320
12204	\$1320
12205	\$1324
12207	\$1320
12208	\$1324
12213	\$1425
12215	\$1580
12217	\$1425
12250	\$755
12254	\$2058
12258	\$2058
12261	\$2158
12265	\$2158
12268	\$2315
12272	\$2315
12306	\$265
12312	\$265
12315	\$265
12320	\$265
12321	\$265
12322	\$265
12325	\$80
12326	\$80
12500	\$500
12524	\$400
12527	\$265
12533	\$235
13015	\$714

Item	Medical
No. 13020	Fee \$725
13025	\$324
13030	\$458
13100	\$420
13103	\$220
13104	\$415
13106	\$275
13109	\$670
13110	\$670
13200	\$5545
13201	\$5185
13202	\$830
13203	\$1385
13206	\$2375
13209	\$235
13210	*Derived
13290	\$565
13292	\$1135
13300	\$146
13303	\$220
13306	\$1065
13309	\$825
13312	\$93
13318	\$610
13319	\$545
13400	\$235
13506	\$430
13700	\$775
13703	\$280
13706	\$192
13709	\$116
13750	\$320
13755	\$320
13757	\$172
13760	\$1785
13815	\$270
13818	\$560
13830	\$174
13832	\$2265
13834	\$1260
13835	\$290
13837	\$1260
13838	\$290
13839	\$75
13840	\$1520
13842	\$215
13848	\$430
13851	\$1260
13854	\$290
13857	\$355
13870	\$915
13873	\$680
13876	\$194
13881	\$370
13882	\$290
13885	\$420
13888	\$220
13899	\$595
13915	\$166
13918	\$230
13921	\$260
13924	\$154
13927	\$200
13930	\$275
13933	\$305
13936	\$200
13939	\$230
13942	\$154
13945	\$124
13948	\$154

Item	Medical
No.	Fee
14050	\$140 \$695
14100 14106	\$685 \$685
14115	\$1150
14118	\$1460
14124	\$685
14201	\$663
14202	\$336
14203	\$124
14206	\$79
14209 14212	\$215 \$500
14212	\$245
14221	\$132
14224	\$158
14227	\$245
14230	\$750
14233	\$910
14236	\$1660
14239	\$400
14242 14245	\$1190 \$290
14245	\$290 \$355
14256	\$635
14257	\$1220
14258	\$355
14259	\$635
14260	\$1220
14263	\$156
14264	\$310
14265 14266	\$156 \$310
14270	\$410
14272	\$410
14277	\$660
14278	\$660
14280	\$660
14283	\$660
14285	\$660
14288 15000	\$660
15000	\$110 *Derived
15006	\$300
15009	*Derived
15012	\$162
15100	\$150
15103	*Derived
15106	\$174
15109	*Derived
15112 15115	\$385 *Derived
15211	\$126
15214	*Derived
15215	\$166
15218	\$166
15221	\$166
15224	\$166
15227	\$166 *Darivard
15230 15233	*Derived
	*Derived *Derived
15236 15239	*Derived
15242	*Derived
15245	\$220
15248	\$220
15251	\$220
15254	\$220
15257	\$220
15260	*Derived
15263	*Derived

\$65

13015

Item No.	Medical Fee
15266	*Derived
15269	*Derived
15272	*Derived
15275	\$305
15303	\$870
15304	\$870
15307	\$1650
15308 15311	\$1760 \$815
15312	\$815
15315	\$1590
15316	\$1695
15319	\$990
15320	\$990
15323	\$1765
15324	\$1870
15327	\$1920
15328 15331	\$2030 \$1825
15332	\$1935
15335	\$1650
15336	\$1760
15338	\$2035
15339	\$186
15342	\$465
15345	\$1240
15348 15351	\$142
15351	\$375 \$435
15357	\$124
15500	\$525
15503	\$720
15506	\$1135
15509	\$455
15512	\$385
15513	\$715
15515	\$675
15518 15521	\$475
15524	\$940 \$1860
15527	\$455
15530	\$740
15533	\$1465
15536	\$940
15539	\$1860
15550	\$1095
15553	\$1185
15555	\$1245 \$1100
15556 15559	\$1190 \$1445
15562	\$2010
15565	\$10680
15600	\$4565
15700	\$152
15705	\$255
15710	\$255
15715	\$255
15800	\$320
15850	\$550 \$685
15900 16003	\$685 \$1615
16003	\$1013
16009	\$845
16012	\$735
16015	\$7380
16018	\$4425
16399	*Derived
16401	\$240
16404	\$119 \$174
16408	\$174

Item	Medical
No.	Fee
16500 16501	\$112 \$455
16502	\$112
16505	\$112
16508	\$112
16509	\$112
16511	\$745
16512	\$215
16514	\$114
16515	\$3205
16518	\$1605
16519	\$3210
16520	\$3210
16522 16527	\$4530
16528	\$3205 \$3210
16590	\$400
17609	*Derived
17610	\$176
17615	\$352
17620	\$528
17625	\$704
17640	\$176
17645	\$352
17650	\$528
17655	\$704
17680	\$352
17690	\$176
18213	\$352
18216	\$704
18219	*Derived
18222 18225	\$264
18226	\$352 \$1320
18227	*Derived
18228	\$440
18230	\$1760
18232	\$704
18233	\$704
18234	\$880
18236	\$440
18238	\$264
18240	\$440
18242	\$264 \$704
18244 18248	\$704 \$616
18250	\$440
18252	\$704
18254	\$704
18256	\$440
18258	\$440
18260	\$616
18262	\$440
18264	\$704
18266	\$440
18268	\$616
18270	\$616
18272	\$440
18274	\$616
18276	\$880
18278 18280	\$616 \$880
18282	\$880 \$704
18284	\$704
18286	\$704
18288	\$880
18290	\$1760
18292	\$880
1920/	¢1760

Item	Medical
No.	Fee
18297 18298	\$264
18350	\$1760 \$320
18351	\$350
18353	\$635
18354	\$320
18360	\$320
18362	\$630
18365	\$320
18366	\$415
18368	\$690
18370	\$114
18372	\$320
18374 18375	\$350 \$505
18377	\$595 \$350
18379	\$590
20100	\$440
20102	\$528
20104	\$352
20120	\$440
20124	\$352
20140	\$440
20142	\$516
20143	\$528
20144	\$688
20145	\$688
20146	\$440
20147	\$528
20148	\$352 \$528
20160 20162	\$616
20164	\$352
20170	\$528
20172	\$616
20174	\$792
20176	\$880
20190	\$440
20192	\$880
20210	\$1320
20212	\$440
20214	\$792
20216	\$1760
20220	\$880 ¢520
20222 20225	\$528 \$1056
20230	\$1056
20300	\$440
20305	\$1320
20320	\$528
20321	\$880
20330	\$704
20350	\$880
20352	\$440
20355	\$1056
20400	\$264
20401	\$352
20402	\$440
20403	\$440
20404 20405	\$528 \$704
20405	\$704 \$1144
20406	\$1144
20420	\$440
20440	\$352
20450	\$440
20452	\$528
20470	\$528
20472	\$880
20474	\$1144

Item	Medical
No. 20475	Fee \$880
20500	\$1320
20520	\$528
20522	\$352
20524	\$352
20526	\$880
20528	\$704
20540	\$1144
20542	\$1320
20546	\$1320
20548	\$1320
20560	\$1760
20600	\$880
20604	\$1144
20620	\$880
20622	\$1144
20630	\$704
20632	\$616
20634	\$880
20670	\$1144
20680	\$264
20690	\$440
20700	\$264
20702	\$352
20703	\$352
20704	\$880
20706	\$616
20730	\$440
20740	\$440
20745	\$616
20750	\$440
20752	\$528
20754	\$616
20756	\$792
20770	\$1320
20790	\$704
20791	\$880
20792	\$1144
20793	\$1320
20794	\$1056
20798	\$880
20799	\$528
20800	\$264
20802	\$440
20803	\$352
20804	\$880
20806	\$616
20810	\$352
20815	\$528
20820	\$440
20830	\$352
20832	\$528
20840	\$528
20841	\$704
20842	\$352
20844	\$880
20845	\$880
20846	\$880
20847	\$880
20848	\$880
20850	\$1056
20855	\$1320
20860	\$528
20862	\$616
20863	\$880
20864	\$880
20866	\$880
20867	\$880
20868	\$880
20880	\$1320

No. Fee 20882 \$880 20884 \$440 20886 \$528 20900 \$264 20905 \$880 20906 \$352 20910 \$352 20911 \$440 20912 \$440 20914 \$616 20920 \$352 20924 \$352 20928 \$528 20930 \$352 20932 \$352 20933 \$352 20934 \$528 20930 \$352 20931 \$352 20932 \$352 20933 \$352 20934 \$528 20935 \$704 20938 \$352 20940 \$352 20941 \$40 20942 \$440 20943 \$352 20944 \$528 20945 \$352 20946 \$704	Item	Medical
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Item No.	Medical Fee	Item No.	Medical Fee	Item No.	Medical Fee		Item No.	Medical Fee	Item No.	Medical Fee
21390	\$264	21860	\$264	23055	\$440	1	23710	\$6600	25020	\$176
21392	\$352	21865	\$880	23065	\$528	1	23720	\$6688	25025	*Derived
21400	\$352	21870	\$1320	23075	\$616	1	23730	\$6776	25030	*Derived
21402	\$616	21872	\$704	23085	\$704	1	23740	\$6864	25050	*Derived
21403	\$880	21878	\$264	23091	\$792	1	23750	\$6952	25200	*Derived
21404	\$440	21879	\$440	23101	\$880	1	23760	\$7040	25205	*Derived
21420	\$264	21880	\$616	23111	\$968		23770	\$7128	30001	*Derived
21430	\$352	21881	\$792	23112	\$1056		23780	\$7216	30003	\$75
21432	\$440	21882	\$968	23113	\$1144		23790	\$7304	30006	\$130
21440	\$704	21883	\$1144	23114	\$1232		23800	\$7392	30010	\$215
21445	\$880	21884	\$1320	23115	\$1320		23810	\$7480	30014	\$445
21460	\$264	21885	\$1496	23116	\$1408		23820	\$7568	30017	\$905
21461	\$352	21886	\$1672	23117	\$1496		23830	\$7656	30020	\$1800
21462	\$264	21887	\$1848	23118	\$1584		23840	\$7744	30023	\$905
21464	\$352	21900	\$264	23119	\$1672		23850	\$7832	30024	\$905
21472	\$440	21906	\$440	23121	\$1760		23860	\$7920	30026	\$156
21474	\$440	21908	\$528	23170	\$1848		23870	\$8008	30029	\$235
21480	\$352	21910	\$792	23180	\$1936		23880	\$8096	30032	\$205
21482	\$440	21912	\$440	23190	\$2024		23890	\$8184	30035	\$310
21484	\$440	21914	\$528	23200	\$2112		23900	\$8272	30038	\$235
21486	\$616	21915	\$440	23210	\$2200	_	23910	\$8360	30042	\$520
21490	\$264	21916	\$440	23220	\$2288	4 L	23920	\$8448	30045	\$310
21500	\$704	21918	\$440	23230	\$2376	4 L	23930	\$8536	30049	\$530
21502	\$528	21922	\$602	23240	\$2464	4 L	23940	\$8624	30052	\$720
21520	\$352	21925	\$352	23250	\$2552	4	23950	\$8712	30055	\$215
21522	\$440	21926	\$430	23260	\$2640	4	23960	\$8800	30058	\$405
21530	\$1320	21930	\$528	23270	\$2728	4	23970	\$8888	30061	\$62
21532	\$704	21935	\$440	23280	\$2816	-	23980	\$8976	30062	\$168
21535	\$880	21936	\$516	23290	\$2904	4	23990	\$9064	30064	\$280
21600	\$264	21939	\$264	23300	\$2992	4	24100	\$9152	30068	\$775
21610	\$440	21941	\$616	23310	\$3080	4	24101	\$9240	30071	\$194
21620	\$352	21942	\$880	23320	\$3168	4	24102	\$9328	30072	\$194
21622	\$440	21943	\$440	23330	\$3256	4	24103	\$9416	30075	\$490
21630	\$440	21945	\$440	23340	\$3344	┥ ┝	24104	\$9504	30078	\$126
21632	\$528	21949	\$440	23350	\$3432	┥ ┝	24105	\$9592	30081	\$280
21634	\$792	21952	\$860	23360	\$3520	- H	24106	\$9680	30084	\$156
21636	\$1320	21955	\$440	23370	\$3608	- }	24107	\$9768	30087	\$78
21638	\$880 \$704	21959	\$440	23380 23390	\$3696		24108 24109	\$9856	30090 30093	\$335
21650 21652	\$880	21962 21965	\$440 \$440	23400	\$3784 \$3872	┥┝	24110	\$9944 \$10032	30093	\$345
21654	\$704	21969	\$704	23410	\$3960	- -	24111	\$10032	30094	\$535 \$525
21656	\$880	21970	\$1320	23410	\$4048	-	24111	\$10120	30096	\$260
21670	\$352	21973	\$440	23420	\$4136	┥ ┝	24113	\$10206	30097	\$235
21680	\$352 \$264	21976	\$440 \$440	23440	\$4224	-l -	24113	\$10290	30103	\$525
21682	\$352	21980	\$440 \$440	23450	\$4312	1	24115	\$10364	30103	\$315
21685	\$880	21990	\$264	23460	\$4400	1	24116	\$10472	30104	\$555
21700	\$264	21997	\$352	23470	\$4488	1	24117	\$10648	30107	\$905
21710	\$352	22002	\$352 \$352	23480	\$4576	 	24117	\$10046	30114	\$1050
21710	\$440	22002	\$352 \$352	23490	\$4664	1	24119	\$10730	30176	\$2595
21714	\$440	22007	\$352 \$352	23500	\$4752	1	24119	\$10024	30180	\$350
21716	\$440	22012	\$264	23510	\$4840	┨ ┞	24121	\$11000	30183	\$700
21730	\$264	22012	\$264	23520	\$4928	1	24122	\$11088	30187	\$630
21732	\$352	22015	\$528	23530	\$5016	1	24123	\$11176	30189	\$360
21740	\$440	22020	\$352	23540	\$5104	1	24124	\$11264	30190	\$975
21756	\$528	22025	\$352	23550	\$5192	1	24125	\$11352	30190	\$175
21760	\$616	22031	\$440	23560	\$5280	1	24126	\$11440	30192	\$97
21770	\$704	22036	\$264	23570	\$5368	7	24127	\$11528	30196	\$310
21772	\$528	22041	\$176	23580	\$5456	7	24128	\$11616	30202	\$116
21780	\$352	22042	\$88	23590	\$5544	1	24129	\$11704	30207	\$106
21785	\$880	22051	\$792	23600	\$5632	7	24130	\$11792	30210	\$420
21790	\$1320	22055	\$1056	23610	\$5720	7	24131	\$11880	30216	\$65
21800	\$264	22060	\$1760	23620	\$5808	1	24132	\$11968	30219	\$65
21810	\$352	22065	\$440	23630	\$5896	7	24133	\$12056	30223	\$420
21820	\$264	22075	\$1320	23640	\$5984	1	24134	\$12144	30224	\$675
21830	\$352	22900	\$528	23650	\$6072	1	24135	\$12232	30225	\$755
21832	\$616	22905	\$528	23660	\$6160	7	24136	\$12320	30226	\$425
21834	\$352	23010	\$88	23670	\$6248	1	25000	\$88	30229	\$765
21840	\$704	23025	\$176	23680	\$6336	1	25005	\$176	30232	\$630
21842	\$528	23035	\$264	23690	\$6424	7	25010	\$264	30235	\$840
21850	\$352	23045	\$352	23700	\$6512	1	25014	\$88	30238	\$425
	.		· · · · · ·					*		

