

# WorkCover

---

## QUEENSLAND

### Medical Items Table of Costs

Effective 1 December 2020

# 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 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 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 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](http://www.choosingwisely.org.au/recommendations))

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

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

## Further information

You can access more information by visiting [www.worksafe.qld.gov.au/service-providers](http://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	\$220	286	\$212	361	\$490
4	*Derived	141	\$795	226	\$304	287	*Derived	364	\$96
23	\$84	143	\$530	227	\$430	288	*Derived	366	\$192
24	*Derived	145	\$960	228	\$339	289	\$605	367	\$290
36	\$154	147	\$645	229	\$231	291	\$795	369	\$435
37	*Derived	149	*Derived	230	\$183	293	\$530	370	\$485
44	\$235	160	\$360	231	\$113	296	\$430	371	\$148
47	*Derived	161	\$580	232	\$113	297	\$430	372	\$212
52	\$42	162	\$790	233	\$115	299	\$510	384	\$130
53	\$84	163	\$985	235	\$113	300	\$96	385	\$350
54	\$154	164	\$1165	236	\$193	302	\$192	386	\$160
57	\$235	170	\$310	237	\$322	304	\$290	387	\$415
58	*Derived	171	\$320	238	\$83	306	\$435	388	\$220
59	*Derived	172	\$400	239	\$142	308	\$485	389	*Derived
60	*Derived	173	\$42	240	\$237	319	\$435	410	\$42
65	*Derived	177	\$116	243	\$130	320	\$97	411	\$84
99	*Derived	179	\$28	244	\$61	322	\$192	412	\$154
104	\$184	181	*Derived	259	\$59	324	\$290	413	\$235
105	\$98	185	\$60	260	*Derived	326	\$435	414	*Derived
06	\$184	187	*Derived	261	\$115	328	\$490	415	*Derived
107	\$245	189	\$116	262	*Derived	330	\$158	416	*Derived
108	\$162	191	*Derived	263	\$169	332	\$255	417	*Derived
109	\$285	193	\$84	264	*Derived	334	\$350	585	\$259
110	\$350	195	*Derived	265	\$59	336	\$505	588	\$259
111	\$98	197	\$154	266	*Derived	338	\$540	591	\$197
112	*Derived	199	\$235	268	\$115	342	\$120	594	\$84
113	\$130	203	\$171	269	*Derived	344	\$156	599	\$500
114	\$230	206	*Derived	270	\$169	346	\$235	600	\$500
115	\$98	214	\$354	271	*Derived	348	\$290	699	\$145
116	\$160	215	\$590	272	\$115	350	\$385	721	\$280
117	\$153	218	\$826	276	\$169	352	\$196	723	\$240
119	\$87	219	\$1062	277	\$115	353	\$114	729	\$112
120	\$87	220	\$1180	279	\$115	355	\$225	731	\$112
122	\$415	221	\$188	281	\$145	356	\$335	732	\$140
128	\$220	222	\$198	282	\$214	357	\$510	733	\$46
131	\$162	223	\$241	283	\$148	358	\$560	735	\$275
132	\$605	224	\$95	285	*Derived	359	\$610	737	\$78

ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
739	\$385	873	\$155	2633	*Derived	3014	\$87	5042	\$320
741	\$134	876	*Derived	2635	*Derived	3015	*Derived	5043	*Derived
743	\$500	880	\$95	2700	\$143	3018	\$415	5044	\$605
745	\$188	885	\$228	2701	\$211	3023	\$220	5060	\$355
747	\$166	891	*Derived	2712	\$230	3028	\$162	5063	*Derived
750	\$220	894	\$71	2713	\$192	3032	\$295	5200	\$63
758	\$275	896	\$137	2715	\$182	3040	\$440	5203	\$126
761	*Derived	898	\$201	2717	\$345	3044	\$585	5207	\$230
763	*Derived	900	\$400	2721	\$185	3051	\$180	5208	\$355
766	*Derived	2100	\$46	2723	*Derived	3055	\$290	5220	*Derived
769	*Derived	2121	\$88	2725	\$265	3062	\$395	5223	*Derived
788	*Derived	2122	*Derived	2727	*Derived	3069	\$295	5227	*Derived
789	*Derived	2125	*Derived	2729	\$185	3074	\$440	5228	*Derived
812	\$37	2126	\$100	2731	\$265	3078	\$585	6004	\$197
820	\$295	2137	*Derived	2799	\$230	3083	\$180	6007	\$280
822	\$440	2138	*Derived	2801	\$350	3088	\$290	6009	\$99
823	\$585	2143	\$194	2806	\$160	3093	\$395	6011	\$196
825	\$180	2147	*Derived	2814	\$87	5000	\$63	6013	\$270
826	\$290	2150	\$171	2820	*Derived	5001	\$132	6015	\$345
827	*Derived	2179	*Derived	2824	\$415	5003	*Derived	6016	*Derived
828	\$395	2195	\$285	2832	\$220	5004	\$225	6018	\$306
830	\$295	2196	\$252	2840	\$162	5011	\$225	6019	\$153
832	\$440	2199	*Derived	2946	\$295	5012	\$350	6023	\$535
834	\$585	2220	*Derived	2949	\$440	5014	\$440	6024	\$268
835	\$180	2461	\$34	2954	\$585	5016	\$590	6025	\$230
837	\$290	2463	\$75	2958	\$180	5019	\$680	6026	*Derived
838	\$395	2464	\$145	2972	\$290	5020	\$126	6028	\$100
855	\$270	2465	\$214	2974	\$395	5021	\$132	6029	\$87
857	\$410	2471	\$22	2978	\$295	5023	*Derived	6031	\$153
858	\$545	2472	\$41	2984	\$440	5027	\$225	6032	\$230
861	\$270	2475	\$75	2988	\$585	5030	\$350	6034	\$306
864	\$410	2478	\$120	2992	\$180	5032	\$440	6035	\$69
866	\$545	2480	\$28	2996	\$290	5033	\$590	6037	\$123
867	\$80	2481	\$60	3000	\$395	5036	\$680	6038	\$184
868	*Derived	2482	\$116	3003	\$230	5039	\$320	6042	\$245
871	\$163	2483	\$171	3005	\$350	5040	\$230	6051	\$306
872	\$76	2631	*Derived	3010	\$160	5041	\$605	6052	\$153

