

WorkCover

QUEENSLAND

Medical Items Table of Costs

Effective 1 July 2021

Medical Items Table of Costs

Rules for use

This document outlines the maximum 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 Medical Benefits Schedule.

Multiple operation rule

If two or more MBS items from Category 3, Group T8 are being performed on a patient on the one occasion, fees should be calculated using the multiple operation rule.

Items in Subgroup 12 of Group T8 (ie. amputations) are not subject to this rule.

The multiple operation rule is applied as follows:

Surgical procedures:

Includes surgical procedures set out in MBS Group T8, Subgroups 1 to 11, 13, 16 and 17

- 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/Hand surgery procedures:

Includes orthopaedic procedures set out in MBS Group T8, Subgroups 14 and 15

- 100% for the item with the greatest WorkCover fee;
- plus 75% for the item with the next greatest WorkCover fee;
- plus 75% for each other item.

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

The following table illustrates how the multi operation rule will be applied to multiple item numbers:

MBS SUB-GROUP	100% OF FEE	ORTHOPAEDIC/HAND SURGERY 100 / 75 / 75%	SURGICAL 100 / 50 / 25%
1 to 11 (Items 30001 – 44136)			✓
12 – Amputations (Items 44325 – 44376)	✓		
13 – Plastic and Recon Surgery (Items 45000 – 45996)			✓
14 – Hand Surgery (Items 46300 – 46534)		✓	
15 – Orthopaedic (Items 47000 – 50658)		✓	
16 – Radiofrequency and Microwave Tissue Ablation			✓
17 – Spinal Surgery (Items 51011 – 51171)			✓

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 approval 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 (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 www.worksafe.qld.gov.au/service-providers or contacting WorkCover on free call 1300 362 128.

Medical Fees

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
3	\$42	133	\$300	225	\$222	286	\$214	361	\$490
4	*derived	141	\$795	226	\$307	287	*derived	364	\$96
23	\$84	143	\$530	227	\$433	288	*derived	366	\$192
24	*derived	145	\$960	228	\$342	289	\$605	367	\$290
36	\$154	147	\$645	229	\$233	291	\$795	369	\$435
37	*derived	149	*derived	230	\$184	293	\$530	370	\$485
44	\$235	160	\$360	231	\$114	296	\$430	371	\$150
47	*derived	161	\$580	232	\$114	297	\$430	372	\$214
52	\$42	162	\$790	233	\$116	299	\$510	384	\$131
53	\$84	163	\$985	235	\$114	300	\$96	385	\$350
54	\$154	164	\$1,165	236	\$195	302	\$192	386	\$160
57	\$235	170	\$310	237	\$325	304	\$290	387	\$415
58	*derived	171	\$320	238	\$84	306	\$435	388	\$220
59	*derived	172	\$400	239	\$144	308	\$485	389	*derived
60	*derived	173	\$42	240	\$239	319	\$435	410	\$42
65	*derived	177	\$117	243	\$131	320	\$97	411	\$84
99	*derived	179	\$28	244	\$61	322	\$192	412	\$154
104	\$184	181	*derived	259	\$60	324	\$290	413	\$235
105	\$98	185	\$61	260	*derived	326	\$435	414	*derived
106	\$184	187	*derived	261	\$116	328	\$490	415	*derived
107	\$245	189	\$117	262	*derived	330	\$158	416	*derived
108	\$162	191	*derived	263	\$170	332	\$255	417	*derived
109	\$285	193	\$84	264	*derived	334	\$350	585	\$262
110	\$350	195	*derived	265	\$60	336	\$505	588	\$262
111	\$98	197	\$154	266	*derived	338	\$540	591	\$197
112	*derived	199	\$235	268	\$116	342	\$120	594	\$85
113	\$131	203	\$173	269	*derived	344	\$156	599	\$500
114	\$232	206	*derived	270	\$170	346	\$235	600	\$500
115	\$98	214	\$357	271	*derived	348	\$290	699	\$148
116	\$160	215	\$595	272	\$116	350	\$385	721	\$280
117	\$154	218	\$833	276	\$170	352	\$196	723	\$240
119	\$88	219	\$1,072	277	\$116	353	\$114	729	\$112
120	\$88	220	\$1,191	279	\$116	355	\$225	731	\$112
122	\$415	221	\$190	281	\$147	356	\$335	732	\$140
128	\$220	222	\$200	282	\$216	357	\$510	733	\$47
131	\$163	223	\$243	283	\$150	358	\$560	735	\$275
132	\$605	224	\$96	285	*derived	359	\$610	737	\$79

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
739	\$385	873	\$156	2483	\$173	3000	\$395	5036	\$680
741	\$135	876	*derived	2631	*derived	3003	\$232	5039	\$320
743	\$500	880	\$95	2633	*derived	3005	\$350	5040	\$230
745	\$190	885	\$230	2635	*derived	3010	\$160	5041	\$605
747	\$166	891	*derived	2700	\$145	3014	\$88	5042	\$320
750	\$220	894	\$71	2701	\$213	3015	*derived	5043	*derived
758	\$275	896	\$138	2712	\$230	3018	\$415	5044	\$605
761	*derived	898	\$203	2713	\$192	3023	\$220	5060	\$355
763	*derived	900	\$400	2715	\$184	3028	\$163	5063	*derived
766	*derived	941	\$176	2717	\$345	3032	\$295	5200	\$63
769	*derived	942	\$252	2721	\$187	3040	\$440	5203	\$126
788	*derived	2100	\$46	2723	*derived	3044	\$585	5207	\$230
789	*derived	2121	\$89	2725	\$267	3051	\$180	5208	\$355
812	\$37	2122	*derived	2727	*derived	3055	\$290	5220	*derived
820	\$295	2125	*derived	2729	\$187	3062	\$395	5223	*derived
822	\$440	2126	\$101	2731	\$267	3069	\$295	5227	*derived
823	\$585	2137	*derived	2733	\$220	3074	\$440	5228	*derived
825	\$180	2138	*derived	2735	\$315	3078	\$585	6004	\$199
826	\$290	2143	\$195	2799	\$232	3083	\$180	6007	\$280
827	*derived	2147	*derived	2801	\$350	3088	\$290	6009	\$99
828	\$395	2150	\$172	2806	\$160	3093	\$395	6011	\$196
830	\$295	2179	*derived	2814	\$88	5000	\$63	6013	\$270
832	\$440	2195	\$287	2820	*derived	5001	\$132	6015	\$345
834	\$585	2196	\$254	2824	\$415	5003	*derived	6016	*derived
835	\$180	2199	*derived	2832	\$220	5004	\$225	6018	\$309
837	\$290	2220	*derived	2840	\$163	5011	\$225	6019	\$154
838	\$395	2461	\$35	2946	\$295	5012	\$350	6023	\$540
855	\$270	2463	\$76	2949	\$440	5014	\$440	6024	\$270
857	\$410	2464	\$147	2954	\$585	5016	\$590	6025	\$232
858	\$545	2465	\$216	2958	\$180	5019	\$680	6026	*derived
861	\$270	2471	\$22	2972	\$290	5020	\$126	6028	\$101
864	\$410	2472	\$42	2974	\$395	5021	\$132	6029	\$87
866	\$545	2475	\$75	2978	\$295	5023	*derived	6031	\$154
867	\$80	2478	\$121	2984	\$440	5027	\$225	6032	\$232
868	*derived	2480	\$28	2988	\$585	5030	\$350	6034	\$309
871	\$164	2481	\$61	2992	\$180	5032	\$440	6035	\$70
872	\$77	2482	\$117	2996	\$290	5033	\$590	6037	\$124

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
6038	\$185	10918	\$67	11220	\$138	11612	\$198	11919	\$1,085
6042	\$247	10921	\$334	11221	\$270	11614	\$106	11921	\$225
6051	\$309	10922	\$334	11224	\$148	11615	\$158	12000	\$108
6052	\$154	10923	\$334	11235	\$375	11627	\$570	12001	\$108
6057	\$540	10924	\$422	11237	\$215	11704	\$116	12002	\$108
6058	\$270	10925	\$334	11240	\$215	11705	\$58	12003	\$160
6059	\$232	10926	\$334	11241	\$320	11707	\$58	12004	\$166
6060	*derived	10927	\$422	11242	\$215	11713	\$230	12005	\$183
6062	\$375	10928	\$334	11243	\$215	11714	\$90	12012	\$48
6063	\$227	10929	\$422	11244	\$215	11716	\$435	12017	\$205
6064	\$87	10930	\$334	11300	\$460	11717	\$230	12021	\$330
6065	\$154	10940	\$128	11303	\$460	11719	\$220	12022	\$399
6067	\$232	10941	\$77	11304	\$750	11720	\$220	12024	\$460
6068	\$309	10942	\$67	11306	\$51	11721	\$230	12200	\$81
6071	\$70	10944	\$145	11309	\$60	11723	\$120	12201	\$3,365
6072	\$124	10945	\$67	11312	\$88	11724	\$485	12203	\$1,340
6074	\$185	10946	\$135	11315	\$116	11725	\$630	12204	\$1,340
6075	\$247	10947	\$67	11318	\$144	11726	\$315	12205	\$1,344
10801	\$295	10948	\$135	11324	\$88	11727	\$315	12207	\$1,340
10802	\$295	11000	\$385	11327	\$55	11728	\$79	12208	\$1,340
10803	\$295	11003	\$770	11330	\$44	11729	\$400	12213	\$1,450
10804	\$295	11004	\$1,700	11332	\$280	11730	\$400	12215	\$1,605
10805	\$295	11005	\$1,700	11333	\$100	11731	\$79	12217	\$1,450
10806	\$295	11012	\$295	11336	\$100	11800	\$515	12250	\$765
10807	\$295	11015	\$405	11339	\$100	11801	\$875	12254	\$2,110
10808	\$295	11018	\$585	11503	\$385	11810	\$430	12261	\$2,215
10809	\$295	11021	\$405	11505	\$97	11820	\$2,836	12268	\$2,375
10816	\$295	11024	\$265	11506	\$49	11823	\$3,040	12306	\$270
10905	\$135	11027	\$390	11507	\$255	11830	\$540	12312	\$270
10907	\$67	11200	\$94	11508	\$740	11833	\$610	12315	\$270
10910	\$135	11204	\$215	11512	\$144	11900	\$71	12320	\$270
10911	\$135	11205	\$215	11600	\$144	11903	\$285	12321	\$270
10912	\$135	11210	\$215	11602	\$106	11906	\$285	12322	\$270
10913	\$135	11211	\$215	11604	\$106	11909	\$425	12325	\$81
10914	\$135	11215	\$375	11605	\$106	11912	\$425	12326	\$81
10915	\$135	11218	\$475	11610	\$106	11915	\$425	12500	\$510
10916	\$67	11219	\$138	11611	\$106	11917	\$1,085	12524	\$410

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ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
12527	\$270	13818	\$570	14224	\$160	15227	\$168	15512	\$390
12533	\$240	13830	\$178	14227	\$250	15245	\$220	15513	\$725
13015	\$731	13832	\$2,300	14234	\$1,029	15248	\$220	15515	\$685
13020	\$743	13834	\$1,280	14237	\$1,893	15251	\$220	15518	\$480
13025	\$332	13835	\$295	14245	\$295	15254	\$220	15521	\$955
13030	\$469	13837	\$1,280	14247	\$5,309	15257	\$220	15524	\$1,890
13100	\$425	13838	\$295	14249	\$5,309	15275	\$310	15527	\$465
13103	\$225	13839	\$77	14255	\$360	15303	\$885	15530	\$755
13104	\$425	13840	\$1,540	14256	\$645	15304	\$885	15533	\$1,490
13106	\$280	13842	\$220	14257	\$1,240	15307	\$1,675	15536	\$955
13109	\$680	13848	\$440	14258	\$360	15308	\$1,790	15539	\$1,885
13110	\$680	13851	\$1,280	14259	\$645	15311	\$825	15550	\$1,115
13200	\$5,630	13854	\$295	14260	\$1,240	15312	\$825	15553	\$1,200
13201	\$5,265	13857	\$360	14263	\$158	15315	\$1,615	15555	\$1,265
13202	\$840	13870	\$930	14264	\$315	15316	\$1,725	15556	\$1,210
13203	\$1,405	13873	\$690	14265	\$158	15319	\$1,005	15559	\$1,465
13206	\$2,410	13876	\$198	14266	\$315	15320	\$1,005	15562	\$2,040
13209	\$240	13881	\$375	14270	\$415	15323	\$1,795	15565	\$10,845
13290	\$575	13882	\$295	14272	\$415	15324	\$1,900	15600	\$4,635
13292	\$1,150	13885	\$425	14277	\$670	15327	\$1,950	15700	\$154
13300	\$148	13888	\$225	14278	\$670	15328	\$2,060	15705	\$255
13303	\$225	13899	\$605	14280	\$670	15331	\$1,850	15710	\$255
13306	\$1,080	13950	\$310	14283	\$670	15332	\$1,965	15715	\$260
13309	\$835	14050	\$142	14285	\$670	15335	\$1,675	15800	\$325
13312	\$94	14100	\$695	14288	\$670	15336	\$1,790	15850	\$560
13318	\$615	14106	\$695	15000	\$112	15338	\$2,065	15900	\$695
13319	\$555	14115	\$1,170	15003	*derived	15339	\$190	16003	\$1,640
13400	\$240	14118	\$1,485	15006	\$305	15342	\$475	16006	\$1,260
13506	\$435	14124	\$695	15012	\$164	15345	\$1,260	16009	\$855
13700	\$785	14201	\$679	15100	\$152	15348	\$144	16012	\$745
13703	\$285	14202	\$344	15106	\$178	15351	\$380	16015	\$7,490
13706	\$196	14203	\$126	15112	\$390	15354	\$445	16018	\$4,495
13750	\$325	14206	\$80	15211	\$128	15357	\$126	16401	\$245
13755	\$325	14209	\$220	15215	\$168	15500	\$535	16404	\$119
13757	\$174	14212	\$505	15218	\$168	15503	\$730	16408	\$178
13760	\$1,815	14218	\$250	15221	\$168	15506	\$1,150	16500	\$114
13815	\$275	14221	\$134	15224	\$168	15509	\$460	16501	\$460