Item	Medical
No.	Fee
30241	\$905
30244	\$905
30246	\$1995
30247	\$2135
30250	\$3495
30251	\$5135
30253	\$2330
30255	\$3095
30256	\$980
30259	\$555
	\$168
30262	\$420
30266	
30269	\$425
30272	\$840
30275	\$4920
30278	\$130
30281	\$330
30283	\$555
30286	\$1125
30289	\$1425
30293	\$1255
30294	\$4920
30296	\$2865
30297	\$2865
30299	\$1790
30300	\$2150
30302	\$1435
30303	\$1720
30306	\$2290
30310	\$2235
30314	\$1615
30315	\$3495
30317	\$3815
30318	\$3495
30320	\$3815
30323	
	\$3815
30324	\$3815
30329	\$690
30330	\$2010
30332	\$745
30335	\$1990
30336	\$2390
30373	\$1360
30375	\$1545
30376	\$1545
30378	\$1545
30379	\$2600
30382	\$3655
30384	\$3105
30385	\$1585
30387	\$1810
30388	\$4465
30390	\$615
30391	\$795
30392	\$1635
30393	\$2050 \$1400
30394	\$1400
30396	\$2840
30397	\$650
30399	\$895
30400	\$1765
30402	\$1300
30403	\$1555
30405	\$2560
30406	\$156
JU 1 UU	\$1095
30408	Ψ.σσσ
30408	\$550
30408 30409	\$550
30408	

Item No.	Medical Fee	
30415	\$3855	
30416 30417	\$2095 \$3145	ł
30417		1
	\$4465	
30419	\$2280	1
30421	\$5585	1
30422 30425	\$1890 \$3655	
30425	\$4365	
30427	\$4670	
30428	7.0.0	
30430	\$6495	
	\$1555	
30433 30434	\$2030 \$1645	
30434	\$1645	1
	\$1825	1
30437	\$2275	
30438	\$3220	
30439	\$520	
30440	\$1480	1
30441	\$380	
30442	\$520	
30443	\$2070	
30445	\$2285	
30446	\$2275	
30448	\$2720	
30449	\$3025	
30450	\$1465	
30451	\$755	
30452	\$1055	
30454	\$2590	
30455	\$2870	
30457	\$3855	-
30458	\$2870	
30460	\$2415	
30461	\$4205	
30463	\$5075	
30464	\$6090	
30466	\$3510	
30467	\$4345	
30469	\$4810	
30472 30473	\$2600	
	\$620	
30475 30478	\$1005 \$910	
30478	\$1345	
30481	\$995	
30482	\$705	
30483	\$495	
30484	\$1015	
30485	\$1585	
30488	\$250	
30490	\$1460	ł
30491	\$1545	ł
30492	\$2265	
30494	\$1180	
30495	\$2265	1
30496	\$1685	1
30497	\$1970	İ
30499	\$2395	İ
30500	\$2495	İ
30502	\$2775	1
30503	\$3085	1
30505	\$1545	1
30506	\$2700	İ
30508	\$2840	1
30509	\$2840	1
30515	\$1970	1
30517	\$2500	1
20510	¢2705	1

Item No.	Medical Fee
NO. 30521	\$3495
30523	\$3495
30524	\$4205
30526	\$6030
30527	\$2515
30529	\$3655
30530	\$2195
30532	\$2545
30533	\$3020
30535	\$4755
30536	\$4810
30538	\$3335
30539	\$2440
30541	\$4245
30542	\$2885
30544	\$2110
0545	\$5135
30547	\$3535
30548	\$2640
30550	\$5765
0551	\$3980
30553	\$2945
30554	\$6415
30556	\$4425
30557	\$3270
30559	\$2375
30560	\$2640
0562	\$1665
0563	\$1665
0564	\$2190
0565	\$2435
0566	\$2700
0568	\$2030
0569	\$1035
0571	\$1240
0572	\$1340
0574	\$350
0575	\$1450
0577	\$3045
0578	\$3210
0580	\$2925
0581	\$2130
30583	\$3330
0584	\$4935
0586	\$1970
0587	\$2030
0589	\$3495
0590	\$3855
0593	\$5280
0594	\$6090
0596	\$2515
0597	\$2010
0599	\$3655
0600	\$2200
0601	\$2680
0602	
	\$4345
0603	\$4590
0605	\$5220
0606	\$3105
0609	\$1300
0614	\$1190
0615	\$1555
0621	\$1050
0628	\$91
0631	\$600
0635	\$840
0640	\$2560
30641	\$1050
0642	\$1555

Item	Medical
No. 30663	Fee \$405
30666	\$130
30672	\$1100
30676	\$1075
30679	\$250
30680	\$3345
30682	\$3345
30684	\$4115
30686	\$4115
30687 30688	\$1345 \$1045
30690	\$1610
30692	\$1045
30694	\$1610
30696	\$1610
30710	\$1610
31000	\$1515
31001	\$1890
31002	\$2270
31003	\$1627
31004 31005	\$2034 \$2441
31206	\$2441
31211	\$355
31216	\$420
31220	\$535
31221	\$535
31225	\$955
31245	\$1075
31250	\$1075
31340	*Derived
31345	\$590 \$500
31346 31350	\$590 \$1215
31355	\$2005
31356	\$645
31357	\$320
31358	\$785
31359	\$960
31360	\$490
31361	\$540
31362	\$395
31363	\$710
31364	\$490
31365	\$460 \$275
31366 31367	\$275 \$620
31368	\$365
31369	\$715
31370	\$420
31371	\$1040
31372	\$900
31373	\$1040
31374	\$820
31375	\$880
31376	\$1025
31400	\$775 \$805
31403 31406	\$895 \$1490
31400	\$4515
31412	\$5135
31420	\$530
31423	\$1165
31426	\$2325
31429	\$3625
31432	\$3875
31435	\$2850
31438	\$4170
31450	\$1185
31452	\$2175

Item	Medical
No.	Fee
31454	\$1620
31456 31458	\$705
31460	\$845 \$1025
31462	\$1495
31464	\$2500
31466	\$3755
31468 31470	\$4125 \$2070
31470	\$3360
31500	\$595
31503	\$795
31506	\$895
31509 31512	\$745 \$1400
31515	\$940
31516	\$1875
31519	\$1480
31524	\$2090
31525	\$1457 \$1305
31530 31533	\$1305
31536	\$535
31548	\$385
31551	\$465
31554	\$995
31557 31560	\$745 \$795
31563	\$2860
31566	\$355
31569	\$2380
31572	\$2928
31575 31578	\$2380 \$2380
31581	\$2928
31584	\$4311
31587	\$274
31590	\$725
32000 32003	\$2745 \$2870
32003	\$3145
32005	\$3565
32006	\$3145
32009	\$3630
32012 32015	\$4010 \$4730
32018	\$4730
32021	\$1490
32023	\$1545
32024	\$3630
32025 32026	\$4915 \$5290
32028	\$5290 \$5670
32029	\$1135
32030	\$2830
32033	\$4145
32036	\$5095 \$4010
32039 32042	\$4010 \$3445
32045	\$1290
32046	\$2050
32047	\$2390
32051	\$6155
32054 32057	\$5645 \$1490
32060	\$6155
32063	\$5645
32066	\$1490
32069	\$4555
32072	\$152

30518

30520

\$2785

No. Fee No. Fee No. Fee 32075 \$275 32511 \$2310 33518 \$36 32084 \$330 32514 \$2695 33521 \$40 32094 \$1515 32517 \$3475 33524 \$47 32095 \$350 32520 \$1555 33527 \$55 32096 \$680 32522 \$2310 33530 \$47	95 34538 \$805 35557 \$590 90 34539 \$570 35560 \$2150 50 34800 \$2375 35561 \$4045
32094 \$1515 32517 \$3475 33524 \$47 32095 \$350 32520 \$1555 33527 \$55	34539 \$570 35560 \$2150 34800 \$2375 35561 \$4045
32095 \$350 32520 \$1555 33527 \$55	
32096 \$680 32522 \$2310 33530 \$47	
32099	
<u>32102</u> \$1735 <u>32526</u> \$2310 <u>33536</u> \$39	
32103 \$2080 32700 \$4200 33539 \$28 32104 \$2665 32703 \$3590 33542 \$40	
32104	
32106	
32112 \$2080 32715 \$3680 33800 \$34	
32114 \$460 32718 \$3475 33803 \$32	
32115 \$345 32721 \$5510 33806 \$23	75 35003 \$2680 35581 \$1595
32117 \$2665 32724 \$6270 33810 \$16	35006 \$3140 35582 \$2395
32120 \$680 32730 \$4750 33811 \$49	
<u>32123</u> \$890 <u>32733</u> \$5510 <u>33812</u> \$27	
32126 \$1450 32736 \$1215 33815 \$23	
32129 \$1685 32739 \$3780 33818 \$27	
32131 \$1435 32742 \$4340 33821 \$31	
32132 \$120 32745 \$4950 33824 \$29	
32135 \$178 32748 \$5355 33827 \$32	
32138 \$1080 32751 \$3475 33830 \$40 32139 \$1080 32754 \$4340 33833 \$38	
32139 \$1080 32754 \$4340 33833 \$38 32142 \$186 32757 \$1215 33836 \$46	
32142 \$160 32757 \$1215 35656 \$46 32145 \$370 32760 \$1215 33839 \$54	
32147 \$120 32763 \$3475 33842 \$26	
32150 \$760 32766 \$3940 33845 \$18	
32156 \$450 33050 \$4275 34100 \$20	
32159 \$1105 33055 \$3430 34103 \$12	
32162 \$1290 33070 \$2475 34106 \$89	
32165 \$1685 33075 \$3150 34109 \$9 ⁻¹	
32166 \$565 33080 \$3845 34112 \$25	
32168 \$365 33100 \$4200 34115 \$28	
<u>32171</u> \$235 <u>33103</u> \$5890 <u>34118</u> \$40	
32174 \$235 33109 \$7135 34121 \$32	
32175 \$445 33112 \$6165 34124 \$35	
32177 \$460 33115 \$4175 34127 \$46 32180 \$675 33116 \$4175 34130 \$14	
32180 \$675 33116 \$4175 34130 \$14 32183 \$1510 33118 \$4640 34133 \$16	
32186 \$1510 33119 \$4640 34136 \$26	
32100 \$1010 33113 \$4040 34139 \$26	
32206 \$1570 33127 \$4650 34145 \$23	
32209 \$2525 33130 \$4040 34148 \$42	
32210 \$700 33133 \$3025 34151 \$57	15 35500 \$215 35645 \$940
32212 \$375 33136 \$7655 34154 \$68	
32213 \$1855 33139 \$4650 34157 \$34	
32214 \$935 33142 \$4340 34160 \$65	
32215 \$350 33145 \$7425 34163 \$83	
32216 \$1665 33148 \$9245 34166 \$83	
32217 \$440 33151 \$8790 34169 \$46	
32218 \$440 33154 \$6515 34172 \$37	
32220 \$2475 33157 \$7270 34175 \$34	
32221 \$2475 33160 \$7655 34500 \$9 32222 \$985 33163 \$6135 34503 \$12	
32222 \$985 35163 \$6135 34506 \$6: 32223 \$985 33166 \$6135 34506 \$6:	
32224 \$985 33169 \$4790 34509 \$28	
32225	
32227 \$1385 33178 \$4405 34518 \$37	
32228 \$985 33181 \$5385 34521 \$22	25 35539 \$795 35680 \$1570
32229 \$695 33500 \$2985 34524 \$12	15 35542 \$940 35684 \$980
32500 \$315 33506 \$3695 34527 \$15	50 35545 \$475 35688 \$1085
32504 \$780 33509 \$4000 34528 \$77	
32507 \$1555 33512 \$4445 34530 \$5	
32508 \$1555 33515 \$4890 34533 \$36	10 35554 \$118 35697 \$2575

Item	Medical
No.	Fee
35700	\$1955 \$484
35703	\$184
35706	\$182
35709	\$116
35710	\$1360
35713	\$1240
35717	\$1505
35720	\$1635
35723	\$1295
35726	\$1295
35729	\$640
35730	\$640
35750	\$2305
35753	\$2550
35754	\$3170
35756	\$2305
35759	\$1615
36502	\$1835
36503	\$3555
36504	
	\$745 \$580
36505	\$580
36506	\$2370
36507	\$985
36508	\$1930
36509	\$2015
36516	\$2370
36519	\$3320
36522	\$2845
36525	\$4030
36526	\$3320
36527	\$4080
36528	\$3320
36529	\$4080
36531	\$2965
36532	\$4255
36533	\$5030
36537	\$1780
36540	\$2845
36543	\$3320
36546	\$1775
36549	\$2135
36552	\$1895
36558	\$1660
36561	\$430
36564	\$2370
36567	\$2605
36570	\$3320
36573	\$2370
36576	\$2965
36579	\$1895
36585	\$1895
36588	\$2370
36591	\$2845
36594	\$2370
36597	\$2370
36600	\$2845
36603	\$3320
36604	\$690
36605	\$2010
36606	\$5925
36607	\$2010
36608	\$780
36609	\$1895
36612	\$1660
36615	\$1895
36618	\$1660
36621	\$1185
36624	\$1420
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36627	\$1780