\* 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
6057	\$535	10924	\$418	11235	\$375	11627	\$570	11919	\$1085
6058	\$268	10925	\$331	11237	\$215	11704	\$116	11921	\$225
6059	\$230	10926	\$331	11240	\$215	11705	\$58	12000	\$108
6060	*Derived	10927	\$418	11241	\$320	11707	\$58	12001	\$108
6062	\$371	10928	\$331	11242	\$215	11713	\$230	12002	\$108
6063	\$224	10929	\$418	11243	\$215	11714	\$90	12003	\$160
6064	\$87	10930	\$331	11244	\$215	11715	\$265	12004	\$166
6065	\$153	10940	\$127	11300	\$460	11716	\$435	12005	\$181
6067	\$230	10941	\$77	11303	\$460	11717	\$230	12012	\$48
6068	\$306	10942	\$67	11304	\$750	11718	\$116	12017	\$205
6071	\$69	10944	\$144	11306	\$51	11719	\$220	12021	\$330
6072	\$123	10945	\$67	11309	\$60	11720	\$220	12022	\$399
6074	\$184	10946	\$133	11312	\$88	11721	\$230	12024	\$460
6075	\$245	10947	\$67	11315	\$116	11723	\$120	12200	\$81
10801	\$295	10948	\$133	11318	\$144	11724	\$485	12201	\$3365
10802	\$295	11000	\$385	11324	\$88	11725	\$630	12203	\$1340
10803	\$295	11003	\$770	11327	\$55	11726	\$315	12204	\$1340
10804	\$295	11004	\$1700	11330	\$44	11727	\$315	12205	\$1344
10805	\$295	11005	\$1700	11332	\$280	11728	\$79	12207	\$1340
10806	\$295	11009	\$530	11333	\$100	11729	\$400	12208	\$1340
10807	\$295	11012	\$295	11336	\$100	11730	\$400	12213	\$1450
10808	\$295	11015	\$405	11339	\$100	11731	\$79	12215	\$1605
10809	\$295	11018	\$585	11503	\$385	11735	\$292	12217	\$1450
10816	\$295	11021	\$405	11505	\$97	11800	\$515	12250	\$765
10905	\$133	11024	\$265	11506	\$49	11801	\$875	12254	\$2110
10907	\$67	11027	\$390	11507	\$255	11810	\$430	12258	\$2089
10910	\$133	11200	\$94	11508	\$740	11820	\$2811	12261	\$2215
10911	\$133	11204	\$215	11512	\$144	11823	\$3040	12265	\$2190
10912	\$133	11205	\$215	11600	\$144	11830	\$540	12268	\$2375
10913	\$133	11210	\$215	11602	\$106	11833	\$610	12272	\$2349
10914	\$133	11211	\$215	11604	\$106	11900	\$71	12306	\$270
10915	\$133	11215	\$375	11605	\$106	11903	\$285	12312	\$270
10916	\$67	11218	\$475	11610	\$106	11906	\$285	12315	\$270
10918	\$67	11219	\$138	11611	\$106	11909	\$425	12320	\$270
10921	\$331	11220	\$138	11612	\$198	11912	\$425	12321	\$270
10922	\$331	11221	\$270	11614	\$106	11915	\$425	12322	\$270
10923	\$331	11224	\$148	11615	\$158	11917	\$1085	12325	\$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
12326	\$81	13755	\$325	14209	\$220	15109	*Derived	15324	\$1900
12500	\$510	13757	\$174	14212	\$505	15112	\$390	15327	\$1950
12524	\$410	13760	\$1815	14218	\$250	15115	*Derived	15328	\$2060
12527	\$270	13815	\$275	14221	\$134	15211	\$128	15331	\$1850
12533	\$240	13818	\$570	14224	\$160	15214	*Derived	15332	\$1965
13015	\$724	13830	\$178	14227	\$250	15215	\$168	15335	\$1675
13020	\$736	13832	\$2300	14234	\$1029	15218	\$168	15336	\$1790
13025	\$329	13834	\$1280	14237	\$1876	15221	\$168	15338	\$2065
13030	\$465	13835	\$295	14245	\$295	15224	\$168	15339	\$190
13100	\$425	13837	\$1280	14247	\$5261	15227	\$168	15342	\$475
13103	\$225	13838	\$295	14249	\$5261	15230	*Derived	15345	\$1260
13104	\$425	13839	\$77	14255	\$360	15233	*Derived	15348	\$144
13106	\$280	13840	\$1540	14256	\$645	15236	*Derived	15351	\$380
13109	\$680	13842	\$220	14257	\$1240	15239	*Derived	15354	\$445
13110	\$680	13848	\$440	14258	\$360	15242	*Derived	15357	\$126
13200	\$5630	13851	\$1280	14259	\$645	15245	\$220	15500	\$535
13201	\$5265	13854	\$295	14260	\$1240	15248	\$220	15503	\$730
13202	\$840	13857	\$360	14263	\$158	15251	\$220	15506	\$1150
13203	\$1405	13870	\$930	14264	\$315	15254	\$220	15509	\$460
13206	\$2410	13873	\$690	14265	\$158	15257	\$220	15512	\$390
13209	\$240	13876	\$198	14266	\$315	15260	*Derived	15513	\$725
13210	*Derived	13881	\$375	14270	\$415	15263	*Derived	15515	\$685
13290	\$575	13882	\$295	14272	\$415	15266	*Derived	15518	\$480
13292	\$1150	13885	\$425	14277	\$670	15269	*Derived	15521	\$955
13300	\$148	13888	\$225	14278	\$670	15272	*Derived	15524	\$1890
13303	\$225	13899	\$605	14280	\$670	15275	\$310	15527	\$465
13306	\$1080	13950	\$307	14283	\$670	15303	\$885	15530	\$755
13309	\$835	14050	\$142	14285	\$670	15304	\$885	15533	\$1490
13312	\$94	14100	\$695	14288	\$670	15307	\$1675	15536	\$955
13318	\$615	14106	\$695	15000	\$112	15308	\$1790	15539	\$1885
13319	\$555	14115	\$1170	15003	*Derived	15311	\$825	15550	\$1115
13400	\$240	14118	\$1485	15006	\$305	15312	\$825	15553	\$1200
13506	\$435	14124	\$695	15009	*Derived	15315	\$1615	15555	\$1265
13700	\$785	14201	\$673	15012	\$164	15316	\$1725	15556	\$1210
13703	\$285	14202	\$341	15100	\$152	15319	\$1005	15559	\$1465
13706	\$196	14203	\$126	15103	*Derived	15320	\$1005	15562	\$2040
13750	\$325	14206	\$80	15106	\$178	15323	\$1795	15565	\$10845