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ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
16502	\$114	18234	\$890	18360	\$325	20220	\$890	20548	\$1,335
16505	\$114	18236	\$445	18362	\$640	20222	\$534	20560	\$1,780
16508	\$114	18238	\$267	18365	\$325	20225	\$1,068	20600	\$890
16509	\$114	18240	\$445	18366	\$420	20230	\$1,068	20604	\$1,157
16511	\$755	18242	\$267	18368	\$700	20300	\$445	20620	\$890
16512	\$215	18244	\$712	18370	\$116	20305	\$1,335	20622	\$1,157
16514	\$116	18248	\$623	18372	\$325	20320	\$534	20630	\$712
16515	\$3,255	18250	\$445	18374	\$355	20321	\$890	20632	\$623
16518	\$1,630	18252	\$712	18375	\$600	20330	\$712	20634	\$890
16519	\$3,260	18254	\$712	18377	\$358	20350	\$890	20670	\$1,157
16520	\$3,260	18256	\$445	18379	\$600	20352	\$445	20680	\$267
16522	\$4,600	18258	\$445	20100	\$445	20355	\$1,068	20690	\$445
16527	\$3,255	18260	\$623	20102	\$534	20400	\$267	20700	\$267
16528	\$3,260	18262	\$445	20104	\$356	20401	\$356	20702	\$356
16590	\$405	18264	\$712	20120	\$445	20402	\$445	20703	\$356
17609	*derived	18266	\$445	20124	\$356	20403	\$445	20704	\$890
17610	\$178	18268	\$623	20140	\$445	20404	\$534	20706	\$623
17615	\$356	18270	\$623	20142	\$516	20405	\$712	20730	\$445
17620	\$534	18272	\$445	20143	\$534	20406	\$1,157	20740	\$445
17625	\$712	18274	\$623	20144	\$688	20410	\$430	20745	\$623
17640	\$178	18276	\$890	20145	\$688	20420	\$445	20750	\$445
17645	\$356	18278	\$623	20146	\$445	20440	\$356	20752	\$534
17650	\$534	18280	\$890	20147	\$534	20450	\$445	20754	\$623
17655	\$712	18282	\$712	20148	\$356	20452	\$534	20756	\$801
17680	\$356	18284	\$712	20160	\$534	20470	\$534	20770	\$1,335
17690	\$178	18286	\$712	20162	\$623	20472	\$890	20790	\$712
18213	\$356	18288	\$890	20164	\$356	20474	\$1,157	20791	\$890
18216	\$712	18290	\$1,780	20170	\$534	20475	\$890	20792	\$1,157
18219	*derived	18292	\$890	20172	\$623	20500	\$1,335	20793	\$1,335
18222	\$267	18294	\$1,780	20174	\$801	20520	\$534	20794	\$1,068
18225	\$356	18296	\$1,335	20176	\$890	20522	\$356	20798	\$890
18226	\$1,335	18297	\$267	20190	\$445	20524	\$356	20799	\$534
18227	*derived	18298	\$1,780	20192	\$890	20526	\$890	20800	\$267
18228	\$445	18350	\$325	20210	\$1,335	20528	\$712	20802	\$445
18230	\$1,780	18351	\$358	20212	\$445	20540	\$1,157	20803	\$356
18232	\$712	18353	\$645	20214	\$801	20542	\$1,335	20804	\$890
18233	\$712	18354	\$325	20216	\$1,780	20546	\$1,335	20806	\$623

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ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
20810	\$356	20924	\$356	21212	\$890	21482	\$445	21760	\$623
20815	\$534	20926	\$356	21214	\$890	21484	\$445	21770	\$712
20820	\$445	20928	\$534	21216	\$1,246	21486	\$623	21772	\$534
20830	\$356	20930	\$356	21220	\$356	21490	\$267	21780	\$356
20832	\$534	20932	\$356	21230	\$534	21500	\$712	21785	\$890
20840	\$534	20934	\$534	21232	\$445	21502	\$534	21790	\$1,335
20841	\$712	20936	\$712	21234	\$712	21520	\$356	21800	\$267
20842	\$356	20938	\$356	21260	\$356	21522	\$445	21810	\$356
20844	\$890	20940	\$356	21270	\$712	21530	\$1,335	21820	\$267
20845	\$890	20942	\$445	21272	\$356	21532	\$712	21830	\$356
20846	\$890	20943	\$356	21274	\$534	21535	\$890	21832	\$623
20847	\$890	20944	\$534	21275	\$890	21600	\$267	21834	\$356
20848	\$890	20946	\$712	21280	\$1,335	21610	\$445	21840	\$712
20850	\$1,068	20948	\$356	21300	\$267	21620	\$356	21842	\$534
20855	\$1,335	20950	\$445	21321	\$356	21622	\$445	21850	\$356
20860	\$534	20952	\$356	21340	\$356	21630	\$445	21860	\$267
20862	\$623	20954	\$890	21360	\$445	21632	\$534	21865	\$890
20863	\$890	20956	\$356	21380	\$267	21634	\$801	21870	\$1,335
20864	\$890	20958	\$445	21382	\$356	21636	\$1,335	21872	\$712
20866	\$890	20960	\$623	21390	\$267	21638	\$890	21878	\$267
20867	\$890	21100	\$267	21392	\$356	21650	\$712	21879	\$445
20868	\$890	21110	\$445	21400	\$356	21652	\$890	21880	\$623
20880	\$1,335	21112	\$356	21402	\$623	21654	\$712	21881	\$801
20882	\$890	21114	\$445	21403	\$890	21656	\$890	21882	\$979
20884	\$445	21116	\$534	21404	\$445	21670	\$356	21883	\$1,157
20886	\$534	21120	\$534	21420	\$267	21680	\$267	21884	\$1,335
20900	\$267	21130	\$267	21430	\$356	21682	\$356	21885	\$1,513
20902	\$356	21140	\$1,335	21432	\$445	21685	\$890	21886	\$1,691
20904	\$623	21150	\$890	21440	\$712	21700	\$267	21887	\$1,869
20905	\$890	21155	\$890	21445	\$890	21710	\$356	21900	\$267
20906	\$356	21160	\$356	21460	\$267	21712	\$445	21906	\$445
20910	\$356	21170	\$712	21461	\$356	21714	\$445	21908	\$534
20911	\$445	21195	\$267	21462	\$267	21716	\$445	21910	\$801
20912	\$445	21199	\$356	21464	\$356	21730	\$267	21912	\$445
20914	\$623	21200	\$356	21472	\$445	21732	\$356	21914	\$534
20916	\$623	21202	\$356	21474	\$445	21740	\$445	21915	\$445
20920	\$356	21210	\$534	21480	\$356	21756	\$534	21916	\$445

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
21918	\$445	22051	\$801	23280	\$2,848	23650	\$6,141	24102	\$9,434
21922	\$602	22055	\$1,068	23290	\$2,937	23660	\$6,230	24103	\$9,523
21925	\$356	22065	\$445	23300	\$3,026	23670	\$6,319	24104	\$9,612
21926	\$430	22075	\$1,335	23310	\$3,115	23680	\$6,408	24105	\$9,701
21930	\$534	22900	\$534	23320	\$3,204	23690	\$6,497	24106	\$9,790
21935	\$445	22905	\$534	23330	\$3,293	23700	\$6,586	24107	\$9,879
21936	\$516	23010	\$89	23340	\$3,382	23710	\$6,675	24108	\$9,968
21939	\$267	23025	\$178	23350	\$3,471	23720	\$6,764	24109	\$10,057
21941	\$623	23035	\$267	23360	\$3,560	23730	\$6,853	24110	\$10,146
21942	\$890	23045	\$356	23370	\$3,649	23740	\$6,942	24111	\$10,235
21943	\$445	23055	\$445	23380	\$3,738	23750	\$7,031	24112	\$10,324
21945	\$445	23065	\$534	23390	\$3,827	23760	\$7,120	24113	\$10,413
21949	\$445	23075	\$623	23400	\$3,916	23770	\$7,209	24114	\$10,502
21952	\$860	23085	\$712	23410	\$4,005	23780	\$7,298	24115	\$10,591
21955	\$445	23091	\$801	23420	\$4,094	23790	\$7,387	24116	\$10,680
21959	\$445	23101	\$890	23430	\$4,183	23800	\$7,476	24117	\$10,769
21962	\$445	23111	\$979	23440	\$4,272	23810	\$7,565	24118	\$10,858
21965	\$445	23112	\$1,068	23450	\$4,361	23820	\$7,654	24119	\$10,947
21969	\$712	23113	\$1,157	23460	\$4,450	23830	\$7,743	24120	\$11,036
21970	\$1,335	23114	\$1,246	23470	\$4,539	23840	\$7,832	24121	\$11,125
21973	\$445	23115	\$1,335	23480	\$4,628	23850	\$7,921	24122	\$11,214
21976	\$445	23116	\$1,424	23490	\$4,717	23860	\$8,010	24123	\$11,303
21980	\$445	23117	\$1,513	23500	\$4,806	23870	\$8,099	24124	\$11,392
21990	\$267	23118	\$1,602	23510	\$4,895	23880	\$8,188	24125	\$11,481
21997	\$356	23119	\$1,691	23520	\$4,984	23890	\$8,277	24126	\$11,570
22002	\$356	23121	\$1,780	23530	\$5,073	23900	\$8,366	24127	\$11,659
22007	\$356	23170	\$1,869	23540	\$5,162	23910	\$8,455	24128	\$11,748
22008	\$356	23180	\$1,958	23550	\$5,251	23920	\$8,544	24129	\$11,837
22012	\$267	23190	\$2,047	23560	\$5,340	23930	\$8,633	24130	\$11,926
22014	\$267	23200	\$2,136	23570	\$5,429	23940	\$8,722	24131	\$12,015
22015	\$534	23210	\$2,225	23580	\$5,518	23950	\$8,811	24132	\$12,104
22020	\$356	23220	\$2,314	23590	\$5,607	23960	\$8,900	24133	\$12,193
22025	\$356	23230	\$2,403	23600	\$5,696	23970	\$8,989	24134	\$12,282
22031	\$445	23240	\$2,492	23610	\$5,785	23980	\$9,078	24135	\$12,371
22036	\$267	23250	\$2,581	23620	\$5,874	23990	\$9,167	24136	\$12,460
22041	\$178	23260	\$2,670	23630	\$5,963	24100	\$9,256	25000	\$89
22042	\$89	23270	\$2,759	23640	\$6,052	24101	\$9,345	25005	\$178

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
25010	\$267	30084	\$158	30251	\$5,215	30382	\$3,710	30449	\$3,070
25014	\$89	30087	\$79	30253	\$2,365	30384	\$3,155	30450	\$1,490
25020	\$178	30090	\$340	30255	\$3,145	30385	\$1,610	30451	\$770
25025	*derived	30093	\$350	30256	\$995	30387	\$1,835	30452	\$1,070
25030	*derived	30094	\$545	30259	\$565	30388	\$4,535	30454	\$2,630
25050	*derived	30097	\$265	30262	\$170	30390	\$625	30455	\$2,915
25200	*derived	30099	\$235	30266	\$425	30392	\$1,660	30457	\$3,915
25205	*derived	30103	\$530	30269	\$435	30396	\$2,885	30458	\$2,915
30001	*derived	30104	\$315	30272	\$855	30397	\$660	30460	\$2,455
30003	\$76	30107	\$565	30275	\$4,995	30399	\$905	30461	\$4,270
30006	\$132	30176	\$2,635	30278	\$132	30400	\$1,795	30463	\$5,155
30010	\$215	30180	\$355	30281	\$335	30406	\$158	30464	\$6,185
30014	\$455	30183	\$710	30283	\$565	30408	\$1,115	30469	\$4,885
30017	\$920	30187	\$640	30286	\$1,145	30409	\$560	30472	\$2,640
30020	\$1,825	30189	\$370	30289	\$1,445	30411	\$250	30473	\$630
30023	\$920	30190	\$990	30293	\$1,275	30412	\$148	30475	\$1,020
30024	\$920	30191	\$175	30294	\$4,995	30414	\$1,960	30478	\$925
30026	\$158	30192	\$98	30296	\$2,905	30415	\$3,915	30479	\$1,365
30029	\$235	30196	\$315	30297	\$2,905	30416	\$2,130	30481	\$1,010
30032	\$210	30202	\$118	30299	\$1,820	30417	\$3,195	30482	\$715
30035	\$315	30207	\$108	30300	\$2,180	30418	\$4,535	30483	\$505
30038	\$235	30210	\$425	30302	\$1,455	30419	\$2,315	30484	\$1,030
30042	\$525	30216	\$66	30303	\$1,745	30421	\$5,670	30485	\$1,610
30045	\$315	30219	\$66	30306	\$2,325	30422	\$1,915	30488	\$255
30049	\$540	30223	\$425	30310	\$2,270	30425	\$3,710	30490	\$1,485
30052	\$730	30224	\$685	30314	\$1,640	30427	\$4,430	30491	\$1,565
30055	\$215	30225	\$770	30315	\$3,550	30428	\$4,740	30492	\$2,300
30058	\$410	30226	\$435	30317	\$3,875	30430	\$6,595	30494	\$1,195
30061	\$63	30229	\$775	30318	\$3,550	30431	\$1,575	30495	\$2,300
30062	\$170	30232	\$640	30320	\$3,875	30433	\$2,060	30515	\$2,000
30064	\$285	30235	\$855	30323	\$3,875	30439	\$530	30517	\$2,535
30068	\$790	30238	\$435	30324	\$3,875	30440	\$1,505	30518	\$2,825
30071	\$196	30241	\$920	30329	\$700	30441	\$385	30520	\$1,915
30072	\$196	30244	\$920	30330	\$2,040	30442	\$530	30521	\$3,550
30075	\$500	30246	\$2,025	30332	\$760	30443	\$2,100	30526	\$6,125
30078	\$128	30247	\$2,170	30335	\$2,025	30445	\$2,320	30529	\$3,710
30081	\$285	30250	\$3,550	30336	\$2,425	30448	\$2,765	30530	\$2,225