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Item No.	Medical Fee
36633	\$1895
36636	\$1020
36639	\$2135
36642	\$1065
36645	\$2725
36648	\$2430
36649	\$690
36650	\$435
36652	\$1665
36654	\$2135
36656	\$2730
36663	\$1705
36664	\$1535
36665	\$325
36666 36667	\$860
36668	\$405
36800	\$405 \$71
36803	\$1185
36806	\$1660
36809	\$2135
36811	\$825
36812	\$425
36815	\$600
36818	\$705
36821	\$830
36824	\$545
36825	\$1600
36827	\$595
36830	\$520
36833	\$710
36836	\$595
36840	\$830
36842	\$830
36845	\$1780
36848	\$595
36851	\$595
36854	\$1185 \$050
36857 36860	\$950 \$425
36863	\$1185
37000	\$1895
37004	\$1660
37008	\$1065
37011	\$235
37014	\$2725
37020	\$1895
37023	\$1065
	\$1065
37026 37029	\$2370
37038	\$1780
37040	\$2335
37041	\$118
37042	\$2335
37043	\$1725
37044	\$1780
37045	\$3655
37047	\$4265
37050	\$1895
37053	\$2135
37200	\$2605
37201	\$2115
37202	\$1060
37203	\$2965
37206	\$1420
37207	\$2210
37208	\$1060
37209	\$3320
37210	\$4080

37623

Item	Medical
No.	Fee
37212	\$710
37215	\$1065
37217	\$355
37218	\$355
37219 37220	\$720 \$2715
37221	\$1185
37223	\$510
37224	\$830
37226	\$787
37227	\$2715
37230	\$2965
37233	\$1420
37245	\$3400
37300	\$118
37303 37306	\$190 \$1660
37306	\$1660 \$2270
37315	\$2370 \$355
37318	\$710
37321	\$235
37324	\$595
37327	\$830
37330	\$1660
37333	\$1420
37336	\$1895
37338	\$2335
37339	\$615
37340	\$1090
37341 37342	\$2335 \$2135
37342	\$3560
37345	\$1780
37348	\$1780
37351	\$710
37354	\$830
37369	\$475
37372	\$1185
37375	\$2965
37381	\$1895
37384 37387	\$2965 \$830
37390	\$2370
37393	\$595
37396	\$1895
37402	\$1185
37405	\$2370
37408	\$1185
37411	\$2370
37415	\$120
37417	\$1420
37418	\$1900
37420	\$950
37423 37426	\$2370 \$2490
37420	\$830
37432	\$2370
37435	\$235
37438	\$710
37444	\$2515
37601	\$710
37604	\$705
37605	\$1110
37606	\$1645
37607	\$2370
37610	\$3550
37613 37616	\$710 \$1780
37619	\$1780 \$710
37623	\$595

Item	Medical
No.	Fee
37800	\$1335
37803	\$1335
37806 37809	\$1540 \$1540
37812	\$1340
37815	\$240
37818	\$1265
37821	\$2135
37824	\$2965
37827	\$1375
37830	\$1780
37833	\$850
37836	\$1780
37839	\$2015
37842	\$3915
37845	\$1780
37848	\$3200
37851 37854	\$2370 \$950
37854 38200	\$950 \$1015
38200	\$1015
38206	\$1270
38209	\$1730
38212	\$2720
38213	\$1730
38215	\$1015
38218	\$1525
38220	\$510
38222	\$1015
38225	\$1525
38228	\$2030
38231	\$2540
38234	\$2030
38237	\$2540
38240	\$3045
38241	\$1100
38243	\$1015
38246	\$2540
38256	\$600
38270	\$2195 \$2195
38272 38273	\$2195
38274	\$2195
38275	\$720
38276	\$2195
38285	\$345
38286	\$310
38287	\$5390
38288	\$345
38290	\$6860
38293	\$7365
38300	\$1520
38303	\$1945
38306	\$2245
38309	\$2695
38312	\$3445
38315	\$3700
38318	\$4825
38350	\$1435 \$570
38353	\$570 \$1880
38356 38358	\$1880
38359	\$380
38362	\$990
38365	\$740
38368	\$4330
38371	\$740
38384	\$2700
38387	\$740
38390	\$2705

No. Fee 38393 \$740 38415 \$1105 38418 \$2460 38421 \$3935 38427 \$3240 38430 \$1690 38436 \$660 38438 \$3935 38440 \$2945 38441 \$4665 38446 \$3040 38447 \$4075 38448 \$980 38449 \$5695 38450 \$2350 38451 \$4420 38452 \$1475 38453 \$4420 38456 \$4075 38457 \$3810 38458 \$2020 38460 \$730 38461 \$945 38462 \$870 38463 \$3925 38464 \$945 38468 \$3925 38469 \$4565 38470 \$2855 38473 \$1475 38478	Item	Medical
38415 \$1105 38418 \$2460 38421 \$3935 38427 \$3240 38430 \$1690 38436 \$660 38438 \$3935 38440 \$2945 38441 \$4665 38446 \$3040 38447 \$4075 38448 \$980 38449 \$5695 38450 \$2350 38451 \$2350 38452 \$1475 38453 \$4420 38454 \$4075 38455 \$6185 38456 \$4075 38457 \$3810 38458 \$2020 38460 \$730 38461 \$945 38462 \$870 38463 \$3925 384644 \$945 38468 \$3925 38469 \$4565 38470 \$2855 38473 \$1475 38480		
38418 \$2460 38421 \$3935 38427 \$3240 38430 \$1690 38438 \$3935 38440 \$2945 38441 \$4665 38446 \$3040 38447 \$4075 38448 \$980 38449 \$5695 38450 \$2350 38452 \$1475 38453 \$4420 38456 \$4075 38457 \$3810 38458 \$2020 38460 \$730 38461 \$945 38462 \$870 38463 \$3925 38464 \$945 38469 \$4565 38470 \$2855 38473 \$1475 38478 \$2795 38480 \$5775 38481 \$6470 38482 \$2355 38483 \$4960 384845 \$2355 38487		\$740
38421 \$3935 38424 \$2460 38427 \$3240 38430 \$1690 38436 \$660 38438 \$3935 38440 \$2945 38441 \$4665 38446 \$3040 38447 \$4075 38448 \$980 38449 \$5695 38450 \$2350 38452 \$1475 38453 \$4420 38454 \$420 38456 \$4075 38457 \$3810 38458 \$2020 38460 \$730 38461 \$945 38462 \$870 38463 \$3925 38464 \$945 38468 \$3925 38469 \$4565 38470 \$2855 38471 \$2855 38472 \$2400 38473 \$1475 38474 \$2295 38481		
38424 \$2460 38427 \$3240 38430 \$1690 38436 \$660 38438 \$3935 38440 \$2945 38441 \$4665 38446 \$3040 38447 \$4075 38448 \$980 38449 \$5695 38450 \$2350 38452 \$1475 38453 \$4420 38455 \$6185 38456 \$4075 38457 \$3810 38458 \$2020 38460 \$730 38461 \$945 38462 \$870 38463 \$3925 38464 \$945 38468 \$3925 38469 \$4565 38473 \$1475 38475 \$2400 38477 \$5775 38478 \$2795 38481 \$6470 38483 \$4960 38494		
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Item	Medical
No.	Fee
38609	\$1240
38612	\$1385
38613	\$1730
38615	\$3935
38618	\$4905
38621	\$1960
38624	\$2200
38627	\$1755
38637	\$1425
38640	\$2460
38643	\$2740
38647	\$5485
38650	\$4905
38653	\$4905
38654	\$4330
38656	\$2460
38670	\$4905
38673	\$5520
38677	\$5165
38680	\$6125
38700	\$2745
38703	\$4945
38706	\$4675
38709	\$5485
38712	\$6585
38715	\$4385
38718	\$5485
38721	\$3840
38724	\$5485
38727	\$3845
38730	\$5485
38733	\$3840
38736	\$5485
38739	\$4945
38742	\$4945
38745	\$5485
38748	\$5485
38751	\$5485
38754	\$6865
38757	\$5485
38760	\$5485
38763	\$5485
38766	\$5485
38800	\$112
38803	\$198
38806	\$380
38809	\$440
	- :
38812	\$580
39000	\$211
39003	\$305
39006	\$500
39009	\$200
39012	\$760
39013	\$315
	*
39015	\$1085 \$1040
39018	\$1010
39100	\$760
39106	\$4045
39109	\$1520
39112	\$4045
39115	\$235
39118	\$925
39121	\$2280
39124	\$4675
39125	\$950
39126	\$1150
39127	\$1900
39128	\$2100
39130	\$1945

Item No.	Medical Fee
39133	\$500
39134	\$1085
39135	\$500
39136	\$505
39137	\$1930
39138	\$1945
39139	\$3435
39140	\$945
39300	\$1010
39303	\$1385
39306	\$2145
39309	\$2280
39312	\$1255
39315	\$3285
39318	\$2015
39321	\$1520
39323	\$865
39324	\$890
39327	\$1520
39330	\$890
39331	\$1335
39333	\$1255
39500	\$4045
39503	\$3040
39600	\$1520
39603	\$3780
39606	\$2525
39609	\$3285
39612	\$3780
39615	\$3780
39640	\$9715
39642	\$10145
39646	\$11630
39650	\$8425
39653	\$13800
39654	\$10890
39656	\$8165
39658	\$9650
39660	\$9650
39662	\$9650
39700	\$2015
39703	\$1645
39706	\$3535
39709	\$5055
39712	\$6310
39715	\$6310
39718	\$2775
39721	\$2525
39800	\$6820
39803	\$7200
39806	\$4540
39812	\$2280
39815	\$5810 \$5810
39818	
39821	\$6845
39900	\$1635 \$5055
39903 39906	\$5055 \$2525
	\$2525 \$2525
40000 40003	\$2525 \$2525
40003	\$2015
40009	\$1520
40009	\$3285
40012	\$1870
40018	\$500
40100	\$1825
40103	\$2730
40106	\$3285
40100	Φ0200 Φ2525

Item	Medical
No. 40115	Fee \$2015
40118	\$3040
40600	\$3040
40700	\$5565
40701	\$1260
40702	\$590
40703 40704	\$4675
40704	\$2495 \$2240
40706	\$6820
40707	\$700
40708	\$1260
40709	\$1635
40712	\$3315
40800	\$2030
40801	\$5545
40803	\$3780
40850 40851	\$7160 \$12530
40852	\$1075
40854	\$1665
40856	\$810
40858	\$1665
40860	\$6395
40862	\$600
40903	\$1765
40905	\$1895
41500	\$196 \$520
41501 41503	\$520 \$605
41506	\$400
41509	\$415
41512	\$1500
41515	\$980
41518	\$2385
41521	\$2515
41524	\$725
41527 41530	\$1460 \$2415
41533	\$2415
41536	\$3260
41539	\$2665
41542	\$2920
41545	\$1395
41548	\$1650
41551	\$4050
41554	\$4770
41557	\$2665
41560	\$2920 \$3685
41563 41564	\$3685 \$4920
41566	\$4920 \$2770
41569	\$2920
41572	\$2665
41575	\$6030
41576	\$9050
41578	\$6030
41579	\$4525
41581	\$6940
41584	\$4765
41587	\$6490 \$2920
41590 41593	\$2920 \$3855
41596	\$4310
41599	\$4310
41603	\$1565
41604	\$585
41608	\$2665
41611	\$1780

Item	Medical
No.	Fee
41615	\$2780
41617	\$4820
41618	\$4820
41620	\$2030
41623	\$2920
41626	\$395 \$1270
41629 41632	
41635	\$605 \$2910
41638	\$3630
41641	\$120
41644	\$365
41647	\$270
41650	\$270
41653	\$205
41656	\$335
41659	\$196
41662	\$205
41668	\$605
41671	\$1205
41672	\$1550
41674	\$335
41677	\$255
41683	\$300
41686	\$205
41689 41692	\$330 \$450
41692	
41701	\$81 \$255
41704	\$74
41707	\$1065
41710	\$1335
41713	\$1650
41716	\$700
41719	\$300
41722	\$1500
41725	\$1140
41728	\$2280
41729	\$1450
41731	\$2160
41734	\$2855
41737	\$1145
41740	\$152
41743	\$940
41746	\$2160
41749	\$1575
41752	\$750
41755	\$112
41764	\$310
41767	\$1860 \$1780
41770 41773	\$1780
41776	\$1460
41779	\$1780
41782	\$2420
41785	\$3000
41786	\$1970
41787	\$1450
41789	\$735
41793	\$940
41797	\$400
41801	\$400
41804	\$220
41807	\$178
41810	\$89
41813	\$890
41816	\$475
41822	\$545
41825 41828	\$890 \$140
	n 140

Item	Medical
No.	Fee
41831	\$950
41832	\$585
41834	\$3555
41837	\$3140
41840	\$3865
41843 41855	\$3555 \$800
41858	\$1255
41861	\$1535
41864	\$1065
41867	\$1560
41868	\$1000
41870	\$1130
41873	\$1500
41876	\$1500 \$2420
41879 41880	\$665
41881	\$1055
41884	\$235
41885	\$755
41886	\$450
41889	\$450
41892	\$605
41895	\$875
41898	\$665
41901	\$1570
41904	\$585
41905 41907	\$1070 \$310
41910	\$995
42503	\$290
42504	\$842
42505	\$1620
42506	\$1335
42509	\$1650
42510	\$1840
42512	\$1335
42515	\$1460
42518	\$940
42521	\$3015
42524 42527	\$585 \$1170
42530	\$1170 \$1650
42533	\$990
42536	\$2350
42539	\$3360
42542	\$1395
42543	\$2450
42545	\$3135
42548	\$2820
42551	\$1780
42554	\$2095
42557 42563	\$2920 \$1525
42569	\$1525
42572	\$280
42573	\$595
42574	\$1265
42575	\$235
42581	\$290
42584	\$760
42587	\$128
42588	\$143
42590	\$940
42593	\$585 \$1305
42596 42599	\$1395 \$1505
42602	\$1780
42605	\$1270
42608	\$760

40112

\$3535

\$4540

41614

Item	Medical
No.	Fee
42610	\$250
42611	\$405
42614	\$134
42615	\$190
42617	\$305
42620	\$215
42622	\$220
42623	\$2440
42626	\$2775
42629	\$2575
42632	\$280
42635	\$1625
42638	\$1055
42641	\$1130
42644 42647	\$205 \$585
42650	\$205
42651	\$445
42652	\$2295
42653	\$3490
42656	\$3870
42662	\$2005
42665	\$1505
42667	\$385
42668	\$200
42672	\$2095
42673	\$1140
42676	\$315
42677	\$146
42680	\$760
42683	\$310
42686	\$700
42689	\$290
42692	\$760
42695	\$1165
42698	\$3220
42701	\$1780
42702	\$4105
42703	\$1335
42704	\$1080
42705	\$2552
42707	\$1875
42710	\$2105
42713	\$880
42716 42719	\$3240 \$1460
42725	\$3490
42731	\$3955
42734	\$875
42738	\$880
42739	\$880
42740	\$880
42741	\$880
42743	\$1780
42744	\$795
42746	\$2605
42749	\$3230
42752	\$3610
42755	\$450
42758	\$1905
42761	\$1460
42764	\$1270
42767	\$2920
42770	\$800
42773	\$2095
42776	\$3175
42779	\$3180
42782	\$1055
42785	\$830
42788	\$830