\* 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
15600	\$4635	17615	\$356	18270	\$623	20142	\$516	20405	\$712
15700	\$154	17620	\$534	18272	\$445	20143	\$534	20406	\$1157
15705	\$255	17625	\$712	18274	\$623	20144	\$688	20410	\$430
15710	\$255	17640	\$178	18276	\$890	20145	\$688	20420	\$445
15715	\$260	17645	\$356	18278	\$623	20146	\$445	20440	\$356
15800	\$325	17650	\$534	18280	\$890	20147	\$534	20450	\$445
15850	\$560	17655	\$712	18282	\$712	20148	\$356	20452	\$534
15900	\$695	17680	\$356	18284	\$712	20160	\$534	20470	\$534
16003	\$1640	17690	\$178	18286	\$712	20162	\$623	20472	\$890
16006	\$1260	18213	\$356	18288	\$890	20164	\$356	20474	\$1157
16009	\$855	18216	\$712	18290	\$1780	20170	\$534	20475	\$890
16012	\$745	18219	*Derived	18292	\$890	20172	\$623	20500	\$1335
16015	\$7490	18222	\$267	18294	\$1780	20174	\$801	20520	\$534
16018	\$4495	18225	\$356	18296	\$1335	20176	\$890	20522	\$356
16399	*Derived	18226	\$1335	18297	\$267	20190	\$445	20524	\$356
16401	\$243	18227	*Derived	18298	\$1780	20192	\$890	20526	\$890
16404	\$119	18228	\$445	18350	\$325	20210	\$1335	20528	\$712
16408	\$178	18230	\$1780	18351	\$355	20212	\$445	20540	\$1157
16500	\$114	18232	\$712	18353	\$645	20214	\$801	20542	\$1335
16501	\$460	18233	\$712	18354	\$325	20216	\$1780	20546	\$1335
16502	\$114	18234	\$890	18360	\$325	20220	\$890	20548	\$1335
16505	\$114	18236	\$445	18362	\$640	20222	\$534	20560	\$1780
16508	\$114	18238	\$267	18365	\$325	20225	\$1068	20600	\$890
16509	\$114	18240	\$445	18366	\$420	20230	\$1068	20604	\$1157
16511	\$755	18242	\$267	18368	\$700	20300	\$445	20620	\$890
16512	\$215	18244	\$712	18370	\$116	20305	\$1335	20622	\$1157
16514	\$116	18248	\$623	18372	\$325	20320	\$534	20630	\$712
16515	\$3255	18250	\$445	18374	\$355	20321	\$890	20632	\$623
16518	\$1630	18252	\$712	18375	\$600	20330	\$712	20634	\$890
16519	\$3260	18254	\$712	18377	\$355	20350	\$890	20670	\$1157
16520	\$3260	18256	\$445	18379	\$600	20352	\$445	20680	\$267
16522	\$4600	18258	\$445	20100	\$445	20355	\$1068	20690	\$445
16527	\$3255	18260	\$623	20102	\$534	20400	\$267	20700	\$267
16528	\$3260	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