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
30532	\$2,585	30666	\$132	30791	\$1,250	31369	\$730	31530	\$1,325
30533	\$3,065	30672	\$1,115	30792	\$3,426	31370	\$425	31533	\$320
30559	\$2,410	30676	\$1,090	30800	\$2,066	31371	\$1,055	31536	\$545
30560	\$2,680	30679	\$255	30810	\$3,291	31372	\$910	31548	\$390
30562	\$1,690	30680	\$3,395	30820	\$528	31373	\$1,055	31551	\$475
30563	\$1,690	30682	\$3,395	31000	\$1,535	31374	\$830	31554	\$1,010
30565	\$2,475	30684	\$4,180	31001	\$1,920	31375	\$895	31557	\$760
30574	\$355	30686	\$4,180	31002	\$2,305	31376	\$1,040	31560	\$810
30577	\$3,090	30687	\$1,365	31003	\$1,666	31400	\$785	31563	\$2,860
30583	\$3,385	30688	\$1,060	31004	\$2,083	31403	\$910	31566	\$360
30584	\$5,010	30690	\$1,635	31005	\$2,500	31406	\$1,515	31569	\$2,437
30589	\$3,550	30692	\$1,060	31206	\$285	31409	\$4,585	31572	\$2,999
30590	\$3,915	30694	\$1,635	31211	\$360	31412	\$5,215	31575	\$2,437
30593	\$5,360	30720	\$1,278	31216	\$425	31423	\$1,180	31578	\$2,437
30594	\$6,185	30721	\$1,386	31220	\$545	31426	\$2,360	31581	\$2,999
30596	\$2,555	30722	\$1,495	31221	\$545	31429	\$3,680	31584	\$4,415
30599	\$3,710	30723	\$1,495	31225	\$970	31432	\$3,935	31585	\$2,387
30600	\$2,235	30724	\$1,502	31245	\$1,090	31435	\$2,895	31587	\$281
30601	\$2,720	30725	\$2,663	31250	\$1,090	31438	\$4,230	31590	\$740
30606	\$3,155	30730	\$2,777	31340	*derived	31454	\$1,645	32000	\$2,790
30615	\$1,575	30731	\$2,083	31345	\$600	31456	\$715	32003	\$2,915
30621	\$1,065	30732	\$11,403	31346	\$600	31458	\$860	32004	\$3,195
30628	\$92	30750	\$5,916	31350	\$1,235	31460	\$1,040	32005	\$3,620
30629	\$1,575	30751	\$5,916	31355	\$2,035	31462	\$1,520	32006	\$3,195
30630	\$705	30752	\$4,437	31356	\$655	31466	\$3,810	32009	\$3,685
30631	\$610	30753	\$4,937	31357	\$325	31468	\$4,190	32012	\$4,070
30635	\$855	30754	\$4,937	31358	\$800	31472	\$3,410	32015	\$4,800
30640	\$2,600	30755	\$3,703	31359	\$975	31500	\$605	32018	\$4,250
30641	\$1,065	30756	\$2,500	31360	\$495	31503	\$810	32021	\$1,515
30642	\$2,285	30760	\$1,687	31361	\$550	31506	\$910	32023	\$1,565
30644	\$1,575	30761	\$2,177	31362	\$400	31509	\$760	32024	\$3,685
30648	\$1,333	30762	\$4,770	31363	\$725	31512	\$1,420	32025	\$4,990
30651	\$1,495	30763	\$1,937	31364	\$495	31515	\$955	32026	\$5,375
30652	\$1,495	30770	\$2,399	31365	\$470	31516	\$1,905	32028	\$5,755
30655	\$2,625	30771	\$4,839	31366	\$280	31519	\$1,505	32029	\$1,150
30657	\$3,738	30780	\$4,030	31367	\$630	31524	\$2,125	32030	\$2,870
30663	\$410	30790	\$2,012	31368	\$370	31525	\$1,492	32033	\$4,205

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
32036	\$5,170	32135	\$182	32224	\$1,000	32760	\$1,235	33181	\$5,465
32039	\$4,070	32138	\$1,095	32225	\$1,000	32763	\$3,530	33500	\$3,030
32042	\$3,500	32139	\$1,095	32226	\$1,000	32766	\$4,000	33506	\$3,755
32045	\$1,310	32142	\$188	32227	\$1,405	32769	\$810	33509	\$4,060
32046	\$2,085	32145	\$375	32228	\$1,000	33050	\$4,345	33512	\$4,515
32047	\$2,425	32147	\$122	32229	\$705	33055	\$3,485	33515	\$4,965
32051	\$6,250	32150	\$775	32500	\$320	33070	\$2,515	33518	\$3,755
32054	\$5,735	32153	\$180	32504	\$790	33075	\$3,195	33521	\$4,060
32057	\$1,515	32156	\$460	32507	\$1,575	33080	\$3,900	33524	\$4,825
32060	\$6,250	32159	\$1,120	32508	\$1,575	33100	\$4,265	33527	\$5,595
32063	\$5,735	32162	\$1,310	32511	\$2,345	33103	\$5,980	33530	\$4,825
32066	\$1,515	32165	\$1,710	32514	\$2,740	33109	\$7,245	33533	\$5,440
32069	\$4,630	32166	\$575	32517	\$3,525	33112	\$6,265	33536	\$4,000
32072	\$154	32168	\$370	32520	\$1,575	33115	\$4,240	33539	\$2,860
32075	\$275	32171	\$240	32522	\$2,345	33116	\$4,240	33542	\$4,095
32084	\$335	32174	\$240	32523	\$1,575	33118	\$4,715	33545	\$825
32094	\$1,535	32175	\$455	32526	\$2,345	33119	\$4,715	33548	\$1,655
32095	\$355	32177	\$470	32700	\$4,265	33121	\$5,185	33551	\$820
32096	\$690	32180	\$685	32703	\$3,645	33124	\$3,585	33554	\$780
32099	\$930	32183	\$1,535	32708	\$4,310	33127	\$4,720	33800	\$3,490
32102	\$1,760	32186	\$1,535	32710	\$4,790	33130	\$4,105	33803	\$3,325
32103	\$2,110	32200	\$820	32711	\$5,265	33133	\$3,070	33806	\$2,410
32104	\$2,705	32203	\$1,765	32712	\$3,740	33136	\$7,770	33810	\$1,695
32105	\$1,310	32206	\$1,595	32715	\$3,740	33139	\$4,720	33811	\$5,065
32106	\$3,685	32209	\$2,560	32718	\$3,530	33142	\$4,410	33812	\$2,765
32108	\$2,705	32210	\$710	32721	\$5,595	33145	\$7,540	33815	\$2,380
32111	\$1,710	32212	\$380	32724	\$6,365	33148	\$9,390	33818	\$2,775
32112	\$2,110	32213	\$1,880	32730	\$4,825	33151	\$8,925	33821	\$3,175
32114	\$470	32214	\$950	32733	\$5,595	33154	\$6,615	33824	\$3,030
32115	\$355	32215	\$355	32736	\$1,235	33157	\$7,385	33827	\$3,325
32117	\$2,705	32216	\$1,690	32739	\$3,835	33160	\$7,770	33830	\$4,070
32120	\$690	32217	\$445	32742	\$4,410	33163	\$6,230	33833	\$3,950
32123	\$905	32218	\$445	32745	\$5,025	33166	\$6,230	33836	\$4,720
32126	\$1,475	32220	\$2,515	32748	\$5,435	33169	\$4,865	33839	\$5,490
32129	\$1,710	32221	\$2,515	32751	\$3,530	33172	\$3,785	33842	\$2,720
32131	\$1,460	32222	\$1,000	32754	\$4,410	33175	\$3,515	33845	\$1,900
32132	\$122	32223	\$1,000	32757	\$1,235	33178	\$4,470	33848	\$1,900

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
34100	\$2,105	34530	\$585	35327	\$1,165	35560	\$2,185	35633	\$675
34103	\$1,240	34533	\$3,670	35330	\$2,270	35561	\$4,110	35634	\$2,215
34106	\$865	34538	\$815	35331	\$1,730	35562	\$3,375	35635	\$1,190
34109	\$925	34539	\$580	35360	\$2,420	35564	\$1,545	35636	\$1,355
34112	\$2,545	34800	\$2,410	35361	\$2,075	35565	\$2,010	35637	\$1,200
34115	\$2,855	34803	\$5,335	35362	\$1,730	35566	\$1,100	35638	\$2,210
34118	\$4,105	34806	\$2,860	35363	\$1,390	35568	\$1,825	35640	\$550
34121	\$3,285	34809	\$2,860	35404	\$1,050	35569	\$465	35641	\$4,440
34124	\$3,595	34812	\$3,480	35406	\$2,465	35570	\$1,620	35643	\$650
34127	\$4,720	34815	\$2,860	35408	\$1,750	35571	\$1,620	35644	\$615
34130	\$1,480	34818	\$3,175	35410	\$2,470	35572	\$385	35645	\$955
34133	\$1,655	34821	\$4,305	35412	\$8,680	35573	\$2,430	35646	\$610
34136	\$2,650	34824	\$1,480	35414	\$12,400	35577	\$1,970	35647	\$610
34139	\$2,650	34827	\$1,790	35500	\$220	35578	\$1,970	35648	\$955
34142	\$3,030	34830	\$2,105	35502	\$220	35581	\$1,620	35649	\$1,330
34145	\$2,375	34833	\$2,720	35503	\$146	35582	\$2,430	35653	\$1,960
34148	\$4,265	35000	\$2,105	35506	\$146	35585	\$4,305	35657	\$1,960
34151	\$5,805	35003	\$2,720	35507	\$515	35595	\$2,980	35658	\$1,210
34154	\$6,965	35006	\$3,190	35508	\$775	35596	\$1,900	35661	\$2,635
34157	\$3,535	35009	\$2,650	35509	\$240	35597	\$4,310	35664	\$4,355
34160	\$6,615	35012	\$2,060	35513	\$620	35599	\$2,070	35667	\$3,680
34163	\$8,465	35100	\$1,010	35517	\$405	35602	\$1,845	35670	\$3,215
34166	\$8,465	35103	\$645	35518	\$760	35605	\$1,025	35673	\$2,125
34169	\$4,725	35200	\$540	35520	\$160	35608	\$172	35674	\$760
34172	\$3,850	35202	\$2,570	35523	\$160	35611	\$172	35677	\$1,460
34175	\$3,535	35300	\$1,515	35527	\$405	35612	\$1,510	35678	\$1,915
34500	\$925	35303	\$1,940	35530	\$730	35613	\$1,205	35680	\$1,595
34503	\$1,220	35306	\$1,955	35533	\$955	35614	\$220	35684	\$995
34506	\$615	35307	\$3,460	35536	\$1,030	35615	\$160	35688	\$1,100
34509	\$2,890	35309	\$2,235	35539	\$810	35616	\$1,355	35691	\$505
34512	\$3,195	35312	\$2,545	35542	\$955	35618	\$655	35694	\$1,755
34515	\$2,270	35315	\$2,545	35545	\$480	35620	\$166	35697	\$2,615
34518	\$3,815	35317	\$1,055	35548	\$2,480	35622	\$1,840	35700	\$1,985
34521	\$2,255	35319	\$1,895	35551	\$2,410	35623	\$2,360	35703	\$186
34524	\$1,235	35320	\$2,545	35552	\$3,955	35626	\$245	35706	\$184
34527	\$1,575	35321	\$2,385	35554	\$120	35627	\$330	35709	\$116
34528	\$785	35324	\$895	35557	\$600	35630	\$550	35710	\$1,380

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
35713	\$1,260	36567	\$2,645	36666	\$875	37021	\$8,499	37224	\$840
35717	\$1,525	36570	\$3,370	36667	\$410	37023	\$1,085	37226	\$806
35720	\$1,660	36573	\$2,405	36668	\$410	37026	\$1,085	37227	\$2,760
35723	\$1,315	36576	\$3,010	36800	\$72	37029	\$2,405	37230	\$3,010
35726	\$1,315	36579	\$1,925	36803	\$1,205	37038	\$1,805	37233	\$1,445
35729	\$650	36585	\$1,925	36806	\$1,685	37039	\$1,918	37245	\$3,450
35730	\$650	36588	\$2,405	36809	\$2,165	37040	\$2,370	37300	\$120
35750	\$2,340	36591	\$2,890	36811	\$840	37041	\$120	37303	\$192
35753	\$2,590	36594	\$2,405	36812	\$435	37042	\$2,370	37306	\$1,685
35754	\$3,220	36597	\$2,405	36815	\$610	37043	\$1,755	37309	\$2,405
35756	\$2,340	36600	\$2,890	36818	\$715	37044	\$1,805	37318	\$720
35759	\$1,640	36603	\$3,370	36821	\$840	37045	\$3,715	37321	\$240
36502	\$1,860	36604	\$700	36822	\$1,312	37046	\$2,025	37324	\$600
36503	\$3,610	36606	\$6,015	36823	\$1,509	37047	\$4,330	37327	\$840
36504	\$755	36607	\$2,045	36824	\$555	37048	\$2,629	37330	\$1,685
36505	\$590	36608	\$790	36827	\$600	37050	\$1,925	37333	\$1,445
36506	\$2,405	36609	\$1,925	36830	\$530	37053	\$2,170	37336	\$1,925
36507	\$1,000	36610	\$5,047	36833	\$720	37200	\$2,645	37338	\$2,370
36508	\$1,960	36611	\$7,960	36836	\$600	37201	\$2,145	37339	\$625
36509	\$2,045	36612	\$1,685	36840	\$840	37202	\$1,075	37340	\$2,370
36516	\$2,405	36615	\$1,925	36842	\$840	37203	\$3,010	37341	\$2,370
36519	\$3,370	36618	\$1,685	36845	\$1,805	37206	\$1,445	37342	\$2,165
36522	\$2,890	36621	\$1,205	36848	\$600	37207	\$3,010	37343	\$3,615
36525	\$4,090	36624	\$1,445	36851	\$600	37208	\$1,445	37344	\$2,591
36528	\$3,370	36627	\$1,805	36854	\$1,205	37209	\$3,370	37345	\$1,805
36529	\$4,145	36633	\$1,925	36860	\$435	37210	\$4,140	37348	\$1,805
36531	\$3,010	36636	\$1,035	36863	\$1,205	37211	\$5,030	37351	\$720
36532	\$4,320	36639	\$2,165	37000	\$1,925	37213	\$6,795	37354	\$845
36533	\$5,105	36645	\$2,770	37004	\$1,685	37214	\$8,254	37369	\$480
36537	\$1,805	36649	\$700	37008	\$1,085	37215	\$1,085	37372	\$2,405
36543	\$3,370	36650	\$445	37011	\$240	37216	\$585	37375	\$3,010
36546	\$1,800	36652	\$1,690	37014	\$2,770	37217	\$360	37381	\$1,925
36549	\$2,165	36654	\$2,165	37015	\$3,638	37218	\$360	37384	\$3,010
36552	\$1,925	36656	\$2,775	37016	\$5,673	37219	\$875	37387	\$840
36558	\$1,685	36663	\$1,735	37018	\$8,509	37220	\$2,760	37388	\$278
36561	\$440	36664	\$1,555	37019	\$5,666	37221	\$1,205	37390	\$2,405
36564	\$2,405	36665	\$330	37020	\$1,925	37223	\$520	37393	\$605