Item No.	Medical Fee
42791	\$830
42794	\$154
42801	\$2785
42802	\$1390
42805	\$1555
42806	\$830
42807	\$965
42808	\$965
42809	\$1140
42810	\$1500
42811	\$1195
42812	\$470
	\$1520
42815	
42818	\$1395
42821	\$235
42824	\$178
42833	\$1650
42836	\$1945
42839	\$1905
42842	\$2325
42845	\$485
42848	\$1905
42851	\$1905
42854	\$950
42857	\$1055
42860	\$2255
42863	\$2135
42866	\$1900
42869	\$1330
42872	\$640
43021	\$1765
43022	\$1940
43023	\$480
43500	\$310
43503	\$535
43506	\$890
43509	\$890
43512	\$890
43515	\$890
43518	\$1500
43521	\$1300 \$1155
43524	\$1500
10001	00.40=
43801 43804	\$2425 \$2585
	\$2585
43807	\$2820 \$3285
43810	
43813	\$3285
43816	\$3050
43819	\$2465
43822	\$2465
43825	\$2820
43828	\$3115
43831	\$2425
43834	\$2820
43837	\$3520
43840	\$3050
43843	\$4695
43846	\$5050
43849	\$1290
43852	\$4110
43855	\$4345
43858	\$1525
43861	\$4225
43864	\$3170
43867	\$1760
43870	\$2465
43873	\$3285
43876	\$2820
42070	\$2020 \$2005

Item	Medical
No. 43900	Fee \$2780
43903	\$4635
43906	\$4060
43909	\$4060
43912	\$3835
	-
43915	\$2900
43930	\$1245
43933	\$1315
43936	\$2450
43939	\$1865
43942	\$585
43945	\$2450
43948	\$350
43951	\$2195
43954	\$2685
43957	\$2915
43960	\$1025
43963	\$4085
43966	\$4665
43969	\$6415
43972	\$4665
43975	\$5485
43978	\$4665
43981	\$1285
43984	\$3265
43987	\$3615
43990	\$4435
43993	\$4785
43996	\$5365
43999	\$670
44102	\$645
44105	\$114
44130	\$1165
44133	\$925
44136	\$425
44325	\$760
44328	\$890
44331	\$1500
44334	\$2985
44338	\$405
44342	\$610
44346	\$815
44350	\$1015
44354	\$1220
44358	\$510
44359	\$830
44361	\$890
44361	
	\$760 \$1310
44367	\$1310
44370	\$1840
44373	\$3745
44376	*Derived
45000	\$1640
45003	\$1825
45006	\$3145
45009	\$995
45012	\$1680
45015	\$910
45018	\$1565
45019	\$1165
45021	\$465
	\$1170
45024	
45025	\$465
45026	\$1050
45027	\$365
45030	\$350
45033	\$730
45035	\$2050
45036	\$3420
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Item	Medical
No. 45042	Fee \$935
45045	\$935
45048	\$2260
45051	\$1395
45054	\$635
45200	\$820
45201	\$1205
45202	\$1205
45203	\$1225
45206	\$1165
45207	\$1160
45209	\$1565
45212	\$775
45215	\$3390
45218	\$1520
45221	\$845
45224	\$380
45227 45230	\$1490
	\$820 \$1635
45233 45236	\$1635 \$1240
45239	\$760
45239	\$760
45400	\$615
45403	\$1225
45406	\$1370
45409	\$1995
45412	\$3050
45415	\$3655
45418	\$4320
45439	\$820
45442	\$1750
45445	\$1710
45448	\$1140
45451	\$1375
45460	\$4160
45461	\$2965
45462	\$2140
45464	\$6350
45465	\$4525
45466	\$3265
45468	\$6345
45469 45471	\$4225
	\$7980
45472	\$6020
45474 45475	\$9605 \$7245
45475	\$11700
45478	\$8825
45480	\$13395
45481	\$10105
45483	\$15260
45484	\$11515
45485	\$2530
45486	\$1830
45487	\$1195
45488	\$1660
45489	\$2495
45490	\$3325
45491	\$4985
45492	\$5985
45493	\$1195
45494	\$7900
45400	\$1200
45496	\$940
45497	
45497 45498	\$755
45497 45498 45499	\$755 \$565
45497 45498	\$755

Item	Medical
No.	Fee
45503	\$5230
45504	\$4950
45505 45506	\$4950 \$615
45512	\$830
45515	\$570
45518	\$685
45519	\$1295
45520	\$2725
45522	\$1910
45524	\$1985
45527	\$1990
45528	\$2985
45530	\$2935
45533	\$3330
45536	\$1225
45539	\$2860 \$1635
45542 45545	\$1635 \$1910
45546	\$605
45548	\$845
45551	\$1345
45553	\$1785
45554	\$2120
45556	\$2315
45558	\$3470
45560	\$1375
45561	\$5070
45562	\$3315
45563	\$3315
45564	\$7695
45565	\$5770
45566	\$2860
45568	\$1345
45569	\$1770
45570	\$2345
45572 45575	\$890 \$2120
45578	\$2470
45581	\$845
45584	\$1915
45587	\$2305
45588	\$3455
45590	\$1255
45593	\$1475
45596	\$2425
45597	\$3290
45599	\$1915
45602	\$1980
45605	\$1635
45608	\$2190
45611	\$1565
45614	\$1575
45617	\$615
45620	\$845
45623 45624	\$2265 \$2735
45625	\$765
45626	\$845
45627	\$913
45629	\$1375
45632	\$1505
45635	\$1780
45641	\$3155
45644	\$3695
45645	\$620
45646	\$2505
45647	\$3695
45650	\$410
45652	\$925

43882

\$3285

Item	Medical
No.	Fee
45653	\$925
45656	\$1985
45659	\$1415
45660	\$8105
45661	\$3605
45662	\$2060
45665	\$970
45668	\$965
45669	\$965
45671	\$2820
45674	\$845
45675	\$1345
45676	\$1600
45677	\$1680
45680	\$1915
45683	\$2265
45686	\$2515
45689	\$740
45692	\$700
45695	\$1330
45698	\$1300
45701	\$2980
45704	\$850
45707	\$2045
45710	\$1225
45713	\$1550
45714	\$2170
45716	\$2190
45720	\$2540
45723	\$3090
45726	\$3240
45729	\$3920
45731	\$3665
45732	\$4475
45735	\$4235
45738	\$5135
45741	\$4645
45744	\$5645
45747	\$5080
45752	\$6135
45753	\$6080
45754	\$7290
45755	\$1175
45758	\$2070
45761	\$1955
45767	\$6615
45770	\$5040
45773	\$4600
45776	\$4600
45779	\$3390
45782	\$2585
45785	\$4380
45788	\$4325
45791	\$2350
45794	\$1525
45797	\$570
45799	\$89
45801	\$380
45803	\$980
45805	\$520
45807	\$745
45809	\$1120
45811	\$1515
45813	\$1770
45815	\$890
45817	\$1155
	\$1500
45819	
45819 45821	
	\$1230 \$330

Item	Medical
No.	Fee
45827	\$975
45829	\$745
45831 45833	\$975 \$1225
45835	\$1520
45837	\$1765
45839	\$1765
45841	\$1425
45843	\$875
45845	\$1525
45847	\$522
45849	\$1750
45851 45853	\$430 \$2495
45855	\$1230
45857	\$1970
45859	\$1020
45861	\$2630
45863	\$2915
45865	\$875
45867	\$965
45869	\$3580
45871	\$4035
45873	\$4530
45875 45877	\$1460
45879	\$1460 \$965
45882	\$104
45885	\$1030
45888	\$765
45891	\$1820
45894	\$615
45897	\$3405
45900	\$730
45939	\$1030
45945 45975	\$290
45978	\$400 \$490
45981	\$265
45984	\$1910
45987	\$1910
45990	\$2610
45993	\$2610
45996	\$740
46300	\$1085
46303	\$1190 \$1815
46306 46307	\$1815
46309	\$1700
46312	\$2115
46315	\$2820
46318	\$3525
46321	\$4225
46324	\$2610
46325	\$2725
46327	\$675
46330	\$1120
46333	\$1830
46336	\$850
46339 46342	\$1495 \$1495
46345	\$1830
46348	\$815
46351	\$1220
46354	\$1625
46357	\$2030
46360	\$2440
46363	\$680
46366	\$415

Item	Medical
No.	Fee
46372	\$1375
46375	\$1640
46378	\$2170 \$960
46381 46384	\$960
46387	\$1980
46390	\$2670
46393	\$3085
46396	\$1065
46399	\$1675
46402	\$1675
46405	\$2045
46408	\$2235
46411	\$1355
46414 46417	\$1700 \$1625
46420	\$675
46423	\$1085
46426	\$1005
46429	\$1355
46432	\$1380
46435	\$1625
46438	\$440
46441	\$1085
46442	\$910
46444	\$1565
46447	\$1960
46450	\$675
46453	\$1215
46456	\$325
46459	\$605
46462	\$960 \$730
46464 46465	\$730 \$725
46468	\$1260
46471	\$1830
46474	\$2360
46477	\$2895
46480	\$1210
46483	\$960
46486	\$725
46489	\$855
46492	\$1165
46494	\$590
46495	\$655
46498	\$710
46500	\$850 \$1065
46501 46502	\$1065 \$980
46503	\$960 \$1225
46504	\$3550
46507	\$4160
46510	\$1135
46513	\$182
46516	\$365
46519	\$455
46522	\$1360
46525	\$182
46528	\$550
46531	\$275
46534	\$760
47000	\$146
47003	\$174
47006	\$350
47009	\$350
47012 47015	\$695 \$174
47015	\$174 \$410
47018 47021	\$410 \$545
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Item	Medical
No. 47027	Fee \$545
47027	\$343
47033	\$545
47036	\$176
47039	\$235
47042	\$235
47045	\$310
47048	\$670
47051	\$905
47054	\$670
47057	\$265
47060 47063	\$350 \$525
47066	\$700
47069	\$146
47072	\$194
47301	\$270
47304	\$305
47307	\$620
47310	\$1020
47313	\$995
47316	\$1965
47319	\$2015
47348	\$290
47351	\$730
47354	\$520
47357	\$1170
47361	\$410
47362	\$615
47364	\$870
47367	\$695
47370	\$1260
47373	\$900
47378 47381	\$525 \$790
47384	\$1055
47385	\$900
47386	\$1460
47387	\$845
47390	\$1260
47393	\$1685
47396	\$585
47399	\$1170
47402	\$875
47405	\$585
47408	\$1170
47411	\$350
47414	\$700
47417	\$820
47420	\$1595
47423	\$670
47426	\$1010
47429	\$1350 \$1685
47432 47435	\$1685 \$1280
47435	\$1280
47441	\$2540
7/771	\$700
47444	
47444 47447	
47447	\$1055
47447 47450	\$1055 \$1395
47447	\$1055
47447 47450 47451	\$1055 \$1395 \$1690 \$820
47447 47450 47451 47453	\$1055 \$1395 \$1690
47447 47450 47451 47453 47456	\$1055 \$1395 \$1690 \$820 \$1215
47447 47450 47451 47453 47456 47459	\$1055 \$1395 \$1690 \$820 \$1215 \$1640
47447 47450 47451 47453 47456 47459 47462 47465 47466	\$1055 \$1395 \$1690 \$820 \$1215 \$1640 \$350
47447 47450 47451 47453 47456 47459 47462 47465 47466 47467	\$1055 \$1395 \$1690 \$820 \$1215 \$1640 \$350 \$700 \$345 \$700
47447 47450 47451 47453 47456 47459 47462 47465 47466	\$1055 \$1395 \$1690 \$820 \$1215 \$1640 \$350 \$700 \$345

Item	Medical
No.	Fee
47474	\$585
47477	\$730
47480 47483	\$1460 \$1750
47486	\$2920
47489	\$4380
47492	\$730
47495	\$1460
47498	\$2180
47501	\$2920
47504	\$4380
47507	\$4380
47510	\$4380
47513 47516	\$1170 \$1345
47510	\$2685
47522	\$2335
47525	\$2685
47528	\$2335
47531	\$2980
47534	\$3360
47537	\$1345
47540	\$670
47543	\$700
47546	\$1055 \$1205
47549 47552	\$1395 \$1170
47555	\$1755
47558	\$2340
47561	\$845
47564	\$1260
47565	\$2205
47566	\$2815
47567	\$1460
47570	\$1685
47573	\$2115
47576	\$350
47579 47582	\$495
47585	\$1020 \$1315
47588	\$4090
47591	\$4965
47594	\$670
47597	\$1010
47600	\$1345
47603	\$1750
47606	\$730
47609	\$1100 \$1260
47612 47615	\$1260 \$1460
47615 47618	\$1460 \$1820
47618	\$1260
47624	\$1755
47627	\$495
47630	\$1055
47633	\$350
47636	\$520
47639	\$700
47642	\$465
47645	\$700
47648	\$920
47651 47654	<u>\$730</u> \$1100
47657	\$1460
47663	\$435
47666	\$730
47672	\$350
47678	\$520
47726	\$440
47729	\$730

Item	Medical
No.	Fee
47732	\$1170
47735	\$121
47738	\$1055
47741	\$1440
47753	\$1260
47756	\$1260
47762	\$740
47765	\$1215
47768	\$1485
47771	\$1710
47774	\$1350
47777	\$1350
47780	\$1755
47783	\$1755
47786	\$2225
47789	\$2225
47900	\$555
47903	\$770
47904	\$186
47906	\$370
47912	\$186
47915	\$560
47916	\$280
47918	\$770
47920	\$1230
47921	\$370
47924	\$124
47927	\$465
47930	\$865
47933	\$680
47936	\$835
47948	\$525
47951	\$395
47954	\$1245
47957	\$945
47960	\$430
47963	\$710
47966	\$1430
47969	\$865
47972	\$690
47975	\$1210
47978	\$735
47981	\$495
47982	\$1180
48200	\$2335
48203	\$2835
48206	\$1750
48209	\$2250
48212	\$1750
48215	\$2250
48218	\$1750
48221	\$2335
48224	\$2333 \$1170
48227	\$1170
48230	\$1320
48233	\$1900
48236	\$2485
48239	\$1375
48242	\$1900
	\$1900 \$1020
48400	
48403	\$1605 \$1020
48406	\$1020 \$1605
48409	\$1605 \$1055
48412	\$1955
48415	\$2485
48418	\$1955
48421	\$2485
48424	\$2335 \$2835
48427 48500	\$1020