\* 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
20730	\$445	20863	\$890	20956	\$356	21380	\$267	21634	\$801
20740	\$445	20864	\$890	20958	\$445	21382	\$356	21636	\$1335
20745	\$623	20866	\$890	20960	\$623	21390	\$267	21638	\$890
20750	\$445	20867	\$890	21100	\$267	21392	\$356	21650	\$712
20752	\$534	20868	\$890	21110	\$445	21400	\$356	21652	\$890
20754	\$623	20880	\$1335	21112	\$356	21402	\$623	21654	\$712
20756	\$801	20882	\$890	21114	\$445	21403	\$890	21656	\$890
20770	\$1335	20884	\$445	21116	\$534	21404	\$445	21670	\$356
20790	\$712	20886	\$534	21120	\$534	21420	\$267	21680	\$267
20791	\$890	20900	\$267	21130	\$267	21430	\$356	21682	\$356
20792	\$1157	20902	\$356	21140	\$1335	21432	\$445	21685	\$890
20793	\$1335	20904	\$623	21150	\$890	21440	\$712	21700	\$267
20794	\$1068	20905	\$890	21155	\$890	21445	\$890	21710	\$356
20798	\$890	20906	\$356	21160	\$356	21460	\$267	21712	\$445
20799	\$534	20910	\$356	21170	\$712	21461	\$356	21714	\$445
20800	\$267	20911	\$445	21195	\$267	21462	\$267	21716	\$445
20802	\$445	20912	\$445	21199	\$356	21464	\$356	21730	\$267
20803	\$356	20914	\$623	21200	\$356	21472	\$445	21732	\$356
20804	\$890	20916	\$623	21202	\$356	21474	\$445	21740	\$445
20806	\$623	20920	\$356	21210	\$534	21480	\$356	21756	\$534
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	\$1246	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	\$1335
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	\$1335	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	\$1335	21610	\$445	21840	\$712
20850	\$1068	20948	\$356	21300	\$267	21620	\$356	21842	\$534
20855	\$1335	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

\* 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
21870	\$1335	21965	\$445	23111	\$979	23440	\$4272	23810	\$7565
21872	\$712	21969	\$712	23112	\$1068	23450	\$4361	23820	\$7654
21878	\$267	21970	\$1335	23113	\$1157	23460	\$4450	23830	\$7743
21879	\$445	21973	\$445	23114	\$1246	23470	\$4539	23840	\$7832
21880	\$623	21976	\$445	23115	\$1335	23480	\$4628	23850	\$7921
21881	\$801	21980	\$445	23116	\$1424	23490	\$4717	23860	\$8010
21882	\$979	21990	\$267	23117	\$1513	23500	\$4806	23870	\$8099
21883	\$1157	21997	\$356	23118	\$1602	23510	\$4895	23880	\$8188
21884	\$1335	22002	\$356	23119	\$1691	23520	\$4984	23890	\$8277
21885	\$1513	22007	\$356	23121	\$1780	23530	\$5073	23900	\$8366
21886	\$1691	22008	\$356	23170	\$1869	23540	\$5162	23910	\$8455
21887	\$1869	22012	\$267	23180	\$1958	23550	\$5251	23920	\$8544
21900	\$267	22014	\$267	23190	\$2047	23560	\$5340	23930	\$8633
21906	\$445	22015	\$534	23200	\$2136	23570	\$5429	23940	\$8722
21908	\$534	22020	\$356	23210	\$2225	23580	\$5518	23950	\$8811
21910	\$801	22025	\$356	23220	\$2314	23590	\$5607	23960	\$8900
21912	\$445	22031	\$445	23230	\$2403	23600	\$5696	23970	\$8989
21914	\$534	22036	\$267	23240	\$2492	23610	\$5785	23980	\$9078
21915	\$445	22041	\$178	23250	\$2581	23620	\$5874	23990	\$9167
21916	\$445	22042	\$89	23260	\$2670	23630	\$5963	24100	\$9256
21918	\$445	22051	\$801	23270	\$2759	23640	\$6052	24101	\$9345
21922	\$602	22055	\$1068	23280	\$2848	23650	\$6141	24102	\$9434
21925	\$356	22060	\$1780	23290	\$2937	23660	\$6230	24103	\$9523
21926	\$430	22065	\$445	23300	\$3026	23670	\$6319	24104	\$9612
21930	\$534	22075	\$1335	23310	\$3115	23680	\$6408	24105	\$9701
21935	\$445	22900	\$534	23320	\$3204	23690	\$6497	24106	\$9790
21936	\$516	22905	\$534	23330	\$3293	23700	\$6586	24107	\$9879
21939	\$267	23010	\$89	23340	\$3382	23710	\$6675	24108	\$9968
21941	\$623	23025	\$178	23350	\$3471	23720	\$6764	24109	\$10057
21942	\$890	23035	\$267	23360	\$3560	23730	\$6853	24110	\$10146
21943	\$445	23045	\$356	23370	\$3649	23740	\$6942	24111	\$10235
21945	\$445	23055	\$445	23380	\$3738	23750	\$7031	24112	\$10324
21949	\$445	23065	\$534	23390	\$3827	23760	\$7120	24113	\$10413
21952	\$860	23075	\$623	23400	\$3916	23770	\$7209	24114	\$10502
21955	\$445	23085	\$712	23410	\$4005	23780	\$7298	24115	\$10591
21959	\$445	23091	\$801	23420	\$4094	23790	\$7387	24116	\$10680
21962	\$445	23101	\$890	23430	\$4183	23800	\$7476	24117	\$10769