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
37396	\$1,925	37839	\$2,045	38311	\$5,086	38448	\$995	38519	\$3,033
37402	\$1,205	37842	\$3,975	38313	\$5,851	38449	\$5,785	38550	\$5,720
37405	\$2,405	37845	\$1,805	38314	\$6,617	38450	\$2,385	38553	\$7,245
37408	\$1,205	37848	\$3,250	38316	\$4,546	38452	\$1,495	38554	\$11,680
37411	\$2,405	37851	\$2,410	38317	\$5,759	38453	\$4,490	38555	\$9,302
37415	\$122	37854	\$965	38319	\$6,524	38455	\$6,285	38556	\$8,270
37417	\$1,445	38200	\$1,030	38320	\$4,546	38456	\$4,135	38557	\$10,737
37418	\$1,930	38203	\$1,290	38322	\$5,759	38457	\$3,870	38558	\$14,016
37423	\$2,405	38206	\$1,560	38323	\$6,524	38458	\$2,050	38568	\$4,965
37426	\$2,525	38209	\$1,755	38350	\$1,460	38460	\$745	38571	\$5,465
37429	\$840	38212	\$2,760	38353	\$580	38462	\$880	38572	\$5,185
37432	\$2,405	38213	\$1,755	38356	\$1,910	38464	\$960	38600	\$3,995
37435	\$240	38241	\$1,115	38358	\$7,200	38466	\$2,585	38603	\$2,500
37438	\$720	38244	\$2,536	38359	\$390	38467	\$2,749	38609	\$1,260
37601	\$720	38247	\$4,064	38362	\$1,005	38468	\$3,985	38612	\$1,405
37604	\$715	38248	\$2,536	38365	\$750	38469	\$4,635	38615	\$3,995
37605	\$1,125	38249	\$4,064	38368	\$4,395	38471	\$3,020	38618	\$4,980
37606	\$1,675	38251	\$2,536	38415	\$1,120	38472	\$826	38621	\$1,990
37607	\$3,610	38252	\$4,064	38416	\$1,602	38474	\$6,223	38624	\$2,235
37610	\$5,405	38254	\$1,278	38417	\$1,616	38477	\$5,865	38627	\$1,785
37613	\$720	38256	\$610	38418	\$2,500	38484	\$5,823	38637	\$1,445
37616	\$1,805	38270	\$2,230	38419	\$511	38485	\$2,390	38643	\$2,785
37619	\$720	38272	\$2,230	38420	\$674	38487	\$5,035	38653	\$4,980
37623	\$600	38273	\$2,230	38421	\$3,995	38490	\$1,625	38656	\$2,500
37800	\$1,355	38274	\$2,230	38422	\$1,055	38493	\$5,295	38670	\$4,980
37803	\$1,355	38275	\$730	38423	\$737	38499	\$5,823	38673	\$5,605
37806	\$1,565	38276	\$2,230	38424	\$2,500	38502	\$6,759	38677	\$5,245
37809	\$1,565	38285	\$350	38425	\$1,733	38508	\$6,230	38680	\$6,220
37812	\$1,445	38286	\$315	38426	\$1,300	38509	\$6,230	38700	\$2,785
37815	\$245	38287	\$5,470	38427	\$3,290	38510	\$1,790	38703	\$5,020
37818	\$1,285	38288	\$350	38430	\$1,715	38511	\$1,721	38706	\$4,750
37821	\$2,165	38290	\$6,965	38436	\$670	38512	\$5,475	38709	\$5,570
37824	\$3,010	38293	\$7,475	38438	\$3,995	38513	\$2,869	38715	\$4,450
37827	\$1,395	38307	\$5,086	38440	\$2,995	38515	\$6,970	38718	\$5,570
37830	\$1,805	38308	\$5,851	38441	\$4,735	38516	\$6,918	38721	\$3,900
37833	\$865	38309	\$2,735	38446	\$3,085	38517	\$8,425	38724	\$5,570
37836	\$1,805	38310	\$6,617	38447	\$4,135	38518	\$7,480	38727	\$3,905

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
38730	\$5,570	39134	\$1,100	39641	\$14,500	40709	\$4,670	41566	\$2,810
38733	\$3,900	39135	\$510	39651	\$16,705	40712	\$8,325	41569	\$2,965
38736	\$5,570	39136	\$515	39654	\$13,750	40801	\$5,630	41572	\$2,710
38739	\$5,020	39137	\$1,955	39656	\$10,980	40803	\$3,840	41575	\$6,125
38742	\$5,020	39138	\$1,975	39700	\$5,895	40850	\$7,270	41576	\$9,190
38745	\$5,570	39139	\$3,485	39703	\$4,675	40851	\$12,720	41578	\$6,125
38748	\$5,570	39140	\$960	39710	\$7,825	40852	\$1,095	41579	\$4,595
38751	\$5,570	39300	\$1,025	39712	\$9,100	40854	\$1,690	41581	\$7,050
38754	\$6,970	39303	\$1,410	39715	\$8,725	40856	\$820	41584	\$4,840
38757	\$5,570	39306	\$2,180	39718	\$5,250	40858	\$1,690	41587	\$6,590
38760	\$5,570	39307	\$2,364	39720	\$9,845	40860	\$6,495	41590	\$2,965
38764	\$6,123	39309	\$2,315	39801	\$16,705	40862	\$610	41593	\$3,915
38766	\$5,570	39312	\$1,275	39803	\$16,705	40905	\$1,920	41596	\$4,375
38800	\$112	39315	\$3,335	39815	\$5,900	41500	\$200	41599	\$4,375
38803	\$200	39318	\$2,045	39818	\$7,825	41501	\$520	41603	\$1,590
38806	\$390	39319	\$1,337	39821	\$8,845	41503	\$610	41604	\$595
38809	\$445	39321	\$1,540	39900	\$4,670	41506	\$405	41608	\$2,710
38812	\$590	39323	\$880	39903	\$7,050	41509	\$420	41611	\$1,805
39000	\$216	39324	\$905	39906	\$2,565	41512	\$1,520	41614	\$2,590
39007	\$510	39327	\$1,540	40004	\$5,125	41515	\$995	41615	\$2,825
39013	\$320	39328	\$1,359	40012	\$5,510	41518	\$2,425	41617	\$4,890
39015	\$1,105	39329	\$1,014	40018	\$510	41521	\$2,550	41618	\$4,895
39018	\$2,570	39330	\$905	40104	\$2,886	41524	\$735	41620	\$2,065
39100	\$770	39331	\$1,355	40106	\$6,990	41527	\$1,485	41623	\$2,965
39109	\$4,610	39332	\$1,191	40109	\$6,030	41530	\$2,450	41626	\$400
39113	\$6,800	39333	\$1,275	40112	\$7,175	41533	\$2,955	41629	\$1,290
39115	\$240	39336	\$794	40119	\$3,085	41536	\$3,310	41632	\$610
39118	\$940	39339	\$1,191	40600	\$3,085	41539	\$2,710	41635	\$2,955
39121	\$2,315	39342	\$1,563	40700	\$7,570	41542	\$2,965	41638	\$3,685
39124	\$4,745	39345	\$794	40701	\$1,280	41545	\$1,420	41641	\$122
39125	\$965	39503	\$3,085	40702	\$600	41548	\$1,675	41644	\$370
39126	\$1,170	39604	\$5,760	40703	\$7,825	41551	\$4,110	41647	\$275
39127	\$1,930	39610	\$3,335	40704	\$2,530	41554	\$4,845	41650	\$275
39128	\$2,135	39612	\$3,840	40705	\$2,275	41557	\$2,710	41653	\$205
39130	\$1,975	39615	\$6,160	40706	\$8,325	41560	\$2,965	41656	\$340
39131	\$415	39638	\$13,750	40707	\$715	41563	\$3,740	41659	\$200
39133	\$510	39639	\$10,980	40708	\$1,280	41564	\$5,000	41662	\$205

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
41668	\$610	41785	\$3,050	41907	\$315	42596	\$1,420	42689	\$295
41671	\$1,225	41786	\$2,000	41910	\$1,010	42599	\$1,530	42692	\$775
41672	\$1,575	41787	\$1,475	42503	\$295	42602	\$1,805	42695	\$1,180
41674	\$340	41789	\$750	42504	\$1,645	42605	\$1,290	42698	\$3,270
41677	\$260	41793	\$955	42505	\$1,645	42608	\$770	42701	\$1,805
41683	\$305	41797	\$405	42506	\$1,355	42610	\$255	42702	\$4,170
41686	\$205	41801	\$405	42509	\$1,675	42611	\$415	42703	\$1,355
41689	\$335	41804	\$225	42510	\$1,870	42614	\$136	42704	\$1,095
41692	\$460	41807	\$180	42512	\$1,355	42615	\$192	42705	\$2,614
41698	\$83	41810	\$90	42515	\$1,485	42617	\$310	42707	\$1,900
41701	\$260	41813	\$905	42518	\$955	42620	\$215	42710	\$2,135
41704	\$75	41816	\$485	42521	\$3,060	42622	\$220	42713	\$890
41707	\$1,085	41822	\$555	42524	\$595	42623	\$2,475	42716	\$3,290
41710	\$1,355	41825	\$905	42527	\$1,185	42626	\$2,820	42719	\$1,485
41713	\$1,675	41828	\$142	42530	\$1,675	42629	\$2,615	42725	\$3,545
41716	\$710	41831	\$965	42533	\$1,005	42632	\$285	42731	\$4,015
41719	\$305	41832	\$595	42536	\$2,385	42635	\$1,650	42734	\$890
41722	\$1,520	41834	\$3,610	42539	\$3,410	42638	\$1,070	42738	\$890
41725	\$1,160	41837	\$3,190	42542	\$1,420	42641	\$1,145	42739	\$890
41728	\$2,315	41840	\$3,925	42543	\$2,485	42644	\$205	42740	\$890
41729	\$1,475	41843	\$3,610	42545	\$3,180	42647	\$595	42741	\$890
41731	\$2,190	41855	\$810	42548	\$2,860	42650	\$205	42743	\$1,805
41734	\$2,900	41858	\$1,275	42551	\$1,805	42651	\$450	42744	\$810
41737	\$1,160	41861	\$1,560	42554	\$2,130	42652	\$2,330	42746	\$2,645
41740	\$154	41864	\$1,085	42557	\$2,965	42653	\$3,545	42749	\$3,280
41743	\$955	41867	\$1,585	42563	\$1,550	42656	\$3,930	42752	\$3,670
41746	\$2,190	41868	\$1,015	42569	\$2,965	42662	\$2,035	42755	\$460
41749	\$1,600	41870	\$1,150	42572	\$285	42665	\$1,530	42758	\$1,935
41752	\$760	41873	\$1,520	42573	\$605	42667	\$390	42761	\$1,485
41755	\$114	41876	\$1,520	42574	\$1,285	42668	\$205	42764	\$1,290
41764	\$315	41879	\$2,460	42575	\$240	42672	\$2,125	42767	\$2,965
41767	\$1,890	41880	\$675	42581	\$295	42673	\$1,155	42770	\$810
41770	\$1,805	41881	\$1,070	42584	\$775	42676	\$320	42773	\$2,130
41773	\$1,485	41884	\$240	42587	\$130	42677	\$148	42776	\$3,225
41776	\$1,520	41885	\$765	42588	\$143	42680	\$770	42779	\$3,230
41779	\$1,805	41886	\$460	42590	\$955	42683	\$315	42782	\$1,070
41782	\$2,460	41904	\$595	42593	\$595	42686	\$710	42785	\$845

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
42788	\$845	43533	\$1,686	43936	\$2,490	44359	\$845	45212	\$785
42791	\$845	43801	\$2,465	43939	\$1,895	44361	\$905	45215	\$3,440
42794	\$156	43804	\$2,625	43942	\$590	44364	\$775	45218	\$1,540
42801	\$2,825	43807	\$2,860	43945	\$2,490	44367	\$1,330	45221	\$860
42802	\$1,415	43810	\$3,340	43948	\$355	44370	\$1,870	45224	\$385
42805	\$1,575	43813	\$3,340	43951	\$2,230	44373	\$3,805	45227	\$1,515
42806	\$845	43816	\$3,100	43954	\$2,725	44376	*derived	45230	\$830
42807	\$980	43819	\$2,505	43957	\$2,960	45000	\$1,665	45233	\$1,660
42808	\$980	43822	\$2,505	43960	\$1,040	45003	\$1,850	45236	\$1,260
42809	\$1,155	43825	\$2,860	43963	\$4,145	45006	\$3,195	45239	\$770
42810	\$1,520	43828	\$3,160	43966	\$4,740	45009	\$1,010	45240	\$775
42811	\$1,215	43831	\$2,465	43969	\$6,515	45012	\$1,705	45400	\$625
42812	\$475	43834	\$2,860	43972	\$4,740	45015	\$925	45403	\$1,245
42815	\$1,545	43837	\$3,575	43975	\$5,570	45018	\$1,585	45406	\$1,390
42818	\$1,420	43840	\$3,100	43978	\$4,740	45019	\$1,180	45409	\$2,025
42821	\$240	43843	\$4,770	43981	\$1,305	45021	\$475	45412	\$3,095
42824	\$180	43846	\$5,125	43984	\$3,315	45024	\$1,185	45415	\$3,715
42833	\$1,675	43849	\$1,310	43987	\$3,675	45025	\$475	45418	\$4,390
42836	\$1,975	43852	\$4,175	43990	\$4,500	45026	\$1,065	45439	\$830
42839	\$1,935	43855	\$4,410	43993	\$4,855	45027	\$370	45442	\$1,775
42842	\$2,360	43858	\$1,550	43996	\$5,450	45030	\$355	45445	\$1,735
42845	\$495	43861	\$4,290	43999	\$680	45033	\$740	45448	\$1,155
42848	\$1,935	43864	\$3,220	44102	\$655	45035	\$2,080	45451	\$1,395
42851	\$1,935	43867	\$1,790	44105	\$116	45036	\$3,470	45460	\$4,225
42854	\$965	43870	\$2,505	44130	\$1,185	45039	\$740	45461	\$3,010
42857	\$1,070	43873	\$3,340	44133	\$940	45042	\$950	45462	\$2,175
42860	\$2,290	43876	\$2,860	44136	\$435	45045	\$950	45464	\$6,450
42863	\$2,170	43879	\$3,340	44325	\$775	45048	\$2,295	45465	\$4,595
42866	\$1,930	43882	\$4,290	44328	\$905	45051	\$1,415	45466	\$3,315
42869	\$1,350	43900	\$2,825	44331	\$1,520	45054	\$645	45468	\$6,445
42872	\$650	43903	\$4,710	44334	\$3,030	45200	\$830	45469	\$4,290
43021	\$1,795	43906	\$4,120	44338	\$415	45201	\$1,225	45471	\$8,100
43022	\$1,970	43909	\$4,120	44342	\$620	45202	\$1,225	45472	\$6,110
43023	\$490	43912	\$3,890	44346	\$825	45203	\$1,245	45474	\$9,755
43521	\$1,175	43915	\$2,945	44350	\$1,030	45206	\$1,180	45475	\$7,360
43527	\$1,022	43930	\$1,265	44354	\$1,240	45207	\$1,180	45477	\$11,880
43530	\$1,022	43933	\$1,335	44358	\$515	45209	\$1,585	45478	\$8,960