Item	Medical
No.	Fee
48503	\$1020
48506	\$1520
48509	\$730
48512	\$2775
48900	\$875
48903	\$1750
48906	\$1750
48909	\$2335
48912	\$1020
48915	\$2335
48918	\$4675
48921	\$4820
48924	\$5550
48927	\$1140 \$2335
48930	
48933	\$3065
48936	\$2335
48939	\$3360
48942	\$4380
48945	\$845
48948	\$1900
48951	\$2775 \$2920
48954 48957	
	\$3360
48960	\$2920
49100	\$1020
49103 49106	\$2190 \$2920
	,
49109	\$2190 \$2190
49112	:
49115	\$3505
49116	\$4620
49117	\$5545
49118 49121	\$845 \$1900
49200	\$2540
49203	
	\$1900 \$1750
49206 49209	\$2335
49210	\$3080
49211	\$3695
49211	\$730
49215 49218	\$2015 \$845
49216	\$1900
49224	\$2190
49227	\$2190
49300	\$1605
49303	\$1605
49303	\$3360
49309	\$2335
49312	\$2920
49315	\$2630
49318	\$4090
49319	\$7145
49321	\$4965
49324	\$5840
49327	\$6720
49330 49333	\$6720 \$7595
49336	\$730 \$8615
49339	\$8615
49342	\$8615
49345	\$10220
49346	\$2625
49360	\$1065
49363	\$1285
49366	\$1895 \$1470
49500 49503	\$1170 \$1520

Item	Medical
No. 49506	Fee \$2305
49509	\$2340
49512	\$3360
49515	\$2630
49517	\$3750
49518	\$4090
49519	\$7145
49521	\$4965
49524	\$5840
49527	\$4965
49530	\$6135
49533	\$7010
49534	\$1410
49536	\$2920
49539	\$2920
49542	\$4090
49545	\$2335
49548	\$2970
49551	\$4145
49554	\$5840
49557	\$845
49558	\$845
49559	\$1410
49560	\$1900
49561	\$2320
49562	\$2535
49563	\$2775
49564	\$2880
49566	\$3065
49569	\$2340
49700	\$845
49703	\$1900
49706	\$1020
49709	\$2190
49712	\$2335
49715	\$3505
49716	\$4620
49717	\$5545
49718	\$1170
49721	\$730
49724	\$2045
49727	\$875
49728	\$1660
49800	\$410
49803	\$525
49806	\$410
49809	\$670
49812	\$1345
49815	\$2335
49818	\$845
49821	\$1345
49824	\$2350
49827	\$1460
49830	\$2555
49833	\$1605
49836	\$2775
49837	\$2025
49838	\$3495
49839	\$1605
49842	\$2775
49845	\$1460
49848	\$495
49851	\$645
49854	\$1170
49857	\$1080
49860	\$875
49863	\$1315
49866	\$935 \$476
49878	\$176

Item	Medical
No.	Fee
50102	\$1890
50103	\$1020
50104	\$965
50106	\$1460
50109	\$1460
50112	\$1110
50115	\$435
50118	\$1345
50121	\$2630
50127	\$2165
50130	\$965
50200	\$585
50201	\$1485
50203	\$1285
50206	\$1900
50209	\$2335
50212	\$4235
50215	\$5550
50218	\$7215
50221	\$6425
50224	\$7595
50227	\$8615
50227	\$4380
50233	\$5840
50236	\$4380
50239	\$2920
50300	\$3390
50303	\$4625
50306	\$7225
50309	\$895
50312	\$2050
50315	\$2030
50318	\$2030
50321	\$2720
50324	\$4040
50327	\$4730
50330	\$670
50333	\$1805
50336	\$2700
50339	\$1645
50342	\$1910
50345	\$1015
50348	\$670
50349	\$985
50351	\$4685
50352	\$176
50353	\$1100
50354	\$3835
50357	\$1645
50360	\$1910
50363	\$1460
50366	\$2555
50369	\$1910
50372	\$3350
50375	\$1460
50378	\$2555
50381	\$1910
50384	\$3350
50387	\$1910
50390	\$670
50393	\$2475
50394	\$8130
50396	\$1360
50399	\$2700
50402	\$1240
50405	\$1685
50408	\$2925
50411	\$3835
E0444	\$5175
50414	ψυί/υ

Item	Medical
No.	Fee
50420	\$3165
50423 50426	\$2920 \$1360
50450	\$3605
50451	\$3605
50455	\$4085
50456	\$4085
50460	\$6100
50461	\$6100 \$8590
50465 50466	\$8590
50470	\$10895
50471	\$10895
50475	\$12570
50476	\$12570
50500	\$980
50504	\$1305
50508 50512	\$1400 \$1865
50512	\$1260
50510	\$1200
50524	\$1520
50528	\$2335
50532	\$2030
50536	\$2705
50540	\$1865
50544	\$935
50548 50552	\$1865 \$1610
50556	\$2145
50560	\$1680
50564	\$2240
50568	\$1960
50572	\$2615
50576	\$2145
50580	\$2240
50584	\$2145
50588 50600	\$2800 \$1550
50604	\$6585
50608	\$12230
50612	\$17395
50616	\$2210
50620	\$12230
50624	\$12230
50628	\$15110
50632	\$12700 \$14110
50636 50640	\$14110 \$7800
50644	\$7525
50650	\$1470
50654	\$1760
50658	\$700
50950	\$2305
50952	\$2305
51011 51012	\$5945 \$6880
51012	\$8600
51014	\$10320
51015	\$12040
51020	\$1955
51021	\$3565
51022	\$4435
51023	\$5280
51024 51025	\$6340 \$7250
51025	\$7950
51031	\$2920
51032	\$3505
51033	\$4090

\$1520

50100

Item	Medical
No.	Fee
51034	\$4380
51035	\$4675
51036	\$4965
51041	\$3360
51041	\$4700
51042	\$5885
51044	\$6385
51045	\$6720
51051	\$7540
51052	\$9170
51053	\$10435
51054	\$5565
51055	\$8345
51056	\$9735
51057	\$6425
51058	\$7230
51059	\$8835
51061	\$8385
51062	\$10895
51063	\$13205 \$15250
51064	\$15250
51065	\$16465
51066	\$17155
51071	\$6695
51072	\$6960
51073	\$8835
51102	\$3240
51103	\$6620
51110	\$2335
51111	\$995
51112	\$670
51113	\$745
51113	\$1315
_	
51115	\$1315
51120	\$730
51130	\$5720
51131	\$5720
51140	\$1375
51141	\$2540
51145	\$905
51150	\$1100
51160	\$3145
51165	\$3965
51170	\$6955
	*
51171 51300	\$2925 \$255
51303	*Derived
51306	\$349
51309	*Derived
51312	*Derived
51315	\$763
51318	\$504
51700	\$182
51703	\$97
51800	\$255
51803	*Derived
51900	\$905
51902	\$193
51904	\$1155
51904	\$1730
52000	\$205
52003	\$310
52006	\$310
52009	\$530
52010	\$720
	\$62
52012	
52015	\$280
52015 52018	\$280 \$775
52015	

Item No.	Medical Fee
52025	\$530
52027	\$490
52030	\$235
52033	\$525
52034	\$104
52035	\$1345
52036	\$380
52039	\$980
52042	\$520
52045	\$745
52048	\$1120
52051	\$1515
52054	\$1770
52055	\$65
52056	\$65
52057	\$420
52058	\$675
52059	\$755
52060	\$425
52061	\$630
52062	\$840
52063	\$905
52064	\$555
52066	\$980
52069	\$555
52072	\$168
52073	\$425
52075	\$420
52078	\$840
52081	\$130
52084	\$330
52087	\$555
52090	\$890
52092	\$1155
52094	\$1500
52095	\$1230
52096	\$370
52097	\$525
52098	\$395
52099	\$124
52102	\$465
52105	\$865
52106 52108	\$330
	\$970 \$965
52111 52114	\$1635
52117	\$1033
52120	\$2164
52122	\$2190
52123	\$1915
52126	\$2425
52129	\$3290
52130	\$1375
52131	\$1900
52132	\$665
52133	\$235
52135	\$405
52138	\$1065
52141	\$1030
52144	\$765
52147	\$995
52148	\$1995
52158	\$3095
52180	\$585
52182	\$1285
52184	\$1900
52186	\$2335
52300	\$820
E2202	¢1225

	84111
ltem No.	Medical Fee
52309	\$615
52312	\$820
52315	\$1375
52318	\$440
52319	\$730
52321	\$1395
52324	\$1565
52327	\$775
52330	\$2170
52333	\$2045
52336	\$1225
52337 52339	\$3405 \$1550
52342	\$2540
52345	\$3090
52348	\$3240
52351	\$3920
52354	\$3665
52357	\$4475
52360	\$4235
52363	\$5135
52366	\$4645
52369	\$5645
52372	\$5080
52375	\$6135
52378	\$1955
52379	\$3695
52380	\$6080
52382	\$7290
52420	\$730
52424	\$1565
52430	\$3080
52440	\$1680
52442	\$1915
52444 52446	\$2265 \$2515
52450	\$700
52452	\$1330
52456	\$2980
52458	\$850
52460	\$2046
52480	\$1985
52482	\$1345
52484	\$1600
52600	\$1020
52603	\$975
52606	\$745
52609	\$975
52612	\$1225
52615	\$1520
52618	\$1765
52621	\$1765
52624	\$1425
52626	\$875
52627	\$1525
52630	\$570
52633	\$1525 \$570
52636	\$570
52800	\$890 \$1255
52803	
52806	\$890 \$1520
52809 52812	\$1520
52815	\$2145
52818	\$1520
52821	\$3285
52824	\$1030
52826	\$760
52828	\$1010
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Item	Medical
No.	Fee
52832	\$2015
53000	\$81
53003	\$255
53004	\$74
53006	\$1335
53009	\$700
53012	\$300
53015	\$1500
53016	\$1205
53017	\$1550
53019	\$1750
53052	\$321
53054	\$310
53056	\$205
53058	\$335
53060	\$335
53062	\$255
53064	\$426
53068	\$330
53070	\$450
53200	\$146
53203	\$290
53206	\$430
53209	\$4325
53212	\$2350
53215	\$1230
53218	\$1970
53220	\$1020
53221	\$2630
53224	\$2915
53225	\$875
53226	\$965
53227	\$3580
53230	\$4035
53233	\$4530
53236	\$1460
53239	\$1460
53242	\$965
53400	\$400
53403	\$490
53406	\$1260
53409	\$1260
53410	\$265
53411	\$740
53412	\$1215
53413	\$1485
53414	\$1710
53415	\$1710
53416	\$1350
53418	\$1755
53419	\$1755
53422	\$1755
53423	
53423	\$2225 \$1010
	\$1910 \$1010
53425	\$1910 \$2610
53427	\$2610
53429	\$2610
53439	\$740
53453	\$1255
53455	\$1475
53458	\$113
53459	\$1055
53460	\$1440
53700	\$327
53702	\$164
53704	\$98
53706	\$327
55028	\$218
55029	\$76
55030	\$218

Item	Medical
No.	Fee
55031	\$76
55032	\$218
55033 55036	\$76 \$223
55037	\$76
55038	\$218
55039	\$76
55048	\$219
55049	\$76
55054 55065	\$218 \$197
55066	\$436
55068	\$70
55070	\$197
55071	\$415
55073	\$68
55076 55079	\$218 \$76
55084	\$197
55085	\$68
55113	\$461
55114	\$461
55115	\$461
55116	\$523 \$523
55117 55118	\$523 \$551
55130	\$340
55135	\$707
55238	\$339
55244	\$339
55246	\$339
55248 55252	\$339 \$339
55274	\$339
55276	\$339
55278	\$339
55280	\$339
55282	\$339
55284 55292	\$339 \$339
55294	\$339
55296	\$222
55600	\$218
55603	\$218
55700	\$120
55703 55704	\$70 \$140
55705	\$70
55706	\$200
55707	\$140
55708	\$70
55709	\$76
55712	\$230
55715 55718	\$80 \$200
55721	\$230
55723	\$76
55725	\$80
55729	\$55
55736	\$254
55739 55759	\$114 \$300
55762	\$300 \$120
55764	\$320
55766	\$130
55768	\$300
55770	\$120 \$220
55772 55774	\$320 \$130
55812	\$130
00012	Ψ=10

52306

\$1225

\$1820

52830

Item	Medical
No.	Fee
55814	\$76
55844	\$175
55846	\$76
55848	\$273
55850	\$361
55854	\$76
55856	\$218
55857	\$76
55858	\$242
55859	\$84
55860	
55861	\$218 \$76
55862	\$242
55863	\$84
55864	\$218
55865	\$76
55866	\$242
55867	\$84
55868	\$218
55869	\$76
55870	\$242
55871	\$84
55872	\$218
55873	\$76
55874	\$242
55875	\$84
55876	\$218
55877	\$76
55878	\$242
	\$84
55879	
55880	\$218
55881	\$76
55882	\$242
55883	\$84
55884	\$218
55885	\$76
55886	\$242
55887	\$84
55888	\$218
55889	\$76
55890	\$242
55891	\$84
55892	\$218
55893	\$76
55894	\$242
55895	\$84
56001	\$390
56007	\$500
56010	
	\$504 \$500
56013	\$500
56016	\$580
56022	\$450
56028	\$674
56030	\$450
56036	\$674
56101	\$460
56107	\$680
56219	\$652
56220	\$480
56221	\$480
56223	\$480
56224	\$703
56225	\$703
56226	\$703
56233	\$480
56234	\$703
56237	\$480
	\$703
56238 56301	\$590

ltem	Medical
No.	Fee
56401	\$500
56407	\$720
56409	\$500
56412	\$720
56501	\$770
56507	\$960
56553	\$1040
56620	\$440
56622	\$440
56623	\$669
56626	\$669
56627	\$440
56628	\$669
56629	\$440
56630	\$669
56801	\$933
56807	\$1120
57001	\$933
57007	\$1136
57201	\$310
57341	\$940
57351	\$1020
57352	\$1020
57353	\$1020
57354	\$1020
57360	\$1400
57362	\$226
57506	\$60
57509	\$80
57512	\$81
57515	\$108
57518	\$65
57521	\$87
57522	\$65
57523	\$87
57524	\$99
57527	\$132
57527 57541	\$147
57700	\$147 \$81
57703	\$108
57706	\$65
57709	\$87
57712 57715	\$94 \$122
57715 57721	\$122 \$199
57901	\$129 \$120
57902	\$129
57905	\$129
57907 57015	\$95
57915	\$94
57918	\$94
57921	\$94
57924	\$94
57927	\$99
57930	\$66
57933	\$157
57939	\$129
57942	\$99
57945	\$87
57960	\$95
57963	\$95
57966	\$95
57969	\$95
58100	\$134
58103	\$110
58106	\$154
58108	\$220
58108 58109	
	\$94 \$195