\* 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
24118	\$10858	30024	\$920	30187	\$640	30286	\$1145	30393	\$2085
24119	\$10947	30026	\$158	30189	\$370	30289	\$1445	30394	\$1420
24120	\$11036	30029	\$235	30190	\$990	30293	\$1275	30396	\$2885
24121	\$11125	30032	\$210	30191	\$175	30294	\$4995	30397	\$660
24122	\$11214	30035	\$315	30192	\$98	30296	\$2905	30399	\$905
24123	\$11303	30038	\$235	30196	\$315	30297	\$2905	30400	\$1795
24124	\$11392	30042	\$525	30202	\$118	30299	\$1820	30402	\$1320
24125	\$11481	30045	\$315	30207	\$108	30300	\$2180	30403	\$1575
24126	\$11570	30049	\$540	30210	\$425	30302	\$1455	30405	\$2600
24127	\$11659	30052	\$730	30216	\$66	30303	\$1745	30406	\$158
24128	\$11748	30055	\$215	30219	\$66	30306	\$2325	30408	\$1115
24129	\$11837	30058	\$410	30223	\$425	30310	\$2270	30409	\$560
24130	\$11926	30061	\$63	30224	\$685	30314	\$1640	30411	\$250
24131	\$12015	30062	\$170	30225	\$770	30315	\$3550	30412	\$148
24132	\$12104	30064	\$285	30226	\$435	30317	\$3875	30414	\$1960
24133	\$12193	30068	\$790	30229	\$775	30318	\$3550	30415	\$3915
24134	\$12282	30071	\$196	30232	\$640	30320	\$3875	30416	\$2130
24135	\$12371	30072	\$196	30235	\$855	30323	\$3875	30417	\$3195
24136	\$12460	30075	\$500	30238	\$435	30324	\$3875	30418	\$4535
25000	\$89	30078	\$128	30241	\$920	30329	\$700	30419	\$2315
25005	\$178	30081	\$285	30244	\$920	30330	\$2040	30421	\$5670
25010	\$267	30084	\$158	30246	\$2025	30332	\$760	30422	\$1915
25014	\$89	30087	\$79	30247	\$2170	30335	\$2025	30425	\$3710
25020	\$178	30090	\$340	30250	\$3550	30336	\$2425	30427	\$4430
25025	*Derived	30093	\$350	30251	\$5215	30373	\$1380	30428	\$4740
25030	*Derived	30094	\$545	30253	\$2365	30375	\$1570	30430	\$6595
25050	*Derived	30096	\$530	30255	\$3145	30376	\$1570	30431	\$1575
25200	*Derived	30097	\$265	30256	\$995	30378	\$1570	30433	\$2060
25205	*Derived	30099	\$235	30259	\$565	30379	\$2640	30434	\$1670
30001	*Derived	30103	\$530	30262	\$170	30382	\$3710	30436	\$1855
30003	\$76	30104	\$315	30266	\$425	30384	\$3155	30437	\$2310
30006	\$132	30107	\$565	30269	\$435	30385	\$1610	30438	\$3270
30010	\$215	30111	\$920	30272	\$855	30387	\$1835	30439	\$530
30014	\$455	30114	\$1065	30275	\$4995	30388	\$4535	30440	\$1505
30017	\$920	30176	\$2635	30278	\$132	30390	\$625	30441	\$385
30020	\$1825	30180	\$355	30281	\$335	30391	\$805	30442	\$530
30023	\$920	30183	\$710	30283	\$565	30392	\$1660	30443	\$2100