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
45480	\$13,600	45539	\$2,905	45617	\$625	45695	\$1,350	45799	\$90
45481	\$10,260	45542	\$1,660	45620	\$860	45698	\$1,320	45801	\$390
45483	\$15,495	45545	\$1,940	45623	\$2,300	45701	\$3,025	45803	\$1,000
45484	\$11,690	45546	\$615	45624	\$2,775	45704	\$865	45805	\$530
45485	\$2,565	45548	\$855	45625	\$775	45707	\$2,075	45807	\$755
45486	\$1,855	45551	\$1,365	45626	\$860	45710	\$1,245	45809	\$1,135
45487	\$1,215	45553	\$1,810	45627	\$913	45713	\$1,570	45811	\$1,535
45488	\$1,690	45554	\$2,155	45629	\$1,395	45714	\$2,205	45813	\$1,800
45489	\$2,530	45556	\$2,350	45632	\$1,525	45716	\$2,225	45815	\$905
45490	\$3,375	45558	\$3,525	45635	\$1,810	45720	\$2,580	45817	\$1,175
45491	\$5,065	45560	\$1,395	45641	\$3,205	45723	\$3,135	45819	\$1,520
45492	\$6,080	45561	\$5,145	45644	\$3,750	45726	\$3,290	45821	\$1,250
45493	\$1,215	45562	\$3,365	45645	\$630	45729	\$3,980	45823	\$335
45494	\$8,025	45563	\$3,365	45646	\$2,545	45731	\$3,720	45825	\$1,035
45496	\$1,220	45564	\$7,810	45647	\$3,750	45732	\$4,545	45827	\$990
45497	\$950	45565	\$5,860	45650	\$415	45735	\$4,300	45829	\$755
45498	\$765	45566	\$2,905	45652	\$940	45738	\$5,215	45831	\$990
45499	\$570	45568	\$1,365	45653	\$940	45741	\$4,715	45833	\$1,240
45500	\$3,130	45569	\$1,800	45656	\$2,015	45744	\$5,735	45835	\$1,540
45501	\$5,025	45570	\$2,380	45658	\$1,495	45747	\$5,160	45837	\$1,795
45502	\$5,030	45572	\$905	45659	\$1,440	45752	\$6,230	45839	\$1,795
45503	\$5,310	45575	\$2,150	45660	\$8,235	45753	\$6,175	45841	\$1,450
45504	\$5,025	45578	\$2,505	45661	\$3,660	45754	\$7,405	45843	\$890
45505	\$5,025	45581	\$855	45662	\$2,090	45755	\$1,195	45845	\$1,550
45506	\$625	45584	\$1,945	45665	\$985	45758	\$2,105	45847	\$535
45512	\$845	45587	\$2,345	45668	\$980	45761	\$1,985	45849	\$1,775
45515	\$580	45588	\$3,505	45669	\$980	45767	\$6,720	45851	\$435
45518	\$695	45590	\$1,275	45671	\$2,860	45770	\$5,115	45853	\$2,556
45519	\$1,315	45593	\$1,500	45674	\$860	45773	\$4,670	45855	\$1,250
45520	\$2,765	45596	\$2,460	45675	\$1,365	45776	\$4,670	45857	\$2,000
45522	\$1,940	45597	\$3,340	45676	\$1,625	45779	\$3,440	45859	\$1,040
45524	\$2,015	45599	\$1,945	45677	\$1,705	45782	\$2,625	45861	\$2,670
45527	\$2,020	45602	\$2,010	45680	\$1,945	45785	\$4,450	45863	\$2,960
45528	\$3,030	45605	\$1,660	45683	\$2,300	45788	\$4,390	45865	\$890
45530	\$2,980	45608	\$2,225	45686	\$2,550	45791	\$2,390	45867	\$980
45533	\$3,380	45611	\$1,585	45689	\$755	45794	\$1,550	45869	\$3,635
45536	\$1,245	45614	\$1,600	45692	\$710	45797	\$580	45871	\$4,095

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
45873	\$4,600	46340	\$1,137	46438	\$445	47007	\$1,013	47370	\$1,275
45875	\$1,485	46341	\$729	46441	\$1,100	47009	\$355	47373	\$915
45877	\$1,485	46342	\$1,520	46442	\$920	47012	\$705	47381	\$805
45879	\$980	46345	\$1,855	46444	\$1,590	47015	\$176	47384	\$1,075
45882	\$106	46348	\$825	46450	\$690	47018	\$415	47385	\$915
45885	\$1,050	46351	\$1,240	46453	\$1,235	47021	\$555	47386	\$1,485
45888	\$780	46354	\$1,650	46456	\$330	47024	\$415	47387	\$860
45891	\$1,850	46357	\$2,065	46464	\$740	47027	\$550	47390	\$1,280
45894	\$625	46360	\$2,475	46465	\$735	47030	\$415	47393	\$1,715
45897	\$3,455	46363	\$690	46468	\$1,280	47033	\$555	47396	\$595
45900	\$740	46364	\$1,337	46471	\$1,855	47042	\$235	47399	\$1,190
45939	\$1,050	46365	\$755	46474	\$2,400	47045	\$315	47402	\$885
45945	\$290	46367	\$1,141	46477	\$2,940	47047	\$932	47405	\$595
45975	\$405	46370	\$367	46480	\$1,230	47049	\$1,242	47408	\$1,190
45978	\$495	46372	\$1,400	46483	\$975	47052	\$1,211	47411	\$355
45981	\$270	46375	\$1,665	46486	\$735	47053	\$1,615	47414	\$715
45984	\$1,940	46378	\$2,205	46489	\$870	47054	\$680	47417	\$830
45987	\$1,940	46379	\$2,447	46492	\$1,185	47057	\$265	47420	\$1,620
45990	\$2,650	46380	\$3,082	46493	\$945	47060	\$355	47423	\$680
45993	\$2,650	46381	\$975	46495	\$665	47063	\$535	47426	\$1,030
45996	\$750	46384	\$975	46498	\$720	47066	\$710	47429	\$1,370
46300	\$1,100	46387	\$2,015	46500	\$865	47069	\$148	47432	\$1,715
46303	\$1,210	46390	\$2,710	46501	\$1,080	47301	\$275	47435	\$1,300
46308	\$1,510	46393	\$3,135	46502	\$995	47304	\$310	47438	\$2,080
46309	\$1,730	46394	\$3,428	46503	\$1,240	47307	\$630	47441	\$2,580
46312	\$2,145	46395	\$4,272	46504	\$3,605	47310	\$1,035	47444	\$710
46315	\$2,860	46399	\$1,700	46507	\$4,220	47313	\$1,010	47447	\$1,075
46318	\$3,575	46401	\$1,192	46510	\$1,150	47316	\$2,000	47450	\$1,415
46321	\$4,295	46408	\$2,270	46513	\$186	47319	\$2,050	47451	\$1,715
46322	\$2,266	46411	\$1,375	46519	\$465	47348	\$295	47453	\$830
46324	\$2,650	46414	\$1,730	46522	\$1,385	47351	\$740	47456	\$1,235
46325	\$2,765	46417	\$1,650	46525	\$186	47354	\$530	47459	\$1,670
46330	\$1,135	46420	\$690	46528	\$555	47357	\$1,190	47462	\$355
46333	\$1,855	46423	\$1,100	46531	\$280	47361	\$415	47465	\$1,485
46335	\$1,337	46426	\$1,110	46534	\$775	47362	\$625	47466	\$350
46336	\$865	46432	\$1,400	47000	\$148	47364	\$885	47467	\$715
46339	\$1,520	46434	\$1,394	47003	\$176	47367	\$705	47468	\$1,370

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
47471	\$134	47592	\$935	47904	\$188	48424	\$2,375	49116	\$4,690
47474	\$595	47593	\$2,289	47906	\$375	48426	\$2,620	49117	\$5,630
47477	\$740	47595	\$462	47915	\$565	48427	\$2,875	49118	\$860
47480	\$1,485	47597	\$1,030	47916	\$285	48430	\$770	49121	\$1,930
47483	\$1,780	47600	\$1,365	47918	\$785	48433	\$3,066	49124	\$1,066
47486	\$2,965	47603	\$1,780	47921	\$375	48435	\$1,620	49200	\$2,580
47489	\$4,450	47612	\$1,280	47924	\$126	48507	\$1,051	49203	\$1,930
47495	\$1,485	47615	\$1,485	47927	\$470	48509	\$740	49206	\$1,780
47498	\$2,215	47618	\$1,850	47929	\$1,080	48512	\$2,820	49209	\$2,375
47501	\$2,965	47621	\$1,280	47953	\$1,242	48900	\$890	49210	\$3,130
47511	\$4,051	47624	\$1,780	47954	\$1,260	48903	\$1,780	49212	\$740
47514	\$2,363	47630	\$1,075	47955	\$1,869	48906	\$1,780	49213	\$2,417
47516	\$1,365	47637	\$550	47956	\$2,804	48909	\$2,375	49215	\$2,045
47519	\$2,730	47639	\$715	47964	\$621	48915	\$2,375	49218	\$860
47528	\$2,375	47648	\$935	47967	\$1,242	48918	\$4,745	49219	\$783
47531	\$3,025	47657	\$1,485	47975	\$1,230	48921	\$4,895	49220	\$1,756
47534	\$3,410	47663	\$445	47978	\$745	48924	\$5,635	49221	\$1,930
47537	\$1,365	47666	\$740	47981	\$500	48927	\$1,155	49224	\$2,225
47540	\$680	47672	\$355	47982	\$1,195	48939	\$3,410	49227	\$2,225
47543	\$710	47678	\$530	47983	\$2,485	48942	\$4,450	49230	\$2,643
47546	\$1,075	47735	\$124	47984	\$2,485	48945	\$860	49233	\$1,113
47549	\$1,415	47738	\$1,070	48245	\$897	48948	\$1,930	49236	\$1,677
47552	\$1,190	47741	\$1,465	48248	\$1,390	48951	\$2,820	49239	\$835
47555	\$1,780	47753	\$1,280	48251	\$1,143	48954	\$2,965	49300	\$1,630
47558	\$2,375	47756	\$1,280	48254	\$2,620	48958	\$3,106	49303	\$1,720
47559	\$2,193	47762	\$750	48257	\$1,143	48960	\$2,965	49306	\$3,410
47561	\$860	47765	\$1,235	48400	\$1,040	48972	\$1,242	49309	\$2,375
47565	\$2,240	47768	\$1,510	48403	\$1,630	48980	\$2,296	49315	\$2,670
47566	\$2,860	47771	\$1,735	48406	\$1,040	48983	\$1,684	49318	\$4,150
47568	\$1,175	47774	\$1,370	48409	\$1,630	48986	\$2,296	49319	\$7,255
47570	\$1,715	47777	\$1,370	48412	\$1,985	49100	\$1,040	49321	\$5,040
47573	\$2,150	47780	\$1,780	48415	\$2,520	49104	\$1,519	49360	\$1,085
47579	\$505	47783	\$1,780	48419	\$1,809	49105	\$2,228	49363	\$1,305
47582	\$1,040	47786	\$2,260	48420	\$2,296	49106	\$2,965	49366	\$1,925
47585	\$1,335	47789	\$2,260	48421	\$2,520	49109	\$2,225	49372	\$2,646
47588	\$4,150	47900	\$565	48422	\$2,620	49112	\$2,225	49374	\$4,914
47591	\$5,040	47903	\$785	48423	\$2,161	49115	\$3,560	49376	\$6,049

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
49378	\$5,292	49570	\$783	49768	\$2,626	49815	\$2,375	50233	\$5,930
49380	\$6,427	49572	\$1,906	49769	\$2,599	49818	\$860	50236	\$4,450
49382	\$8,317	49574	\$1,906	49770	\$4,321	49821	\$1,365	50239	\$2,965
49384	\$9,829	49576	\$1,906	49771	\$1,066	49824	\$2,390	50242	\$2,431
49386	\$6,805	49578	\$1,906	49772	\$941	49827	\$1,485	50245	\$7,292
49388	\$7,939	49580	\$1,906	49773	\$1,166	49830	\$2,595	50300	\$3,440
49390	\$9,451	49582	\$2,225	49774	\$794	49833	\$1,630	50303	\$4,700
49392	\$13,231	49584	\$2,225	49775	\$1,072	49836	\$2,820	50306	\$7,335
49394	\$11,341	49586	\$2,225	49776	\$3,372	49837	\$2,060	50309	\$905
49396	\$7,561	49590	\$1,066	49777	\$1,996	49838	\$3,545	50310	\$125
49398	\$5,671	49703	\$1,930	49778	\$2,995	49839	\$1,630	50312	\$2,080
49500	\$1,185	49706	\$1,040	49779	\$3,494	49845	\$1,485	50321	\$2,760
49503	\$1,545	49709	\$2,225	49780	\$3,993	49851	\$650	50324	\$4,100
49506	\$2,340	49712	\$2,375	49781	\$2,995	49854	\$1,185	50330	\$680
49509	\$2,375	49715	\$3,560	49782	\$1,622	49857	\$1,095	50333	\$1,835
49512	\$3,410	49716	\$4,690	49783	\$2,175	49860	\$890	50335	\$1,769
49515	\$2,670	49717	\$5,630	49784	\$2,486	49866	\$950	50336	\$2,740
49516	\$6,056	49718	\$1,185	49785	\$2,796	49878	\$178	50339	\$1,670
49517	\$3,810	49724	\$2,075	49786	\$3,107	49881	\$631	50345	\$1,030
49518	\$4,150	49727	\$890	49787	\$3,417	49884	\$1,066	50348	\$680
49519	\$7,255	49728	\$1,685	49788	\$3,728	49887	\$852	50351	\$4,755
49521	\$5,040	49730	\$1,756	49789	\$3,207	49890	\$1,439	50352	\$178
49524	\$5,930	49732	\$1,756	49790	\$2,785	50107	\$1,350	50354	\$3,895
49525	\$4,592	49734	\$945	49791	\$1,263	50112	\$1,130	50357	\$1,670
49527	\$5,040	49736	\$1,891	49792	\$1,418	50115	\$440	50360	\$1,935
49530	\$6,230	49738	\$1,350	49793	\$1,655	50118	\$1,365	50369	\$1,935
49533	\$7,120	49740	\$4,051	49794	\$1,891	50130	\$980	50372	\$3,400
49534	\$1,430	49742	\$3,825	49795	\$2,127	50200	\$595	50375	\$1,485
49536	\$2,965	49744	\$5,737	49796	\$2,364	50201	\$1,505	50378	\$2,595
49542	\$4,150	49760	\$1,013	49797	\$2,600	50203	\$1,305	50381	\$1,935
49544	\$4,401	49761	\$1,485	49798	\$2,837	50206	\$1,930	50384	\$3,400
49548	\$3,015	49762	\$1,648	49800	\$415	50209	\$2,375	50390	\$680
49551	\$4,210	49763	\$1,811	49803	\$535	50212	\$4,300	50393	\$2,515
49554	\$5,930	49764	\$1,974	49806	\$415	50215	\$5,635	50394	\$8,255
49564	\$2,920	49765	\$2,137	49809	\$680	50218	\$7,325	50395	\$2,620
49565	\$3,784	49766	\$2,300	49812	\$1,365	50221	\$6,525	50396	\$1,380
49569	\$2,380	49767	\$2,463	49814	\$2,836	50224	\$7,710	50399	\$2,740