Item No.	Medical Fee
58120	\$220
58121	\$220
58300	\$80
58306	\$179
58500	\$71
58503	\$94
58506	\$122
58509	\$80
58521	\$87
58524	\$113
58527	\$139
58700 58706	\$92 \$316
<u>58706</u> 58715	\$303
58718	\$252
58721	\$277
58900	\$71
58903	\$95
58909	\$180
58912	\$221
58915	\$158
58916	\$277
58921	\$271
58927	\$153
58933	\$411
58936	\$392
58939	\$279
59103	\$43
59300	\$179
59302	\$404
59303	\$108
59305	\$228
59312	\$174
59314 50319	\$105
59318 50700	\$94
59700 59703	\$193 \$152
59712	\$227
59718	\$269
59724	\$453
59733	\$215
59739	\$148
59751	\$278
59754	\$439
59763	\$268
59903	\$229
59912	\$610
59925	\$725
59970	\$337
60000	\$1128
60003	\$1654
60006	\$2352
60009	\$2753
60012	\$1128
60015	\$1654
60018	\$2352
60021	\$2753
60024	\$1128
60027	\$1654
60030 60033	\$2352 \$2753
60033 60036	\$2753 \$1128
60039 60042	\$1654 \$2352
60042	\$2753
60048	\$1128
60046 60051	\$1654
60054	\$2352
6005 4 60057	\$2753
	\$1128

No. Fee 60063 \$1654 60066 \$2352 60069 \$2753 60072 \$96 60075 \$192 60078 \$289 60500 \$87 60503 \$60 60506 \$128 60509 \$198 60918 \$94 60927 \$76 61109 \$518 61302 \$899 61303 \$1131 61304 \$1670 61310 \$735 61311 \$1131 61313 \$607 61314 \$840 61328 \$455 61331 \$1670 61333 \$887 61334 \$840 61333 \$887 61334 \$1210 61337 \$960 61341 \$1201 61344 \$200 61341 \$1201 61348 \$887	Item	Medical
60066 \$2352 60069 \$2753 60072 \$96 60075 \$192 60078 \$289 60500 \$87 60503 \$60 60506 \$128 60509 \$198 60918 \$94 60927 \$76 61109 \$518 61302 \$899 61303 \$1131 61307 \$1670 61310 \$735 61311 \$1131 61313 \$607 61314 \$840 61328 \$455 61332 \$1670 61333 \$887 61333 \$887 61334 \$120 61344 \$200 61344 \$201 61344 \$200 61348 \$887 61353 \$773 61366 \$786 61361 \$923 61364 \$994 <		
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60918 \$94 60927 \$76 61109 \$518 61302 \$899 61303 \$1131 61306 \$1419 61307 \$1670 61311 \$1131 61313 \$607 61314 \$840 61328 \$455 61332 \$1670 61333 \$887 61336 \$1210 61337 \$960 61340 \$506 61341 \$1201 61342 \$200 61343 \$887 61353 \$773 61366 \$786 61353 \$773 61356 \$786 61360 \$807 61361 \$923 61362 \$446 61363 \$446 61369 \$4032 61372 \$446 61373 \$979 61376 \$287 61381 \$1149	60506	\$128
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61461 \$1056		
	61461	\$1056

Item	Medical
No.	Fee
61462	\$258
61469	\$696
61473 61480	\$351 \$774
61485	\$1998
61495	\$446
61499	\$506
61505	\$200
61523	\$1906
61524	\$1906
61525	\$1906
61529 61538	\$1906 \$1802
61541	\$1906
61553	\$1998
61559	\$1836
61565	\$1906
61571	\$1906
61575	\$1906
61577	\$1906 \$1006
61598 61604	\$1906 \$1906
61610	\$1906
61620	\$1906
61622	\$1906
61628	\$1906
61632	\$1906
61640	\$1998
61646 61647	\$1998
61650	\$1906 \$1757
63001	\$404
63004	\$404
63007	\$404
63010	\$336
63040	\$336
63043	\$359
63046 63049	\$404
63052	\$404 \$404
63055	\$404
63058	\$404
63061	\$404
63064	\$404
63067	\$404
63070	\$404
63073 63101	\$404 \$493
63111	\$493
63114	\$493
63125	\$493
63128	\$493
63131	\$493
63151	\$359
63154 63161	\$359 \$359
63164	\$359
63167	\$359
63170	\$359
63173	\$359
63176	\$359
63179	\$359
63182	\$359 \$350
63185 63201	\$359 \$448
63204	\$448
63219	\$448
63222	\$448
63225	\$448
63228	\$448

58115

Item	Medical
No.	Fee
63231	\$448
63234	\$448
63237	\$448
63240	\$448
63243	\$448 \$403
63271 63274	\$493 \$493
63277	\$493
63280	\$493
63301	\$381
63304	\$381
63307	\$381
63322	\$404
63325	\$404
63328	\$404
63331	\$404
63334 63337	\$336 \$448
63340	\$404
63361	\$404
63385	\$448
63388	\$448
63391	\$403
63395	\$856
63397	\$856
63401	\$404
63404	\$404
63416	\$404
63425	\$404
63428	\$404
63440 63443	\$404
	\$404 \$404
63446 63454	\$1200
63460	\$600
63461	\$359
63464	\$690
63467	\$690
63470	\$404
63473	\$628
63476	\$404
63482	\$404
63487	\$690
63489	\$1440
63491 63494	\$45 \$45
63496	\$250
63497	\$157
63498	\$45
63499	\$157
63501	\$500
63502	\$500
63507	\$403
63510	\$448
63513	\$404
63516	\$404
63519	\$404 \$448
63522 63531	\$448 \$690
63533	\$690
63545	\$550
63546	\$550
63547	\$690
63551	\$404
63554	\$359
63557	\$493
63560	\$404
65060	\$22
65066	\$29
65070	\$47

Item	Medical
No. 65072	Fee \$28
65075	\$144
65078	\$250
65079	\$250
65081	\$265
65082	\$265
65084	\$465
65087 65090	\$240 \$31
65093	\$61
65096	\$112
65099	\$305
65102	\$460
65105	\$305
65108	\$460
65109	\$36
65110 65111	\$36 \$64
65114	\$25
65117	\$56
65120	\$38
65123	\$56
65126	\$77
65129	\$98
65137	\$70
65142 65144	\$70 \$156
65147	\$104
65150	\$196
65153	\$390
65156	\$585
65157	\$196
65158	\$196
65159	\$196
65162 65165	\$29 \$95
65166	\$95
65171	\$70
65175	\$70
65176	\$134
65177	\$198
65178	\$265
65179 65180	\$325 \$70
65181	\$64
66500	\$27
66503	\$32
66506	\$38
66509	\$44
66512	\$49
66517	\$54
66518	\$55 \$112
66519 66536	\$112 \$32
66539	\$84
66542	\$52
66545	\$44
66548	\$55
66557	\$27
66560	\$56
66563 66566	\$68 \$93
66569	\$93 \$118
66572	\$142
66575	\$166
66578	\$192
66581	\$215
66584	\$27
66587	\$130 \$84

Item	Medical
No. 66593	Fee \$53
66596	\$95
66605	\$84
66606	\$84
66607	\$205
66610	\$205
66623 66626	\$114 \$66
66629	\$56
66632	\$56
66635	\$56
66638	\$80
66639	\$80
66641 66642	\$80 \$80
66644	\$56
66647	\$124
66650	\$67
66651	\$67
66652	\$56
66653	\$122
66655	\$56
66656 66659	\$56 \$102
66660	\$102
66662	\$220
66663	\$220
66665	\$84
66666	\$84
66667	\$84
66671 66674	\$102 \$110
66677	\$31
66680	\$205
66683	\$205
66686	\$140
66695	\$87
66696	\$87
66697	\$38
66698 66701	\$122 \$160
66704	\$196
66707	\$230
66711	\$86
66712	\$124
66714	\$86
66715	\$37
66716 66719	\$86 \$112
66722	\$112
66723	\$122
66724	\$42
66725	\$158
66728	\$194
66731	\$230
66734	\$265
66743 66749	\$56 \$91
66750	\$106
66751	\$152
66752	\$68
66755	\$106
66756	\$280
66757	\$280
66758	\$68
66761 66764	\$37 \$25
66767	\$49
66770	\$74
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Item No.	Medical
66776	Fee \$68
66779	\$110
66780	\$110
66782	\$37
66783	\$37
66785	\$110
66788	\$182
66789	\$110
66790 66791	\$71 \$205
66792	\$205
66800	\$50
66803	\$84
66804	\$50
66805	\$35
66806	\$118
66812	\$96
66815	\$166
66816	\$166
66817	\$118
66819	\$84
66820	\$84
66821	\$60
66822	\$144
66825	\$84
66826	\$84
66827	\$60
66828	\$144
66830 66831	\$170
	\$84
66832 66833	\$84 \$116
66834	\$116
66835	\$116
66836	\$116
66837	\$116
66838	\$68
66839	\$124
66840	\$68
66841	\$47
66900	\$210
69300	\$34
69303	\$60
69306	\$92
69309	\$132
69312	\$92
69316	\$78
69317	\$97
69318	\$88 \$116
69319	\$116 \$132
69321 69324	\$132 \$118
69325	\$118
69327	\$230
69328	\$230
69330	\$350
69331	\$350
69333	\$56
69336	\$94
69339	\$52
69345	\$144
69354	\$84
69357	\$168
	\$250
69360	
69363	\$70
69363 69378	\$70 \$490
69363 69378 69379	\$70 \$490 \$490
69363 69378 69379 69380	\$70 \$490 \$490 \$2070
69363 69378 69379	\$70 \$490 \$490

Item	Medical
No.	Fee
69383	\$490
69384	\$43
69387	\$78
69390	\$118
69393	\$156
69396	\$196
69400	\$43
69401	\$38
69405	\$43
69408	\$76
69411 69413	\$106 \$138
69445	\$250
69451	\$250
69471	\$96
69472	\$43
69474	\$78
69475	\$43
69478	\$80
69479	\$113
69480	\$225
69481	\$110
69482	\$410
69483	\$410
69484	\$47
69488	\$490
69489	\$490
69491	\$555
69492	\$555
69494	\$70
69495	\$91
69496	\$116
69497	\$70
69498	\$18
69499	\$250
69500	\$250
71057	\$98
71058	\$140
71059	\$80
71060	\$122
71062	\$122
71064	\$57
71066	\$41
71068	\$41
71069	\$65
71071	\$90
71072	\$41
71073	\$295
71074	\$41
71075	\$75
71076	\$295
71077	\$75
71079	\$74
71081	\$112
71083	\$56
71085	\$80
71087	\$104
71089	\$80
71090	\$80
71091	\$146
71092	\$65
71093	\$210
71095	\$112 \$142
71096	\$112
71097	\$70
71099	\$73
71101	\$48
71103	\$144
71106	\$31
71119	\$48

\$84

66773

Item	Medical
No.	Fee
71121	\$57
71123	\$67
71125	\$76
71127 71129	\$485
71129	\$600 \$715
71133	\$29
71134	\$290
71135	\$575
71137	\$83
71139	\$285
71141	\$545
71143	\$715
71145	\$1170
71146 71147	\$295 \$112
71147	\$112
71149	\$300
71151	\$330
71153	\$95
71154	\$95
71155	\$130
71156	\$35
71157	\$166
71159	\$200
71163	\$69
71164 71165	\$112 \$95
71166	\$130
71167	\$166
71168	\$200
71169	\$95
71170	\$36
71180	\$95
71183	\$130
71186	\$166
71189	\$43
71192	\$79
71195 71198	\$110 \$112
71200	\$98
71203	\$112
72813	\$220
72814	\$194
72816	\$235
72817	\$265
72818	\$295
72823	\$265
72824	\$385
72825	\$490
72826	\$530 \$570
72827 72828	\$570 \$610
72828	\$745
72836	\$1145
72838	\$1285
72844	\$84
72846	\$164
72847	\$245
72848	\$205
72849	\$285
72850	\$325
72851	\$1465
72852	\$1955 \$505
72855 72856	\$505 \$670
72857	\$785
72860	\$235
73043	\$55
73045	\$126

Item	Medical
No.	Fee
73047 73049	\$250 \$182
73049	\$460
73059	\$118
73060	\$156
73061	\$140
73062	\$235
73063 73064	\$260 \$194
73065	\$235
73066	\$590
73067	\$345
73070	\$108
73287	\$990
73289 73290	\$900 \$990
73290	\$580
73292	\$1480
73293	\$580
73294	\$580
73298	\$3085
73299	\$1030
73300 73305	\$275 \$560
73305	\$560 \$96
73309	\$96
73311	\$96
73312	\$96
73314	\$605
73315	\$605
73317	\$96 \$96
73318 73320	\$96 \$106
73320	\$106
73323	\$106
73324	\$106
73325	\$194
73326	\$600
73327 73332	\$136 \$830
73333 73333	\$830 \$1545
73334	\$875
73335	\$1210
73336	\$520
73337	\$894
73338	\$816
73339 73340	\$1030 \$515
73341	\$900
73343	\$520
73344	\$900
73351	\$894
73521	\$27
73523	\$116
73525	\$78
73527	\$28 \$70
73529 73801	\$79 \$19
73802	\$12
73803	\$17
73804	\$22
73805	\$12
73806	\$28
73807	\$19
73808	\$24
73809 73810	\$6 \$19
73810	\$19
73828	\$16
73829	\$10

Item	Medical
No.	Fee
73830	\$14
73831	\$18
73832 73833	\$10 \$23
73834	\$16
73835	\$19
73836	\$5
73837	\$16
73899 73900	\$48
73900	\$7 \$7
73922	\$23
73923	\$7
73924	\$40
73925	\$7
73926	\$23
73927 73928	\$7 \$48
73929	\$7
73930	\$48
73931	\$7
73932	\$30
73933	\$7
73934 73935	\$48 \$7
73936	\$28
73937	\$7
73938	\$28
73939	\$7
73940	\$30
75001 75004	\$219 \$110
75004	\$110
75009	\$174
75012	\$276
75015	\$380
75018	\$484
75021 75023	\$593 \$119
75023	\$1533
75027	\$2103
75030	\$1872
75033	\$3069
75034	\$1562
75036 75037	\$4239 \$5338
75037	\$1419
75042	\$530
75045	\$2840
75048	\$728
75049	\$852
75050 75051	\$1646 \$2526
75150	\$2526 \$219
75153	\$110
75156	\$195
75200	\$140
75203	\$211
75206	\$70 \$421
75400 75403	\$421 \$484
75406	\$551
75409	\$624
75412	\$349
75415	\$421
75600	\$593
75603 75606	\$697 \$697
75609	\$1040
75612	\$1287