\* 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
30445	\$2320	30500	\$2535	30560	\$2680	30628	\$92	31245	\$1090
30446	\$2310	30502	\$2820	30562	\$1690	30629	\$1482	31250	\$1090
30448	\$2765	30503	\$3135	30563	\$1690	30630	\$674	31340	*Derived
30449	\$3070	30505	\$1565	30564	\$2225	30631	\$610	31345	\$600
30450	\$1490	30506	\$2740	30565	\$2475	30635	\$855	31346	\$600
30451	\$770	30508	\$2885	30566	\$2740	30640	\$2600	31350	\$1235
30452	\$1070	30509	\$2885	30568	\$2060	30641	\$1065	31355	\$2035
30454	\$2630	30515	\$2000	30569	\$1050	30642	\$1575	31356	\$655
30455	\$2915	30517	\$2535	30571	\$1260	30644	\$1575	31357	\$325
30457	\$3915	30518	\$2825	30572	\$1360	30663	\$410	31358	\$800
30458	\$2915	30520	\$1915	30574	\$355	30666	\$132	31359	\$975
30460	\$2455	30521	\$3550	30575	\$1470	30672	\$1115	31360	\$495
30461	\$4270	30523	\$3550	30577	\$3090	30676	\$1090	31361	\$550
30463	\$5155	30524	\$4270	30578	\$3255	30679	\$255	31362	\$400
30464	\$6185	30526	\$6125	30580	\$2970	30680	\$3395	31363	\$725
30466	\$3565	30527	\$2555	30581	\$2165	30682	\$3395	31364	\$495
30467	\$4410	30529	\$3710	30583	\$3385	30684	\$4180	31365	\$470
30469	\$4885	30530	\$2225	30584	\$5010	30686	\$4180	31366	\$280
30472	\$2640	30532	\$2585	30586	\$2000	30687	\$1365	31367	\$630
30473	\$630	30533	\$3065	30587	\$2060	30688	\$1060	31368	\$370
30475	\$1020	30535	\$4830	30589	\$3550	30690	\$1635	31369	\$730
30478	\$925	30536	\$4885	30590	\$3915	30692	\$1060	31370	\$425
30479	\$1365	30538	\$3385	30593	\$5360	30694	\$1635	31371	\$1055
30481	\$1010	30539	\$2480	30594	\$6185	30696	\$1635	31372	\$910
30482	\$715	30541	\$4310	30596	\$2555	30710	\$1635	31373	\$1055
30483	\$505	30542	\$2925	30597	\$2040	31000	\$1535	31374	\$830
30484	\$1030	30544	\$2145	30599	\$3710	31001	\$1920	31375	\$895
30485	\$1610	30545	\$5215	30600	\$2235	31002	\$2305	31376	\$1040
30488	\$255	30547	\$3585	30601	\$2720	31003	\$1652	31400	\$785
30490	\$1485	30548	\$2680	30602	\$4410	31004	\$2064	31403	\$910
30491	\$1565	30550	\$5855	30603	\$4660	31005	\$2477	31406	\$1515
30492	\$2300	30551	\$4040	30605	\$5300	31206	\$285	31409	\$4585
30494	\$1195	30553	\$2990	30606	\$3155	31211	\$360	31412	\$5215
30495	\$2300	30554	\$6515	30609	\$1320	31216	\$425	31420	\$540
30496	\$1710	30556	\$4495	30614	\$1205	31220	\$545	31423	\$1180
30497	\$2000	30557	\$3320	30615	\$1575	31221	\$545	31426	\$2360
30499	\$2430	30559	\$2410	30621	\$1065	31225	\$970	31429	\$3680