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
50411	\$3,895	50588	\$2,845	51042	\$4,775	51160	\$3,195	52042	\$530
50414	\$5,255	50592	\$2,755	51043	\$5,975	51165	\$4,025	52045	\$755
50417	\$3,895	50596	\$861	51044	\$6,485	51170	\$7,065	52048	\$1,135
50420	\$3,215	50600	\$1,575	51045	\$6,825	51171	\$2,970	52051	\$1,535
50423	\$2,965	50604	\$6,685	51051	\$7,655	51300	\$255	52054	\$1,800
50426	\$1,380	50608	\$12,420	51052	\$9,310	51303	*derived	52055	\$66
50428	\$2,225	50612	\$17,665	51053	\$10,595	51306	\$358	52056	\$66
50450	\$3,665	50616	\$2,245	51054	\$5,650	51309	*derived	52057	\$425
50451	\$3,665	50620	\$12,420	51055	\$8,475	51312	*derived	52058	\$685
50455	\$4,150	50624	\$12,420	51056	\$9,890	51315	\$781	52059	\$770
50456	\$4,150	50628	\$15,340	51057	\$6,525	51318	\$516	52060	\$435
50460	\$6,195	50632	\$12,895	51058	\$7,345	51700	\$184	52061	\$640
50461	\$6,195	50636	\$14,330	51059	\$8,970	51703	\$98	52062	\$855
50465	\$8,725	50640	\$7,920	51061	\$8,515	51800	\$255	52063	\$920
50466	\$8,725	50644	\$7,645	51062	\$11,065	51803	*derived	52064	\$565
50470	\$11,060	50654	\$1,785	51063	\$13,405	51900	\$920	52066	\$995
50471	\$11,060	50950	\$2,340	51064	\$15,485	51902	\$198	52069	\$565
50475	\$12,765	50952	\$2,340	51065	\$16,720	51904	\$1,170	52072	\$170
50476	\$12,765	51011	\$6,040	51066	\$17,420	51906	\$1,760	52073	\$435
50508	\$1,420	51012	\$6,990	51071	\$6,795	52000	\$210	52075	\$425
50512	\$1,895	51013	\$8,735	51072	\$7,070	52003	\$315	52078	\$855
50524	\$1,540	51014	\$10,480	51073	\$8,970	52006	\$315	52081	\$132
50528	\$2,370	51015	\$12,230	51102	\$3,290	52009	\$540	52084	\$335
50532	\$2,060	51020	\$1,985	51103	\$6,720	52010	\$730	52087	\$565
50536	\$2,750	51021	\$3,620	51110	\$2,375	52012	\$63	52090	\$905
50540	\$1,895	51022	\$4,505	51111	\$1,010	52015	\$285	52092	\$1,175
50544	\$950	51023	\$5,360	51112	\$680	52018	\$790	52094	\$1,520
50548	\$1,895	51024	\$6,435	51113	\$755	52021	\$90	52095	\$1,250
50552	\$1,635	51025	\$7,342	51114	\$1,335	52024	\$196	52096	\$375
50556	\$2,180	51026	\$8,075	51115	\$1,335	52025	\$540	52097	\$530
50560	\$1,705	51031	\$2,965	51120	\$740	52027	\$500	52098	\$400
50564	\$2,275	51032	\$3,560	51130	\$5,810	52030	\$235	52099	\$126
50568	\$1,990	51033	\$4,155	51131	\$5,810	52033	\$530	52102	\$470
50572	\$2,655	51034	\$4,450	51140	\$1,395	52034	\$106	52105	\$875
50576	\$2,180	51035	\$4,745	51141	\$2,580	52035	\$1,365	52106	\$335
50580	\$2,275	51036	\$5,040	51145	\$920	52036	\$390	52108	\$985
50584	\$2,180	51041	\$3,410	51150	\$1,115	52039	\$1,000	52111	\$980

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
52114	\$1,660	52339	\$1,570	52615	\$1,540	53062	\$260	53424	\$1,940
52117	\$2,010	52342	\$2,580	52618	\$1,795	53064	\$437	53425	\$1,940
52120	\$2,217	52345	\$3,135	52621	\$1,795	53068	\$335	53427	\$2,650
52122	\$2,225	52348	\$3,290	52624	\$1,450	53070	\$460	53429	\$2,650
52123	\$1,945	52351	\$3,980	52626	\$890	53200	\$148	53439	\$750
52126	\$2,460	52354	\$3,720	52627	\$1,550	53203	\$290	53453	\$1,275
52129	\$3,340	52357	\$4,545	52630	\$580	53206	\$435	53455	\$1,500
52130	\$1,395	52360	\$4,300	52633	\$1,550	53209	\$4,390	53458	\$115
52131	\$1,930	52363	\$5,215	52636	\$580	53212	\$2,390	53459	\$1,070
52132	\$675	52366	\$4,715	52800	\$905	53215	\$1,250	53460	\$1,465
52133	\$240	52369	\$5,735	52803	\$1,275	53218	\$2,000	53700	\$334
52135	\$410	52372	\$5,160	52806	\$905	53220	\$1,040	53702	\$168
52138	\$1,085	52375	\$6,230	52809	\$1,540	53221	\$2,670	53704	\$101
52141	\$1,050	52378	\$1,985	52812	\$2,180	53224	\$2,960	53706	\$334
52144	\$780	52379	\$3,750	52815	\$2,315	53225	\$890	55028	\$222
52147	\$1,010	52380	\$6,175	52818	\$1,540	53226	\$980	55029	\$77
52148	\$2,025	52382	\$7,405	52821	\$3,335	53227	\$3,635	55030	\$222
52158	\$3,145	52420	\$740	52824	\$1,050	53230	\$4,095	55031	\$77
52180	\$595	52424	\$1,585	52826	\$770	53233	\$4,600	55032	\$222
52182	\$1,305	52430	\$3,130	52828	\$1,025	53236	\$1,485	55033	\$77
52184	\$1,930	52440	\$1,705	52830	\$1,410	53239	\$1,485	55036	\$226
52186	\$2,375	52442	\$1,945	52832	\$2,045	53242	\$980	55037	\$77
52300	\$830	52444	\$2,300	53000	\$83	53400	\$405	55038	\$222
52303	\$1,245	52446	\$2,550	53003	\$260	53403	\$495	55039	\$77
52306	\$1,850	52450	\$710	53004	\$75	53406	\$1,280	55048	\$222
52309	\$625	52452	\$1,350	53006	\$1,355	53409	\$1,280	55049	\$77
52312	\$830	52456	\$3,025	53009	\$710	53410	\$270	55054	\$222
52315	\$1,395	52458	\$865	53012	\$305	53411	\$750	55065	\$199
52318	\$445	52460	\$2,095	53015	\$1,520	53412	\$1,235	55066	\$447
52319	\$740	52480	\$2,015	53016	\$1,225	53413	\$1,510	55068	\$71
52321	\$1,415	52482	\$1,365	53017	\$1,575	53414	\$1,735	55070	\$199
52324	\$1,585	52484	\$1,625	53019	\$1,775	53415	\$1,370	55071	\$425
52327	\$785	52600	\$1,035	53052	\$329	53416	\$1,370	55073	\$69
52330	\$2,205	52603	\$990	53054	\$315	53418	\$1,780	55076	\$222
52333	\$2,075	52606	\$755	53056	\$205	53419	\$1,780	55079	\$77
52336	\$1,245	52609	\$990	53058	\$340	53422	\$2,260	55084	\$199
52337	\$3,455	52612	\$1,240	53060	\$340	53423	\$2,260	55085	\$69

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
55118	\$559	55708	\$71	55867	\$86	56107	\$690	57353	\$1,045
55126	\$468	55709	\$77	55868	\$224	56219	\$662	57354	\$1,045
55127	\$468	55712	\$233	55869	\$78	56220	\$487	57357	\$1,750
55128	\$468	55715	\$81	55870	\$248	56221	\$487	57360	\$1,421
55129	\$468	55718	\$203	55871	\$86	56223	\$487	57362	\$232
55130	\$345	55721	\$233	55872	\$224	56224	\$713	57506	\$60
55132	\$468	55723	\$77	55874	\$248	56225	\$713	57509	\$81
55133	\$422	55725	\$81	55876	\$224	56226	\$713	57512	\$82
55134	\$468	55729	\$55	55877	\$78	56233	\$487	57515	\$110
55135	\$718	55736	\$258	55878	\$248	56234	\$720	57518	\$66
55137	\$468	55739	\$116	55879	\$86	56237	\$492	57521	\$88
55141	\$835	55759	\$305	55880	\$224	56238	\$720	57522	\$67
55143	\$835	55762	\$122	55881	\$78	56301	\$599	57523	\$89
55145	\$968	55764	\$325	55882	\$248	56307	\$812	57524	\$100
55146	\$968	55766	\$132	55883	\$86	56401	\$508	57527	\$134
55238	\$344	55768	\$305	55884	\$224	56407	\$731	57541	\$150
55244	\$344	55770	\$122	55885	\$78	56409	\$508	57700	\$82
55246	\$344	55772	\$325	55886	\$248	56412	\$731	57703	\$110
55248	\$344	55774	\$132	55887	\$86	56501	\$782	57706	\$66
55252	\$344	55812	\$222	55888	\$224	56507	\$975	57709	\$88
55274	\$344	55814	\$77	55889	\$78	56553	\$1,056	57712	\$96
55276	\$344	55844	\$177	55890	\$248	56620	\$451	57715	\$124
55278	\$344	55846	\$77	55891	\$86	56622	\$451	57721	\$202
55280	\$344	55848	\$277	55892	\$224	56623	\$685	57901	\$131
55282	\$344	55850	\$366	55893	\$78	56626	\$685	57902	\$131
55284	\$344	55854	\$77	55894	\$248	56627	\$451	57905	\$132
55292	\$344	55856	\$224	55895	\$86	56628	\$685	57907	\$97
55294	\$344	55857	\$78	56001	\$396	56629	\$451	57915	\$96
55296	\$225	55858	\$248	56007	\$508	56630	\$685	57918	\$96
55600	\$222	55859	\$86	56010	\$512	56801	\$947	57921	\$96
55603	\$222	55860	\$224	56013	\$508	56807	\$1,137	57924	\$96
55700	\$122	55861	\$78	56016	\$589	57001	\$947	57927	\$101
55703	\$71	55862	\$248	56022	\$457	57007	\$1,153	57930	\$67
55704	\$142	55863	\$86	56028	\$684	57201	\$315	57933	\$159
55705	\$71	55864	\$224	56030	\$457	57341	\$954	57939	\$131
55706	\$203	55865	\$78	56036	\$684	57351	\$1,035	57942	\$101
55707	\$142	55866	\$248	56101	\$467	57352	\$1,045	57945	\$88

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
57960	\$96	58939	\$283	60051	\$1,679	61360	\$807	61461	\$1,056
57963	\$96	59103	\$43	60054	\$2,388	61361	\$923	61462	\$258
57966	\$96	59300	\$182	60057	\$2,794	61364	\$994	61469	\$696
57969	\$96	59302	\$410	60060	\$1,145	61368	\$446	61473	\$351
58100	\$136	59303	\$110	60063	\$1,679	61369	\$4,032	61480	\$774
58103	\$112	59305	\$231	60066	\$2,388	61372	\$446	61485	\$1,998
58106	\$156	59312	\$177	60069	\$2,794	61373	\$979	61495	\$446
58108	\$225	59314	\$107	60072	\$98	61376	\$287	61499	\$506
58109	\$95	59318	\$96	60075	\$195	61381	\$1,149	61505	\$200
58112	\$197	59700	\$196	60078	\$293	61383	\$1,250	61523	\$1,906
58115	\$223	59703	\$154	60500	\$88	61384	\$1,375	61524	\$1,906
58120	\$225	59712	\$231	60503	\$60	61386	\$665	61525	\$1,906
58121	\$225	59718	\$273	60506	\$129	61387	\$862	61529	\$1,906
58300	\$81	59724	\$460	60509	\$201	61389	\$741	61538	\$1,802
58306	\$182	59733	\$219	60918	\$96	61390	\$820	61541	\$1,906
58500	\$72	59739	\$150	60927	\$77	61393	\$1,211	61553	\$1,998
58503	\$96	59751	\$283	61109	\$526	61397	\$494	61559	\$1,836
58506	\$123	59754	\$445	61310	\$735	61402	\$1,210	61565	\$1,906
58509	\$81	59763	\$272	61313	\$607	61409	\$1,747	61571	\$1,906
58521	\$88	59970	\$342	61314	\$840	61413	\$452	61575	\$1,906
58524	\$115	60000	\$1,145	61321	\$658	61421	\$960	61577	\$1,906
58527	\$141	60003	\$1,679	61324	\$1,306	61425	\$1,201	61598	\$1,906
58700	\$94	60006	\$2,388	61325	\$658	61426	\$1,110	61604	\$1,906
58706	\$321	60009	\$2,794	61328	\$455	61429	\$1,086	61610	\$1,906
58715	\$308	60012	\$1,145	61329	\$1,964	61430	\$1,319	61620	\$1,906
58718	\$256	60015	\$1,679	61333	\$887	61433	\$994	61622	\$1,906
58721	\$281	60018	\$2,388	61336	\$1,210	61434	\$1,231	61628	\$1,906
58900	\$73	60021	\$2,794	61337	\$960	61438	\$1,346	61632	\$1,906
58903	\$97	60024	\$1,145	61340	\$506	61441	\$979	61640	\$1,998
58909	\$183	60027	\$1,679	61341	\$1,201	61442	\$1,505	61646	\$1,998
58912	\$224	60030	\$2,388	61344	\$200	61445	\$574	61647	\$1,906
58915	\$160	60033	\$2,794	61345	\$1,964	61446	\$667	61650	\$1,757
58916	\$281	60036	\$1,145	61348	\$887	61449	\$912	63001	\$404
58921	\$275	60039	\$1,679	61349	\$1,964	61450	\$795	63004	\$404
58927	\$155	60042	\$2,388	61353	\$773	61453	\$1,029	63007	\$404
58933	\$417	60045	\$2,794	61356	\$786	61454	\$696	63010	\$336
58936	\$398	60048	\$1,145	61357	\$1,306	61457	\$941	63040	\$336