Item	Medical
No.	Fee
75615 75618	\$477
75618 75621	\$592 \$592
75800	\$211
75803	\$843
75806	\$988
75809	\$1170
75812	\$1300
75815	\$1587
75818	\$1872
75821	\$1508
75824	\$1742
75827	\$2003
75830	\$2211
75833	\$2704
75836	\$3095
75839	\$70
75842	\$104
75845	\$520
75848	\$624
75851	\$312
75854	\$312
82200	\$19
82205	\$41
82210	\$78
82215	\$115
82220	\$56
82221	\$106
82222	\$155
82223	\$56
82224	\$106
82225	\$155
82300	\$440
82306	\$50
82309	\$60
82312	\$85
82315	\$113
82318	\$139
82324	\$75
82327	\$45
82332	\$134
90001	\$108
90002	\$79
90020	\$34
90035	\$74
90043	\$143
90051	\$211
90092	\$16
90093	\$31
90095	\$69
90096	\$111
90183	\$27
90188	\$59
90202	\$115
90212	\$169
90250	\$141
90251	\$208
90252	\$179
90253	\$264
90254	\$113
90255	\$166
90256	\$143
90257	\$211
90260	\$904
90261	\$527
90262	\$904
90263	\$527
90264	\$141
90265	\$113
90266	\$565

Item	Medical
No.	Fee
90267	\$264
90268	\$565
90269	\$264
90271	\$183
90272	*Derived
90273	\$261
90274	*Derived
90275	\$146
90276	*Derived
90277	\$209
90278	*Derived
90279	\$183
90280	\$261
90281	\$146
90282	\$209
91790	\$41
91792	\$41
91794	\$27
91795	\$41
91797	\$41
91799	\$27
91800	\$83
91801	\$152
91802	\$230
91803	\$83
91804	\$152
91805	\$230
91806	\$59
91807	\$115
91808	\$169
91809	\$83
91810	\$152
91811	\$230
91812	\$83
91813	\$152
91814	\$230
91815	\$59
91816	\$115
91817	\$169
91818	\$183
91819	\$261
91820	\$146
91821	\$209
91822	\$182
91823	\$97
91824	\$345
91825	\$158
91826	\$86
91827	\$95
91828	\$190
91829	\$285
91830	\$430
91831	\$475
91832	\$182
91833	\$97
91834	\$345
91835	\$158
91836	\$86
91837	\$95
91838	\$190
91839	\$285
91840	\$430
91841	\$475
91842	\$183
91843	\$261
91844	\$146
91845	\$209
92115	\$166
92121	\$133
92127	\$166

\$10

75612

Item No.	Medical Fee	Item No.	Medical Fee		Item No.	Medical Fee		Item No.	Medical Fee		Item No.	Medic Fee
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2459	\$380											
92460	\$194			1								
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Item No.	Description - WorkCover Queensland
4	Description – WorkCover Queensland Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged
	care facility or a service to which another item in the table applies) that requires a short patient history and, if
	necessary, limited examination and management-an attendance on one or more patients at one place on one
	occasion-each patient *Derived fee: The fee for item 3, plus \$26.75 divided by the number of patients seen, up to
	a maximum of six patients. For seven or more patients - the fee for item 3 plus \$2.10 per patient.
24	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged
	care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any
	of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c)
	arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive
	health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item 23, plus \$26.75 divided by the
	number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 23 plus
	\$2.10 per patient.
37	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged
	care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of
	the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination;
	(c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate
	preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on
	one or more patients at one place on one occasion-each patient *Derived fee: The fee for item 36, plus \$26.75
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for
47	item 36 plus \$2.10 per patient. Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged
7'	care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of
	the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical
	examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing
	appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an
	attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item 44,
	plus \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients -
	the fee for item 44 plus \$2.10 per patient.
58	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies), not more than 5 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general
	practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical
	Services Table (GMST). * Derived fee: An amount equal to \$8.50, plus \$15.50 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$8.50 plus \$.70 per patient
59	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25
	minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical
	practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the
	dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$16.00, plus \$17.50
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount
60	equal to \$16.00 plus \$.70 per patient Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45
	minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical
	practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the
	dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$35.50, plus \$15.50
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount
	equal to \$35.50 plus \$.70 per patient
65	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies) of more than 45 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general
	practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical
	Services Table (GMST). *Derived fee: An amount equal to \$57.50, plus \$15.50 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$57.50 plus \$.70 per
	patient
99	Professional attendance on a patient by a specialist practising in the specialist's specialty if: (a) the attendance is
	by video conference; and (b) the attendance is for a service: (i) provided with item 104 lasting more than 10
	minutes; or (ii) provided with item 105; and (c) the patient is not an admitted patient; and (d) the patient: (i) is
	located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road
	from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal
	Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies *Derived fee: 50% of the fee for item 104 or 105. Benefit: 85% of the derived
	fee
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112	Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 110 lasting more than 10 minutes; or (ii) provided with item 116, 119, 132 or 133; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of:
	(A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies *Derived fee: 50% of the fee for the associated item. Benefit: 85% of derived fee.
149	Professional attendance on a patient by a consultant physician or specialist practising in the consultant physician's
	or specialist's specialty of geriatric medicine if: (a) the attendance is by video conference; and (b) item 141 or 143 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician or specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service: for which a direction made under subsection 19(2) of the Act applies *Derived fee: 50% of the fee for item 141 or 143. Benefit: 85% of the derived fee
181	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies), not more than 5 minutes in durationan attendance on one or
	more patients at one place on one occasioneach patient, by a medical practitioner in an eligible area *Derived fee: The fee for item 179, plus \$21.40 divided by the number of patients seen, up to a maximum of six patients. For
	seven or more patients - the fee for item 179 plus \$1.70 per patients.
187	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25
	minutesan attendance on one or more patients at one place on one occasioneach patient, by a medical practitioner
	in an eligible area *Derived fee: The fee for item 185, plus \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 185 plus \$1.70 per patient.
191	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
	service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45
	minutesan attendance on one or more patients at one place on one occasioneach patient, by a medical practitioner
	in an eligible area *Derived fee: The fee for item 189, plus \$21.40 divided by the number of patients seen, up to a
195	maximum of six patients. For seven or more patients - the fee for item 189 plus \$1.70 per patient. Professional attendance by a general practitioner who is a qualified medical acupuncturist, on one or more patients
	at a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a
	patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a
	management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with
	appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and
	another attendance on the same day related to the condition for which the acupuncture is performed * Derived fee :
	The fee for item 193, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For
206	seven or more patients - the fee for item 193 plus \$2.05 per patient. Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a
200	service to which any other item in the table applies) of more than 45 minutes in durationan attendance on one or
	more patients at one place on one occasioneach patient, by a medical practitioner in an eligible area *Derived fee:
	The fee for item 203, plus \$21.40 divided by the number of patients seen, up to a maximum of six patients. For
260	seven or more patients - the fee for item 203 plus \$1.70 per patient.
200	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a
	cycle of care of a patient with established diabetes mellitus * Derived fee: The fee for item 259, plus \$21.10 divided
	by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 259
262	plus \$1.65 per patient. Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45
202	minutes, in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a
	cycle of care of a patient with established diabetes mellitus * Derived fee: The fee for item 261, plus \$21.10 divided
	by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 261
004	plus \$1.65 per patient.
264	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with
	established diabetes mellitus * Derived fee: The fee for item 263, plus \$21.10 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - the fee for item 263 plus \$1.65 per patient.
266	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25
	minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care *Derived fee: The fee for item 265, plus \$21.10 divided by the number of patients seen, up
	to a maximum of six patients. For seven or more patients - the fee for item 265 plus \$1.65 per patient.
269	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45
	minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the
	Asthma Cycle of Care *Derived fee: The fee for item 268, plus \$21.10 divided by the number of patients seen, up
271	to a maximum of six patients. For seven or more patients - the fee for item 268 plus \$1.65 per patient. Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical
	practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care *Derived
	fee: The fee for item 270, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For
	seven or more patients - the fee for item 270 plus \$1.65 per patient.

285	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed
	psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30
	minutes, but less than 40 minutes * Derived fee : The fee for item 283, plus \$21.10 divided by the number of
	patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 283 plus \$1.65 per
	patient.
287	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed
	psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief
	Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40
	minutes *Derived fee: The fee for item 286, plus \$21.10 divided by the number of patients seen, up to a maximum
200	of six patients. For seven or more patients - the fee for item 286 plus \$1.65 per patient.
288	Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty of psychiatry if: (a) the attendance is by video conference; and (b) item 291, 293, 296, 300, 302, 304, 306, 308, 310,
	312, 314, 316, 318, 319, 348, 350 or 352 applies to the attendance; and (c) the patient is not an admitted patient;
	and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at
	least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of:
	(A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction
	made under subsection 19(2) of the Act applies *Derived fee: 50% of the fee for item 291, 293,296, 300, 302, 304,
200	306, 308, 310, 312, 314, 316, 318, 319, 348, 350 or 352.Benefit: 85% of derived fee.
389	Professional attendance on a patient by a consultant occupational physician practising in the consultant occupational physician's specialty of occupational medicine if: (a) the attendance is by video conference; and (b)
	the attendance is for a service: (i) provided with item 385 lasting more than 10 minutes; or (ii) provided with item
	386; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth
	eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care
	recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal
	Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies
444	*Derived fee: 50% of the fee for item 385 or 386. Benefit: 85% of the derived fee
414	LEVEL AProfessional attendance by a public health physician in the practice of his or her specialty of public health medicine other than at consulting rooms for an obvious problem characterised by the straightforward nature of the
	task that requires a short patient history and, if required, limited examination and management * Derived fee: The
	fee for item 410, plus \$26.25 divided by the number of patients seen, up to a maximum of six patients. For seven of
	more patients - the fee for item 410 plus \$2.05 per patient.
415	LEVEL BProfessional attendance by a public health physician in the practice of his or her specialty of public health
	medicine other than at consulting rooms, lasting less than 20 minutes, including any of the following that are
	clinically relevant: a)taking a patient history; b)performing a clinical examination; c)arranging any necessary
	investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation. *Derived fee: The fee for item 411, plus \$26.25
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for
	item 411 plus \$2.05 per patient.
416	LEVEL CProfessional attendance by a public health physician in the practice of his or her specialty of public health
	medicine other than at consulting rooms lasting at least 20 minutes, including any of the following that are clinically
	relevant: a)taking a detailed patient history; b)performing a clinical examination; c)arranging any necessary
	investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1 or more health-related issues, with appropriate documentation. *Derived fee: The fee for item 412, plus \$26.25
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for
	item 412 plus \$2.05 per patient.
417	LEVEL DProfessional attendance by a public health physician in the practice of his or her specialty of public health
	medicine other than at consulting rooms lasting at least 40 minutes, including any of the following that are clinically
	relevant: a)taking an extensive patient history; b)performing a clinical examination; c)arranging any necessary
	investigation; d)implementing a management plan; e)providing appropriate preventive health care; in relation to 1
	or more health-related issues, with appropriate documentation. *Derived fee: The fee for item 413, plus \$26.25
	divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 413 plus \$2.05 per patient.
761	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a
	residential aged care facility or a service to which another item in the table applies), lasting not more than 5
	minutesan attendance on one or more patients on one occasioneach patient *Derived fee: The fee for item 733,
	plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients -
700	the fee for item 733 plus \$1.65 per patient.
763	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a
	residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutesan attendance on one or more patients on one occasioneach patient *Derived fee:
	The fee for item 737, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For
	seven or more patients - the fee for item 737 plus \$1.65 per patients.
766	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a
	residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes,
	but not more than 45 minutesan attendance on one or more patients on one occasioneach patient *Derived fee:
	The fee for item 741, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For
	seven or more patients - the fee for item 741 plus \$1.65 per patient.

769	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutesan attendance on one or more patients on one occasioneach patient *Derived fee: The fee for item 745,
	plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus \$1.65 per patient.
788	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of more than 25 minutes in duration but not more than 45 minutes by a medical practitioneran attendance on one or more patients at one residential aged care facility on one occasioneach patient *Derived fee: The fee for item 741, plus \$37.95 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus \$2.70 per patient.
789	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self contained unit) of more than 45 minutes in duration by a medical practitioneran attendance on one or more patients at one residential aged care facility on one occasioneach patient *Derived fee: The fee for item 745, plus \$37.95 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus \$2.70 per patient.
827	Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendanceat least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasioneach patient *Derived fee: The fee for item 812, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 812 plus \$1.65 per patient.
868	Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendanceat least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasioneach patient *Derived fee: The fee for item 867, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 867 plus \$1.65 per patient.
876	Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendanceat least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasioneach patient *Derived fee: The fee for item 873, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 873 plus \$1.65 per patient.
891	Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendanceat least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasioneach patient *Derived fee: The fee for item 885, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 885 plus \$1.65 per patient.
2122	Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item 2100 plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus \$2.05 per patient.
2125	Professional attendance of at least 5 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item 2100 plus \$47.45 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus \$3.35 per patient.