\* 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
31432	\$3935	31575	\$2415	32072	\$154	32168	\$370	32520	\$1575
31435	\$2895	31578	\$2415	32075	\$275	32171	\$240	32522	\$2345
31438	\$4230	31581	\$2972	32084	\$335	32174	\$240	32523	\$1575
31450	\$1200	31584	\$4376	32094	\$1535	32175	\$455	32526	\$2345
31452	\$2210	31587	\$278	32095	\$355	32177	\$470	32700	\$4265
31454	\$1645	31590	\$740	32096	\$690	32180	\$685	32703	\$3645
31456	\$715	32000	\$2790	32099	\$930	32183	\$1535	32708	\$4310
31458	\$860	32003	\$2915	32102	\$1760	32186	\$1535	32710	\$4790
31460	\$1040	32004	\$3195	32103	\$2110	32200	\$820	32711	\$5265
31462	\$1520	32005	\$3620	32104	\$2705	32203	\$1765	32712	\$3740
31464	\$2540	32006	\$3195	32105	\$1310	32206	\$1595	32715	\$3740
31466	\$3810	32009	\$3685	32106	\$3685	32209	\$2560	32718	\$3530
31468	\$4190	32012	\$4070	32108	\$2705	32210	\$710	32721	\$5595
31470	\$2100	32015	\$4800	32111	\$1710	32212	\$380	32724	\$6365
31472	\$3410	32018	\$4250	32112	\$2110	32213	\$1880	32730	\$4825
31500	\$605	32021	\$1515	32114	\$470	32214	\$950	32733	\$5595
31503	\$810	32023	\$1565	32115	\$355	32215	\$355	32736	\$1235
31506	\$910	32024	\$3685	32117	\$2705	32216	\$1690	32739	\$3835
31509	\$760	32025	\$4990	32120	\$690	32217	\$445	32742	\$4410
31512	\$1420	32026	\$5375	32123	\$905	32218	\$445	32745	\$5025
31515	\$955	32028	\$5755	32126	\$1475	32220	\$2515	32748	\$5435
31516	\$1905	32029	\$1150	32129	\$1710	32221	\$2515	32751	\$3530
31519	\$1505	32030	\$2870	32131	\$1460	32222	\$1000	32754	\$4410
31524	\$2125	32033	\$4205	32132	\$122	32223	\$1000	32757	\$1235
31525	\$1478	32036	\$5170	32135	\$182	32224	\$1000	32760	\$1235
31530	\$1325	32039	\$4070	32138	\$1095	32225	\$1000	32763	\$3530
31533	\$320	32042	\$3500	32139	\$1095	32226	\$1000	32766	\$4000
31536	\$545	32045	\$1310	32142	\$188	32227	\$1405	32769	\$810
31548	\$390	32046	\$2085	32145	\$375	32228	\$1000	33050	\$4345
31551	\$475	32047	\$2425	32147	\$122	32229	\$705	33055	\$3485
31554	\$1010	32051	\$6250	32150	\$775	32500	\$320	33070	\$2515
31557	\$760	32054	\$5735	32153	\$180	32504	\$790	33075	\$3195
31560	\$810	32057	\$1515	32156	\$460	32507	\$1575	33080	\$3900
31563	\$2860	32060	\$6250	32159	\$1120	32508	\$1575	33100	\$4265
31566	\$360	32063	\$5735	32162	\$1310	32511	\$2345	33103	\$5980
31569	\$2415	32066	\$1515	32165	\$1710	32514	\$2740	33109	\$7245
31572	\$2972	32069	\$4630	32166	\$575	32517	\$3525	33112	\$6265

\* 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
33115	\$4240	33539	\$2860	34139	\$2650	34827	\$1790	35500	\$220
33116	\$4240	33542	\$4095	34142	\$3030	34830	\$2105	35502	\$220
33118	\$4715	33545	\$825	34145	\$2375	34833	\$2720	35503	\$146
33119	\$4715	33548	\$1655	34148	\$4265	35000	\$2105	35506	\$146
33121	\$5185	33551	\$820	34151	\$5805	35003	\$2720	35507	\$515
33124	\$3585	33554	\$780	34154	\$6965	35006	\$3190	35508	\$775
33127	\$4720	33800	\$3490	34157	\$3535	35009	\$2650	35509	\$240
33130	\$4105	33803	\$3325	34160	\$6615	35012	\$2060	35513	\$620
33133	\$3070	33806	\$2410	34163	\$8465	35100	\$1010	35517	\$405
33136	\$7770	33810	\$1695	34166	\$8465	35103	\$645	35518	\$760
33139	\$4720	33811	\$5065	34169	\$4725	35200	\$540	35520	\$160
33142	\$4410	33812	\$2765	34172	\$3850	35202	\$2570	35523	\$160
33145	\$7540	33815	\$2380	34175	\$3535	35300	\$1515	35527	\$405
33148	\$9390	33818	\$2775	34500	\$925	35303	\$1940	35530	\$730
33151	\$8925	33821	\$3175	34503	\$1220	35306	\$1955	35533	\$955
33154	\$6615	33824	\$3030	34506	\$615	35307	\$3460	35536	\$1030
33157	\$7385	33827	\$3325	34509	\$2890	35309	\$2235	35539	\$810
33160	\$7770	33830	\$4070	34512	\$3195	35312	\$2545	35542	\$955
33163	\$6230	33833	\$3950	34515	\$2270	35315	\$2545	35545	\$480
33166	\$6230	33836	\$4720	34518	\$3815	35317	\$1055	35548	\$2480
33169	\$4865	33839	\$5490	34521	\$2255	35319	\$1895	35551	\$1900
33172	\$3785	33842	\$2720	34524	\$1235	35320	\$2545	35552	\$3955
33175	\$3515	33845	\$1900	34527	\$1575	35321	\$2385	35554	\$120
33178	\$4470	33848	\$1900	34528	\$785	35324	\$895	35557	\$600
33181	\$5465	34100	\$2105	34530	\$585	35327	\$1165	35560	\$2185
33500	\$3030	34103	\$1240	34533	\$3670	35330	\$2270	35561	\$4110
33506	\$3755	34106	\$865	34538	\$815	35331	\$1730	35562	\$3375
33509	\$4060	34109	\$925	34539	\$580	35360	\$2420	35564	\$1545
33512	\$4515	34112	\$2545	34800	\$2410	35361	\$2075	35565	\$2010
33515	\$4965	34115	\$2855	34803	\$5335	35362	\$1730	35566	\$1100
33518	\$3755	34118	\$4105	34806	\$2860	35363	\$1390	35568	\$1825
33521	\$4060	34121	\$3285	34809	\$2860	35404	\$1050	35569	\$465
33524	\$4825	34124	\$3595	34812	\$3480	35406	\$2465	35570	\$1620
33527	\$5595	34127	\$4720	34815	\$2860	35408	\$1735	35571	\$1620
33530	\$4825	34130	\$1480	34818	\$3175	35410	\$2470	35572	\$385
33533	\$5440	34133	\$1655	34821	\$4305	35412	\$8680	35573	\$2430
33536	\$4000	34136	\$2650	34824	\$1480	35414	\$12400	35577	\$1970