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
63043	\$359	63240	\$448	63482	\$404	65090	\$31	66500	\$27
63046	\$404	63243	\$448	63487	\$690	65093	\$62	66503	\$33
63049	\$404	63271	\$493	63489	\$1,440	65096	\$114	66506	\$39
63052	\$404	63274	\$493	63491	\$45	65099	\$310	66509	\$44
63055	\$404	63277	\$493	63494	\$45	65102	\$470	66512	\$50
63058	\$404	63280	\$493	63496	\$250	65105	\$310	66517	\$55
63061	\$404	63301	\$381	63497	\$157	65108	\$470	66518	\$56
63064	\$404	63304	\$381	63498	\$45	65109	\$36	66519	\$114
63067	\$404	63307	\$381	63499	\$157	65110	\$36	66536	\$33
63070	\$404	63322	\$404	63501	\$500	65111	\$65	66539	\$86
63073	\$404	63325	\$404	63502	\$500	65114	\$26	66542	\$53
63101	\$493	63328	\$404	63507	\$403	65117	\$57	66545	\$44
63111	\$493	63331	\$404	63510	\$448	65120	\$39	66548	\$56
63114	\$493	63334	\$336	63513	\$404	65123	\$57	66557	\$27
63125	\$493	63337	\$448	63516	\$404	65126	\$78	66560	\$56
63128	\$493	63340	\$404	63519	\$404	65129	\$99	66563	\$69
63131	\$493	63361	\$404	63522	\$448	65137	\$71	66566	\$94
63151	\$359	63385	\$448	63531	\$690	65142	\$71	66569	\$120
63154	\$359	63388	\$448	63533	\$690	65144	\$158	66572	\$144
63161	\$359	63391	\$403	63545	\$550	65147	\$106	66575	\$170
63164	\$359	63395	\$856	63546	\$550	65150	\$198	66578	\$194
63167	\$359	63397	\$856	63547	\$690	65153	\$395	66581	\$220
63170	\$359	63401	\$404	63551	\$404	65156	\$595	66584	\$27
63173	\$359	63404	\$404	63554	\$359	65157	\$198	66587	\$134
63176	\$359	63416	\$404	63557	\$493	65158	\$198	66590	\$86
63179	\$359	63425	\$404	63560	\$404	65159	\$198	66593	\$53
63182	\$359	63428	\$404	65060	\$22	65162	\$29	66596	\$97
63185	\$359	63440	\$404	65066	\$29	65165	\$96	66605	\$86
63201	\$448	63443	\$404	65070	\$47	65166	\$96	66606	\$86
63204	\$448	63446	\$404	65072	\$29	65171	\$71	66607	\$210
63219	\$448	63454	\$1,200	65075	\$146	65175	\$71	66610	\$210
63222	\$448	63461	\$359	65078	\$250	65176	\$136	66623	\$116
63225	\$448	63464	\$690	65079	\$250	65177	\$200	66626	\$68
63228	\$448	63467	\$690	65081	\$270	65178	\$265	66629	\$56
63231	\$448	63470	\$404	65082	\$270	65179	\$330	66632	\$56
63234	\$448	63473	\$628	65084	\$475	65180	\$71	66635	\$56
63237	\$448	63476	\$404	65087	\$245	65181	\$65	66638	\$82

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
66639	\$82	66722	\$124	66812	\$97	69327	\$235	69480	\$225
66641	\$82	66723	\$124	66815	\$168	69328	\$235	69481	\$112
66642	\$82	66724	\$43	66816	\$168	69330	\$355	69482	\$415
66644	\$56	66725	\$160	66817	\$120	69331	\$355	69483	\$415
66647	\$126	66728	\$196	66819	\$85	69333	\$57	69484	\$48
66650	\$68	66731	\$235	66820	\$85	69336	\$95	69488	\$495
66651	\$68	66734	\$270	66821	\$61	69339	\$53	69489	\$495
66652	\$57	66743	\$56	66822	\$146	69345	\$146	69491	\$565
66653	\$124	66749	\$92	66825	\$85	69354	\$85	69492	\$565
66655	\$57	66750	\$108	66826	\$85	69357	\$170	69494	\$71
66656	\$56	66751	\$154	66827	\$61	69360	\$255	69495	\$93
66659	\$104	66752	\$69	66828	\$146	69363	\$71	69496	\$118
66660	\$104	66755	\$108	66830	\$172	69378	\$500	69497	\$71
66662	\$225	66756	\$285	66831	\$86	69379	\$500	69498	\$18
66663	\$225	66757	\$285	66832	\$86	69380	\$2,105	69499	\$255
66665	\$86	66758	\$69	66833	\$118	69381	\$500	69500	\$255
66666	\$86	66761	\$37	66834	\$118	69382	\$500	69501	\$248
66667	\$85	66764	\$25	66835	\$118	69383	\$500	71057	\$100
66671	\$104	66767	\$50	66836	\$118	69384	\$44	71058	\$142
66674	\$112	66770	\$75	66837	\$118	69387	\$79	71059	\$82
66677	\$31	66773	\$69	66838	\$69	69390	\$120	71060	\$124
66680	\$210	66776	\$69	66839	\$126	69393	\$158	71062	\$124
66683	\$210	66779	\$112	66840	\$69	69396	\$198	71064	\$58
66686	\$142	66780	\$112	66841	\$47	69400	\$44	71066	\$41
66695	\$89	66782	\$37	66900	\$215	69401	\$39	71068	\$41
66696	\$89	66783	\$37	69300	\$35	69405	\$44	71069	\$67
66697	\$39	66785	\$112	69303	\$61	69408	\$77	71071	\$91
66698	\$124	66788	\$184	69306	\$94	69411	\$108	71072	\$41
66701	\$162	66789	\$112	69309	\$134	69413	\$140	71073	\$295
66704	\$198	66790	\$72	69312	\$94	69445	\$255	71074	\$41
66707	\$235	66791	\$210	69316	\$79	69451	\$255	71075	\$76
66711	\$88	66792	\$210	69317	\$99	69471	\$97	71076	\$295
66712	\$126	66800	\$51	69318	\$89	69472	\$44	71077	\$76
66714	\$88	66803	\$86	69319	\$118	69474	\$79	71079	\$75
66715	\$38	66804	\$51	69321	\$134	69475	\$44	71081	\$114
66716	\$87	66805	\$35	69324	\$120	69478	\$81	71083	\$56
66719	\$114	66806	\$120	69325	\$120	69479	\$113	71085	\$81

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
71087	\$106	71157	\$168	72849	\$290	73309	\$97	73806	\$28
71089	\$82	71159	\$205	72850	\$330	73311	\$97	73807	\$19
71090	\$82	71163	\$70	72851	\$1,490	73312	\$97	73808	\$24
71091	\$148	71164	\$112	72852	\$1,985	73314	\$615	73809	\$7
71092	\$66	71165	\$97	72855	\$510	73315	\$615	73810	\$19
71093	\$215	71166	\$132	72856	\$680	73317	\$97	73811	\$31
71095	\$114	71167	\$168	72857	\$800	73318	\$97	73828	\$16
71096	\$114	71168	\$205	72860	\$240	73320	\$108	73829	\$10
71097	\$71	71169	\$97	73043	\$56	73321	\$108	73830	\$14
71099	\$74	71170	\$36	73045	\$128	73323	\$108	73831	\$18
71101	\$49	71180	\$97	73047	\$255	73324	\$108	73832	\$10
71103	\$146	71183	\$132	73049	\$184	73325	\$196	73833	\$23
71106	\$32	71186	\$168	73051	\$465	73326	\$610	73834	\$16
71119	\$49	71189	\$44	73059	\$120	73327	\$138	73835	\$19
71121	\$58	71192	\$80	73060	\$158	73332	\$845	73836	\$5
71123	\$68	71195	\$112	73061	\$142	73333	\$1,570	73837	\$16
71125	\$77	71198	\$114	73062	\$240	73334	\$890	73899	\$49
71127	\$495	71200	\$100	73063	\$265	73335	\$1,230	73900	\$7
71129	\$610	71203	\$114	73064	\$198	73336	\$520	73920	\$7
71131	\$725	72813	\$225	73065	\$235	73337	\$894	73922	\$23
71133	\$30	72814	\$196	73066	\$600	73338	\$816	73923	\$7
71134	\$295	72816	\$240	73067	\$350	73339	\$1,045	73924	\$41
71135	\$580	72817	\$270	73070	\$110	73340	\$520	73925	\$7
71137	\$85	72818	\$295	73287	\$1,005	73341	\$900	73926	\$23
71139	\$290	72823	\$270	73289	\$915	73343	\$520	73927	\$7
71141	\$550	72824	\$390	73290	\$1,005	73344	\$900	73928	\$49
71143	\$730	72825	\$500	73291	\$590	73351	\$894	73929	\$7
71145	\$1,190	72826	\$540	73292	\$1,500	73521	\$27	73930	\$49
71146	\$300	72827	\$580	73293	\$590	73523	\$116	73931	\$7
71147	\$114	72828	\$620	73294	\$590	73525	\$79	73932	\$30
71148	\$114	72830	\$755	73298	\$3,135	73527	\$28	73933	\$7
71149	\$305	72836	\$1,160	73299	\$1,045	73529	\$80	73934	\$49
71151	\$335	72838	\$1,305	73300	\$280	73801	\$19	73935	\$7
71153	\$96	72844	\$85	73301	\$3,135	73802	\$13	73936	\$29
71154	\$96	72846	\$166	73302	\$1,045	73803	\$18	73937	\$7
71155	\$132	72847	\$245	73305	\$565	73804	\$23	73938	\$29
71156	\$36	72848	\$210	73308	\$97	73805	\$13	73939	\$7

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
73940	\$30	75603	\$714	82306	\$51	90267	\$270	91816	\$116
75001	\$224	75606	\$714	82309	\$62	90268	\$579	91817	\$171
75004	\$113	75609	\$1,065	82312	\$87	90269	\$270	91818	\$185
75006	\$199	75612	\$1,319	82315	\$115	90271	\$187	91819	\$265
75009	\$178	75615	\$488	82318	\$142	90272	*derived	91820	\$148
75012	\$283	75618	\$606	82324	\$77	90273	\$267	91821	\$212
75015	\$389	75621	\$606	82327	\$46	90274	*derived	91822	\$184
75018	\$495	75800	\$216	82332	\$137	90275	\$150	91823	\$98
75021	\$607	75803	\$863	90001	\$111	90276	*derived	91824	\$350
75023	\$122	75806	\$1,012	90002	\$81	90277	\$214	91825	\$160
75024	\$1,570	75809	\$1,199	90020	\$35	90278	*derived	91826	\$88
75027	\$2,153	75812	\$1,332	90035	\$76	90279	\$187	91827	\$96
75030	\$1,917	75815	\$1,625	90043	\$147	90280	\$267	91828	\$192
75033	\$3,143	75818	\$1,917	90051	\$216	90281	\$150	91829	\$290
75034	\$1,600	75821	\$1,544	90092	\$16	90282	\$214	91830	\$435
75036	\$4,341	75824	\$1,784	90093	\$31	91790	\$42	91831	\$485
75037	\$5,467	75827	\$2,051	90095	\$69	91792	\$42	91832	\$184
75039	\$1,453	75830	\$2,264	90096	\$111	91794	\$28	91833	\$98
75042	\$543	75833	\$2,770	90183	\$28	91795	\$42	91834	\$350
75045	\$2,909	75836	\$3,169	90188	\$61	91797	\$42	91835	\$160
75048	\$746	75839	\$72	90202	\$117	91799	\$28	91836	\$88
75049	\$873	75842	\$107	90212	\$173	91800	\$84	91837	\$96
75050	\$1,685	75845	\$533	90250	\$145	91801	\$154	91838	\$192
75051	\$2,587	75848	\$639	90251	\$213	91802	\$235	91839	\$290
75150	\$224	75851	\$320	90252	\$184	91803	\$84	91840	\$435
75153	\$113	75854	\$320	90253	\$270	91804	\$154	91841	\$485
75156	\$199	82200	\$19	90254	\$116	91805	\$235	91842	\$185
75200	\$144	82205	\$42	90255	\$170	91806	\$60	91843	\$265
75203	\$216	82210	\$80	90256	\$147	91807	\$116	91844	\$148
75206	\$72	82215	\$118	90257	\$216	91808	\$171	91845	\$212
75400	\$431	82220	\$57	90260	\$926	91809	\$84	91890	\$41
75403	\$495	82221	\$108	90261	\$540	91810	\$154	91891	\$84
75406	\$564	82222	\$159	90262	\$926	91811	\$235	92115	\$170
75409	\$639	82223	\$57	90263	\$540	91812	\$84	92121	\$136
75412	\$357	82224	\$108	90264	\$145	91813	\$154	92127	\$170
75415	\$431	82225	\$159	90265	\$116	91814	\$235	92133	\$136
75600	\$607	82300	\$451	90266	\$579	91815	\$60	92435	\$795