2137	Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing
	consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care
	recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time
	of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an
	attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item
	2126 plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more
	patients - the fee for item 2126 plus \$2.05 per patient.
2138	Professional attendance of less than 20 minutes in duration (whether or not continuous) by a general practitioner,
	specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video
	conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care
	service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place o
	one occasion-each patient *Derived fee: The fee for item 2126 plus \$47.45 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus \$3.35 per patient.
2147	Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by
	medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing
	consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care
	recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time
	of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an
	attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item
	2143 plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more
	patients - the fee for item 2143 plus \$2.05 per patient.
2179	Professional attendance of at least 20 minutes in duration (whether or not continuous) by a general practitioner,
	specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video
	conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care
	service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place o
	one occasion-each patient *Derived fee: The fee for item 2143 plus \$47.45 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus \$3.35 per patient.
2199	Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by
	medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing
	consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care
	recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time
	of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an
	attendance on one or more patients at one place on one occasion-each patient *Derived fee: The fee for item
	2195 plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more
0000	patients - the fee for item 2195 plus \$2.05 per patient.
2220	Professional attendance of at least 40 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video
	conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care
	service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place of
	one occasion-each patient *Derived fee: The fee for item 2195 plus \$47.45 divided by the number of patients
2631	seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus \$3.35 per patient.
2031	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner),
	that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus
	*Derived fee: An amount equal to \$16.00, plus \$17.50 divided by the number of patients seen, up to a maximum
2633	six patients. For seven or more patients - an amount equal to \$16.00 plus \$0.70 per patient Professional attendance at a place other than consulting rooms of more than 25 minutes but not more than 45
2000	minutes, in duration by a medical practitioner who practises in general practice (other than a general practitioner),
	that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus
	*Derived fee: An amount equal to \$35.50, plus \$15.50 divided by the number of patients seen, up to a maximum
	six patients. For seven or more patients - an amount equal to \$35.50 plus \$0.70 per patient
2635	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical
2000	practitioner who practises in general practice (other than a general practitioner), that completes the minimum
	requirements for a cycle of care of a patient with established diabetes mellitus * Derived fee: An amount equal to
	\$57.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more
	patients - an amount equal to \$57.50 plus \$0.70 per patient
2723	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed
	psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive
	Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes,
	but less than 40 minutes * Derived fee: The fee for item 2721, plus \$26.35 divided by the number of patients seen
	up to a maximum of six patients. For seven or more patients - the fee for item 2721 plus \$2.05 per patient.
2727	I Projessional attendance at a place other than consulting rooms by a deneral practitioner, for providing tocussed
2727	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive
2727	psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive
2727	psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes *Derived fee: The fee for item 2725, plus \$26.35 divided by the number of patients seen, up to a maximum of six

2820	Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or
	consultant physician's specialty of pain medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 2801 lasting more than 10 minutes; or (ii) provided with item 2806
	or 2814; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth
	eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is
	a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act
	applies *Derived fee: 50% of the fee for item 2801, 2806 or 2814. Benefit: 85% of the derived fee
3015	Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or
	consultant physician's specialty of palliative medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 3005 lasting more than 10 minutes; or (ii) provided with item 3010
	or 3014; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth
	eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an
	Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act
5000	applies *Derived fee: 50% of the fee for item 3005, 3010 or 3014. Benefit: 85% of the derived fee
5003	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies) that requires a short patient
	history and, if necessary, limited examination and management-an attendance on one or more patients on one
	occasion-each patient *Derived fee: The fee for item 5000, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5000 plus \$2.05 per patient.
5023	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a
	residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes
	and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing
	appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an
	attendance on one or more patients on one occasion-each patient *Derived fee: The fee for item 5020, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the
	fee for item 5020 plus \$2.05 per patient.
5043	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a
	residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a
	clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing
	appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient *Derived fee: The fee for item 5040, plus
	\$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the
F000	fee for item 5040 plus \$2.05 per patient.
5063	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and
	including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a
	clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an
	attendance on one or more patients on one occasion-each patient * Derived fee: The fee for item 5060, plus
	\$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the
5220	fee for item 5060 plus \$2.05 per patient. Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at
	consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table
	applies), lasting not more than 5 minutes-an attendance on one or more patients on one occasion-each patient *Derived fee: An amount equal to \$18.50, plus \$15.50 divided by the number of patients seen, up to a maximum of
	six patients. For seven or more patients - an amount equal to \$18.50 plus \$.70 per patient
5223	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at
	consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes-an attendance on one or more patients on one
	occasion-each patient *Derived fee: An amount equal to \$26.00, plus \$17.50 divided by the number of patients
	seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$26.00 plus \$.70 per patient
5227	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at
	consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table
	applies), lasting more than 25 minutes, but not more than 45 minutes-an attendance on one or more patients on one occasion-each patient *Derived fee: An amount equal to \$45.50, plus \$15.50 divided by the number of
	patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$45.50 plus \$.70
5228	per patient Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at
JZZO	consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table
	applies), lasting more than 45 minutes-an attendance on one or more patients on one occasion-each patient
	*Derived fee: An amount equal to \$67.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$67.50 plus \$ 70 per patient
	six patients. For seven or more patients - an amount equal to \$67.50 plus \$.70 per patient

6016	Professional attendance on a patient by a specialist practising in the specialist's specialty of neurosurgery if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6007 lasting more than 10 minutes; or (ii) provided with item 6009, 6011, 6013 or 6015; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by read from the appointing or graphing in a regidential care consists or (iii) is a patient of
	least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies *Derived fee: 50% of the fee for item 6007, 6009, 6011, 6013 or 6015. Benefit: 85% of the derived fee
6026	Professional attendance on a patient by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6018 or 6019 and lasting more than 10 minutes; or (ii) provided with item 6023 or 6024; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the addiction medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies *Derived fee: 50% of the fee for item 6018, 6019, 6023, or 6024 Benefit: 85% of the derived fee
6060	Professional attendance on a patient by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6051 or 6052 and lasting more than 10 minutes; or (ii) provided with item 6057 or 6058; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the sexual health medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies *Derived fee: 50% of the fee for item 6051, 6052, 6057 or 6058 Benefit: 85% of the derived fee
13210	Professional attendance on a patient by a specialist practising in his or her specialty if: (a)the attendance is by video conference; and (b)item 13209 applies to the attendance; and (c)the patient is not an admitted patient; and (d)the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service for which a direction made under subsection 19 (2) of the Act applies *Derived fee: 50% of the fee for item 13209. Benefit: 85% of the derived fee
15003	Radiotherapy, superficial (including treatment with x-rays, radium rays or other radioactive substances), not being a service to which another item in this Group applies - each attendance at which fractionated treatment is given - 2 or more fields up to a maximum of 5 additional fields *Derived fee: The fee for item 15000 plus for each field in excess of 1, an amount of \$17.35
15009	Radiotherapy, superficial attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields *Derived fee: The fee for item 15006 plus for each field in excess of 1, an amount of \$18.85
15103	Radiotherapy, deep or orthovoltage each attendance at which fractionated treatment is given at 3 or more treatments per week - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) *Derived fee: The fee for item 15100 plus for each field in excess of 1, an amount of \$19.10
15109	Radiotherapy, deep or orthovoltageeach attendance at whichfractionated treatment isgiven at 2 treatments per week or less frequently - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) *Derived fee: The fee for item 15106 plus for each field in excess of 1, an amount of \$23.05
15115	Radiotherapy, deep or orthovoltage attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) *Derived fee: The fee for item 15112 plus for each field in excess of 1, an amount of \$48.05
15214	Radiation oncology treatment, using cobalt unit or caesium teletherapy unit - each attendance at which treatment is given 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) *Derived fee: The fee for item 15211 plus for each field in excess of 1, an amount of \$32.40
15230	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung) *Derived fee: The fee for item 15215 plus for each field in excess of 1, an amount of \$38.55
15233	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (prostate) *Derived fee: The fee for item 15218 plus for each field in excess of 1, an amount of \$38.55
15236	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast) *Derived fee: The fee for item 15221 plus for each field in excess of 1, an amount of \$38.55
15239	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15230, 15233 or 15236 *Derived fee: The fee for item 15224 plus for each field in excess of 1, an amount of \$38.55
15242	RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site *Derived fee: The fee for item 15227 plus for each field in excess of 1, an amount of \$38.55

15260	RADIATION ORADIATION ONCOLOGY treatment, using a dual photon energy linear accelerator with a minimum higher energy of at least 10mv photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung) *Derived fee: The fee for item 15245 plus for each field in excess of 1, an amount of \$38.55
45000	DADIATION ON COLORY TREATMENT AND THE PROPERTY OF THE PROPERTY
15263	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site
	(prostate) *Derived fee: The fee for item 15248 plus for each field in excess of 1, an amount of \$38.55
15266	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast) *Derived fee: The fee for item 15251 plus for each field in excess of 1, an amount of \$38.55
15269	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15260, 15263 or 15266 *Derived fee: The fee for item 15254 plus for each field in excess of 1, an amount of \$38.55
45070	
15272	RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site *Derived fee: The fee for item 15257 plus for each field in excess of 1, an amount of \$38.55
16399	Professional attendance on a patient by a specialist practising in his or her specialty of obstetrics if: (a) the
10399	attendance is by video conference; and (b) item 16401, 16404, 16406, 16500, 16590 or 16591 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service for which a direction made under subsection 19 (2) of the Act applies *Derived fee: 50% of the fee for item 16401,16404,16406,16500,16590 or 16591. Benefit: 85% of the
	derived fee
17609	Professional attendance on a patient by a specialist practising in his or her specialty of anaesthesia if: (a)the attendance is by video conference; and (b)item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655 applies to the attendance; and (c)the patient is not an admitted patient; and (d)the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii)is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies *Derived fee: 50% of the fee for item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655. Benefit: 85% of the derived fee
18219	
10219	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, if continuous attendance by the medical practitioner extends beyond the first hour (Anaes.) *Derived fee: The fee for item 18216 plus \$19.30 for each additional 15 minutes or part thereof beyond the first hour of attendance by the medical practitioner.
18227	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, where continuous attendance by a medical practitioner extends beyond the first hour, for a patient in labour, where the service is provided in the after hours period, being the period from 8pm to 8am on any weekday, or any time on a Saturday, a Sunday or a public holiday. *Derived fee: The fee for item 18226 plus \$29.05 for each additional 15 minutes or part there of beyond the first hour of attendance by the medical practitioner.
25025	EMERGENCY ANAESTHESIA performed in the after hours period where the patient requires immediate treatment without which there would be significant threat to life or body part and where more than 50% of the time for the emergency anaesthesia service is provided in the after hours period, being the period from 8pm to 8am on any weekday, or at any time on a Saturday, a Sunday or a public holiday - not being a service associated with a service to which item 25020, 25030 or 25050 applies (0 basic units) *Derived fee: An additional amount of 50% of the fee for the anaesthetic service. That is: (a) an anaesthesia item/s in the range 20100 - 21997 or 22900, plus (b) an
	item in the range 23010 - 24136, plus (c) where applicable, an item in the range 25000-25015, plus (d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051
25030	ASSISTANCE AT AFTER HOURS EMERGENCY ANAESTHESIA where the patient requires immediate treatment without which there would be significant threat to life or body part and where more than 50% of the time for which the assistant is in professional attendance on the patient is provided in the after hours period, being the period from 8pm to 8am on any weekday, or at any time on a Saturday, a Sunday or a public holiday - not being a service associated with a service to which item 25020, 25025 or 25050 applies (0 basic units) *Derived fee: An additional amount of 50% of the fee for assistance at anaesthesia. That is:
	(a) an assistant anaesthesia item in the range 25200 - 25205, plus (b) an item in the range 23010 - 24136, plus (c) where applicable, an item in the range 25000-25015, plus
	(d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051

25050	AFTER HOURS EMERGENCY PERFUSION where the patient requires immediate treatment without which there would be significant threat to life or body part and where more than 50% of the perfusion service is provided in the after hours period, being the period from 8pm to 8am on any weekday, or at any time on a Saturday, a Sunday or a public holiday - not being a service associated with a service to which item 25020, 25025 or 25030 applies (0 basic units) *Derived fee: An additional amount of 50% of the fee for the perfusion service. That is: (a) item 22060, plus (b) an item in the range 23010 - 24136, plus
	(c) where applicable, an item in the range 25000 - 25015, plus
25200	(d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051 or 22065-22075 ASSISTANCE IN THE ADMINISTRATION OF ANAESTHESIA on a patient in imminent danger of death requiring continuous life saving emergency treatment, to the exclusion of all other patients (5 basic units) *Derived fee: An amount of \$100.50 (5 basic units) plus an item in the range 23010 - 24136 plus, where applicable - an item in the
	range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 - 22051
25205	ASSISTANCE IN THE ADMINISTRATION OF ELECTIVE ANAESTHESIA where: (i)the patient has complex airway problems; or (ii)the patient is a neonate or a complex paediatric case; or (iii)there is anticipated to be massive blood loss (greater than 50% of blood volume) during the procedure; or (iv)the patient is critically ill, with multiple organ failure; or (v)where the anaesthesia time exceeds 6 hours and the assistance is provided to the exclusion of all other patients (5 basic units) *Derived fee: An amount of \$100.50 (5 basic units) plus an item in the
	range 23010 - 24136 plus, where applicable - an item in the range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 - 22051
30001	
	OPERATIVE PROCEDURE, not being a service to which any other item in this Group applies, being a service to which an item in this Group would have applied had the procedure not been discontinued on medical grounds *Derived fee: 50% of the fee which would have applied had the procedure not been discontinued
31340	Muscle, bone or cartilage, excision of one or more of, if clinically indicated, and if: (a) the specimen excised is sent for histological confirmation; and (b)a malignant tumour of skin covered by item 31000, 31001, 31002, 31003, 31004, 31005, 31356, 31358, 31359, 31361, 31363, 31365, 31367, 31369, 31371,31372, 31373, 31374, 31375 or 31376 is excised (Anaes.) *Derived fee: 75% of the fee for excision of malignant tumour
44376	AMPUTATION STUMP, reamputation of, to provide adequate skin and muscle cover (Assist.) *Derived fee: 75%
E4000	of the original amputation fee
51303	Assistance at any operation identified by the word "Assist." for which the fee exceeds \$567.25 or at a series of operations identified by the word "Assist." for which the aggregate fee exceeds \$567.25. *Derived fee: one fifth of
	the established fee for the operation or combination of operations
51309	Assistance at a series or combination of operations that include (Assist.) and assistance at a birth involving
	Caesarean section *Derived fee: one fifth of the established fee for the operation or combination of operations (the fee for item 16520 being the Schedule fee for the Caesarean section component in the calculation of the established fee)
51312	Assistance at any interventional obstetric procedure covered by items 16606, 16609, 16612, 16615 and 16627 *Derived fee: one fifth of the established fee for the procedure or combination of procedures
51803	Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operation
	specified in an item that includes '(Assist.)' for which the fee exceeds \$567.25 or at a series or combination of operations specified in items that include '(Assist)' if the aggregate fee exceeds \$567.25 *Derived fee: one fifth of the established fee for the operation or combination of operations
90272	Professional attendance at a place other than consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than
	40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan *Derived fee: The fee for item 90271, plus \$26.35 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90271 plus \$2.05 per patient.
90274	Professional attendance at a place other than consulting rooms by a general practitioner, for providing eating disorder psychological treatment services by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan. *Derived fee: Derived Fee: The fee for item 90273, plus \$26.35 divided by the number of patients seen, up to a
	maximum of six patients. For seven or more patients - the fee for item 90273 plus \$2.05 per patient.
90276	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes but less than 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan. *Derived fee: Derived Fee: The fee for item 90275, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90275 plus \$1.65 per patient.
90278	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing eating disorder psychological treatment services by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes in duration, for an eligible patient if treatment is clinically indicated under an eating disorder treatment and management plan. *Derived fee: Derived Fee: The fee for item 90277, plus \$21.10 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90277 plus \$1.65 per patient.