* See Appendix A for derived fee descriptions

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
92436	\$530	93644	\$56						
92437	\$430	93645	\$63						
92455	\$120	93646	\$40						
92456	\$156	93647	\$55						
92457	\$235	93653	\$84						
92458	\$290	93654	\$91						
92459	\$385	93655	\$63						
92460	\$196	93656	\$77						
92475	\$795	END							
92476	\$530								
92477	\$430								
92495	\$120								
92496	\$156								
92497	\$235								
92498	\$290								
92499	\$385								
92500	\$196								
92610	\$280								
92611	\$99								
92612	\$196								
92613	\$270								
92614	\$345								
92617	\$280								
92618	\$99								
92619	\$196								
92620	\$270								
92621	\$345								
92701	\$356								
92712	\$356								
93624	\$71								
93625	\$86								
93626	\$55								
93627	\$78								
93634	\$99								
93635	\$114								
93636	\$78								
93637	\$100								

* See Appendix A for derived fee descriptions

Appendix A: derived fee descriptions

ITEM NO.	DESCRIPTION
4	<p>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.</p> <p>*Derived fee: The fee for item 3, plus \$27.40 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 \$2.15 per patient.</p>
24	<p>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.</p> <p>*Derived fee: The fee for item 23, plus \$27.40 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 \$2.15 per patient.</p>
37	<p>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.</p> <p>*Derived fee: The fee for item 36, plus \$27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 36 plus \$2.15 per patient.</p>
47	<p>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 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.</p> <p>*Derived fee: The fee for item 44, plus \$27.40 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 \$2.15 per patient.</p>

ITEM NO.	DESCRIPTION
58	<p>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).</p> <p>*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.</p>
59	<p>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).</p> <p>*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 equal to \$16.00 plus \$.70 per patient.</p>
60	<p>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).</p> <p>*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.</p>
65	<p>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).</p> <p>*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.</p>
99	<p>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.</p> <p>*Derived fee: 50% of the fee for item 104 or 105. Benefit: 85% of the derived fee.</p>

ITEM NO.	DESCRIPTION
112	<p>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.</p> <p>*Derived fee: 50% of the fee for the associated item. Benefit: 85% of derived fee.</p>
149	<p>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.</p> <p>*Derived fee: 50% of the fee for item 141 or 143. Benefit: 85% of the derived fee.</p>
181	<p>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 medical practitioner in an eligible area.</p> <p>*Derived fee: The fee for item 179, plus \$21.90 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 patient.</p>
187	<p>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 medical practitioner in an eligible area.</p> <p>*Derived fee: The fee for item 185, plus \$21.90 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.</p>
191	<p>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 medical practitioner in an eligible area.</p> <p>*Derived fee: The fee for item 189, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 189 plus \$1.70 per patient.</p>

ITEM NO.	DESCRIPTION
195	<p>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.</p> <p>*Derived fee: The fee for item 193, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 193 plus \$2.10 per patient.</p>
206	<p>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 medical practitioner in an eligible area.</p> <p>*Derived fee: The fee for item 203, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 203 plus \$1.70 per patient.</p>
260	<p>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.</p> <p>*Derived fee: The fee for item 259, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 259 plus \$1.70 per patient.</p>
262	<p>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 for a cycle of care of a patient with established diabetes mellitus.</p> <p>*Derived fee: The fee for item 261, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 261 plus \$1.70 per patient.</p>
264	<p>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.</p> <p>*Derived fee: The fee for item 263, plus \$21.60 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 \$1.70 per patient.</p>
266	<p>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.</p> <p>*Derived fee: The fee for item 265, plus \$21.60 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 \$1.70 per patient.</p>

ITEM NO.	DESCRIPTION
269	<p>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.</p> <p>*Derived fee: The fee for item 268, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 268 plus \$1.70 per patient.</p>
271	<p>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.</p> <p>*Derived fee: The fee for item 270, plus \$21.60 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 \$1.70 per patient.</p>
285	<p>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.</p> <p>*Derived fee: The fee for item 283, plus \$21.60 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 \$1.70 per patient.</p>
287	<p>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.</p> <p>*Derived fee: The fee for item 286, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 286 plus \$1.70 per patient.</p>
288	<p>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.</p> <p>*Derived fee: 50% of the fee for item 291, 293, 296, 300, 302, 304, 306, 308, 310, 312, 314, 316, 318, 319, 348, 350 or 352. Benefit: 85% of derived fee.</p>
389	<p>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</p>

ITEM NO.	DESCRIPTION
	<p>direction made under subsection 19(2) of the Act applies.</p> <p>*Derived fee: 50% of the fee for item 385 or 386. Benefit: 85% of the derived fee.</p>
414	<p>LEVEL A Professional 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.</p> <p>*Derived fee: The fee for item 410, plus \$26.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 410 plus \$2.10 per patient.</p>
415	<p>LEVEL B Professional 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.</p> <p>*Derived fee: The fee for item 411, plus \$26.90 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 \$2.10 per patient.</p>
416	<p>LEVEL C Professional 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.</p> <p>*Derived fee: The fee for item 412, plus \$26.90 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 \$2.10 per patient.</p>
417	<p>LEVEL D Professional 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.</p> <p>*Derived fee: The fee for item 413, plus \$26.90 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 \$2.10 per patient.</p>
761	<p>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 minutes an attendance on one or more patients on one occasion each patient.</p> <p>*Derived fee: The fee for item 733, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 733 plus \$1.70 per patient.</p>
763	<p>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 minutes an attendance on one or more patients on one</p>

ITEM NO.	DESCRIPTION
	<p>occasion each patient.</p> <p>*Derived fee: The fee for item 737, plus \$21.60 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 \$1.70 per patient.</p>
766	<p>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 minutes an attendance on one or more patients on one occasion each patient.</p> <p>*Derived fee: The fee for item 741, plus \$21.60 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 \$1.70 per patient.</p>
769	<p>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 minutes an attendance on one or more patients on one occasion each patient.</p> <p>*Derived fee: The fee for item 745, plus \$21.60 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 \$1.70 per patient.</p>
788	<p>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 practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient.</p> <p>*Derived fee: The fee for item 741, plus \$38.85 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.</p>
789	<p>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 practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient.</p> <p>*Derived fee: The fee for item 745, plus \$38.85 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.</p>
827	<p>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.</p> <p>*Derived fee: The fee for item 812, plus \$21.60 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 \$1.70 per patient.</p>

ITEM NO.	DESCRIPTION
868	<p>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.</p> <p>*Derived fee: The fee for item 867, plus \$21.60 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 \$1.70 per patient.</p>
876	<p>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 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.</p> <p>*Derived fee: The fee for item 873, plus \$21.60 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 \$1.70 per patient.</p>
891	<p>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 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.</p> <p>*Derived fee: The fee for item 885, plus \$21.60 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 \$1.70 per patient.</p>
2122	<p>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.</p> <p>*Derived fee: The fee for item 2100 plus \$27.00 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 \$2.10 per patient.</p>
2125	<p>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.</p>

ITEM NO.	DESCRIPTION
	<p>*Derived fee: The fee for item 2100 plus \$48.60 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 \$3.45 per patient.</p>
2137	<p>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.</p> <p>*Derived fee: The fee for item 2126 plus \$27.00 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 \$2.10 per patient.</p>
2138	<p>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 on one occasion-each patient.</p> <p>*Derived fee: The fee for item 2126 plus \$48.60 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 \$3.45 per patient.</p>
2147	<p>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 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.</p> <p>*Derived fee: The fee for item 2143 plus \$27.00 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 \$2.10 per patient.</p>
2179	<p>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 on one occasion-each patient.</p> <p>*Derived fee: The fee for item 2143 plus \$48.60 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 \$3.45 per patient.</p>
2199	<p>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 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.</p>

ITEM NO.	DESCRIPTION
	<p>occasion-each patient.</p> <p>*Derived fee: The fee for item 2195 plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus \$2.10 per patient.</p>
2220	<p>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 on one occasion-each patient.</p> <p>*Derived fee: The fee for item 2195 plus \$48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus \$3.45 per patient.</p>
2631	<p>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.</p> <p>*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 equal to \$16.00 plus \$0.70 per patient</p>
2633	<p>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 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.</p> <p>*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 \$0.70 per patient</p>
2635	<p>Professional attendance at a place other than consulting rooms of more than 45 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.</p> <p>*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.</p>
2723	<p>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.</p> <p>*Derived fee: The fee for item 2721, plus \$27.00 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 \$2.10 per patient.</p>
2727	<p>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 40 minutes.</p> <p>*Derived fee: The fee for item 2725, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2725 plus \$2.10 per patient.</p>

ITEM NO.	DESCRIPTION
2820	<p>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.</p> <p>*Derived fee: 50% of the fee for item 2801, 2806 or 2814. Benefit: 85% of the derived fee</p>
3015	<p>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 applies.</p> <p>*Derived fee: 50% of the fee for item 3005, 3010 or 3014. Benefit: 85% of the derived fee.</p>
5003	<p>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.</p> <p>*Derived fee: The fee for item 5000, plus \$27.00 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 \$2.10 per patient.</p>
5023	<p>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</p> <p>*Derived fee: The fee for item 5020, plus \$27.00 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 \$2.10 per patient.</p>
5043	<p>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.</p>

ITEM NO.	DESCRIPTION
	<p>*Derived fee: The fee for item 5040, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5040 plus \$2.10 per patient.</p>
5063	<p>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.</p> <p>*Derived fee: The fee for item 5060, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5060 plus \$2.10 per patient.</p>
5220	<p>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.</p> <p>*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</p>
5223	<p>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.</p> <p>*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.</p>
5227	<p>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.</p> <p>*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 per patient.</p>
5228	<p>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 45 minutes-an attendance on one or more patients on one occasion-each patient.</p> <p>*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.</p>
6016	<p>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</p>

ITEM NO.	DESCRIPTION
	<p>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 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.</p> <p>*Derived fee: 50% of the fee for item 6007, 6009, 6011, 6013 or 6015. Benefit: 85% of the derived fee.</p>
6026	<p>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.</p> <p>*Derived fee: 50% of the fee for item 6018, 6019, 6023, or 6024 Benefit: 85% of the derived fee.</p>
6060	<p>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.</p> <p>*Derived fee: 50% of the fee for item 6051, 6052, 6057 or 6058 Benefit: 85% of the derived fee.</p>
15003	<p>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.</p> <p>*Derived fee: The fee for item 15000 plus for each field in excess of 1, an amount of \$17.75</p>
17609	<p>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.</p> <p>*Derived fee: 50% of the fee for item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655. Benefit: 85% of the derived fee.</p>
18219	<p>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.).</p>

ITEM NO.	DESCRIPTION
	<p>*Derived fee: The fee for item 18216 plus \$19.80 for each additional 15 minutes or part thereof beyond the first hour of attendance by the medical practitioner.</p>
18277	<p>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.</p> <p>*Derived fee: The fee for item 18226 plus \$29.75 for each additional 15 minutes or part thereof beyond the first hour of attendance by the medical practitioner.</p>
25025	<p>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</p> <p>- not being a service associated with a service to which item 25020, 25030 or 25050 applies (0 basic units).</p> <p>*Derived fee: An additional amount of 50% of fee for the anaesthetic service. That is:</p> <p>(a) an anaesthesia item/s range 20100 - 21997 or 22900, plus</p> <p>(b) an item range 23010 - 24136, plus</p> <p>(c) if applicable, an item range 25000-25014, plus (d) where performed, any assoc. therapeutic or diagnostic service range 22002-22051</p>
25030	<p>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 afterhours 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).</p> <p>*Derived fee: 50% of the fee for assistance at anaesthesia. That is:</p> <p>(a) an assistant anaesthesia item in the range 25200 - 25205, plus</p> <p>(b) an item range 23010-24136, plus</p> <p>(c) where applicable, an item range 25000-25014, plus</p> <p>(d) where performed, any associated therapeutic or diagnostic service 22002 - 22051</p>
25050	<p>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 afterhours 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).</p> <p>*Derived fee: An additional amount of 50% of the fee for the perfusion service. That is:</p> <p>(a) item 22060, plus</p> <p>(b) an item range 23010 - 24136, plus</p> <p>(c) where applicable, an item range 25000 - 25014, plus</p> <p>(d) where performed, any associated therapeutic or diagnostic service in the range 22002-22051 or 22065-22075</p>

ITEM NO.	DESCRIPTION
25200	<p>ASSISTANCE IN THE ADMINISTRATION OF ANAESTHESIA on a patient in imminent danger of death requiring continuous lifesaving emergency treatment, to the exclusion of all other patients (5 basic units).</p> <p>*Derived fee: An amount of \$103.00 (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</p>
25205	<p>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).</p> <p>*Derived fee: An amount of \$103.00 (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.</p>
30001	<p>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.</p> <p>*Derived fee: 50% of the fee which would have applied had the procedure not been discontinued.</p>
31340	<p>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.).</p> <p>*Derived fee: 75% of the fee for excision of malignant tumour.</p>
44376	<p>AMPUTATION STUMP, reamputation of, to provide adequate skin and muscle cover (Assist.).</p> <p>*Derived fee: 75% of the original amputation fee.</p>
51303	<p>Assistance at any operation identified by the word "Assist." for which the fee exceeds \$575.75 or at a series of operations identified by the word "Assist." for which the aggregate fee exceeds \$575.75.</p> <p>*Derived fee: one fifth of the established fee for the operation or combination of operations.</p>
51309	<p>Assistance at a series or combination of operations that include (Assist.) and assistance at a birth involving Caesarean section.</p> <p>*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).</p>
51312	<p>Assistance at any interventional obstetric procedure covered by items 16606, 16609, 16612, 16615 & 16627.</p> <p>*Derived fee: one fifth of the established fee for the procedure or combination of procedures.</p>
51803	<p>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 \$575.75 or at a series or</p>

ITEM NO.	DESCRIPTION
	<p>combination of operations specified in items that include '(Assist)' if the aggregate fee exceeds \$575.75.</p> <p>*Derived fee: one fifth of the established fee for the operation or combination of operations.</p>
90272	<p>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.</p> <p>*Derived fee: The fee for item 90271, plus \$27.00 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 \$2.10 per patient.</p>
90274	<p>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.</p> <p>*Derived fee: The fee for item 90273, plus \$27.00 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 \$2.10 per patient.</p>
90276	<p>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.</p> <p>*Derived fee: The fee for item 90275, plus \$21.60 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 \$1.70 per patient.</p>
90278	<p>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.</p> <p>*Derived fee: The fee for item 90277, plus \$21.60 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 \$1.70 per patient.</p>

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