\* 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
35578	\$1970	35648	\$955	36503	\$3610	36606	\$6015	36823	\$1509
35581	\$1620	35649	\$1330	36504	\$755	36607	\$2045	36824	\$555
35582	\$2430	35653	\$1960	36505	\$590	36608	\$790	36827	\$600
35585	\$4305	35657	\$1960	36506	\$2405	36609	\$1925	36830	\$530
35595	\$2980	35658	\$1210	36507	\$1000	36610	\$5047	36833	\$720
35596	\$1900	35661	\$2635	36508	\$1960	36611	\$7960	36836	\$600
35597	\$4310	35664	\$4355	36509	\$2045	36612	\$1685	36840	\$840
35599	\$1855	35667	\$3680	36516	\$2405	36615	\$1925	36842	\$840
35602	\$1845	35670	\$3215	36519	\$3370	36618	\$1685	36845	\$1805
35605	\$1025	35673	\$2125	36522	\$2890	36621	\$1205	36848	\$600
35608	\$172	35674	\$760	36525	\$4090	36624	\$1445	36851	\$600
35611	\$172	35677	\$1460	36528	\$3370	36627	\$1805	36854	\$1205
35612	\$1510	35678	\$1915	36529	\$4145	36633	\$1925	36860	\$435
35613	\$1205	35680	\$1595	36531	\$3010	36636	\$1035	36863	\$1205
35614	\$220	35684	\$995	36532	\$4320	36639	\$2165	37000	\$1925
35615	\$160	35688	\$1100	36533	\$5105	36645	\$2770	37004	\$1685
35616	\$1355	35691	\$505	36537	\$1805	36649	\$700	37008	\$1085
35618	\$655	35694	\$1755	36543	\$3370	36650	\$445	37011	\$240
35620	\$166	35697	\$2615	36546	\$1800	36652	\$1690	37014	\$2770
35622	\$1840	35700	\$1985	36549	\$2165	36654	\$2165	37015	\$3638
35623	\$2360	35703	\$186	36552	\$1925	36656	\$2775	37016	\$5673
35626	\$245	35706	\$184	36558	\$1685	36663	\$1735	37018	\$8509
35627	\$330	35709	\$116	36561	\$440	36664	\$1555	37019	\$5666
35630	\$550	35710	\$1380	36564	\$2405	36665	\$330	37020	\$1925
35633	\$675	35713	\$1260	36567	\$2645	36666	\$875	37021	\$8499
35634	\$2215	35717	\$1525	36570	\$3370	36667	\$410	37023	\$1085
35635	\$1190	35720	\$1660	36573	\$2405	36668	\$410	37026	\$1085
35636	\$1355	35723	\$1315	36576	\$3010	36800	\$72	37029	\$2405
35637	\$1200	35726	\$1315	36579	\$1925	36803	\$1205	37038	\$1805
35638	\$2210	35729	\$650	36585	\$1925	36806	\$1685	37039	\$1918
35640	\$550	35730	\$650	36588	\$2405	36809	\$2165	37040	\$2370
35641	\$4440	35750	\$2340	36591	\$2890	36811	\$840	37041	\$120
35643	\$650	35753	\$2590	36594	\$2405	36812	\$435	37042	\$2370
35644	\$615	35754	\$3220	36597	\$2405	36815	\$610	37043	\$1755
35645	\$955	35756	\$2340	36600	\$2890	36818	\$715	37044	\$1805
35646	\$610	35759	\$1640	36603	\$3370	36821	\$840	37045	\$3715
35647	\$610	36502	\$1860	36604	\$700	36822	\$1312	37046	\$1969

\* 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
37047	\$4330	37327	\$840	37438	\$720	38218	\$1545	38362	\$1005
37048	\$2629	37330	\$1685	37601	\$720	38220	\$515	38365	\$750
37050	\$1925	37333	\$1445	37604	\$715	38222	\$1030	38368	\$4395
37053	\$2170	37336	\$1925	37605	\$1125	38225	\$1545	38371	\$750
37200	\$2645	37338	\$2370	37606	\$1675	38228	\$2065	38384	\$2740
37201	\$2145	37339	\$625	37607	\$2410	38231	\$2580	38387	\$750
37202	\$1075	37340	\$1105	37610	\$3605	38234	\$2065	38390	\$2745
37203	\$3010	37341	\$2370	37613	\$720	38237	\$2580	38393	\$750
37206	\$1445	37342	\$2165	37616	\$1805	38240	\$3095	38415	\$1120
37207	\$3010	37343	\$3615	37619	\$720	38241	\$1115	38418	\$2500
37208	\$1445	37344	\$2591	37623	\$600	38243	\$1030	38421	\$3995
37209	\$3370	37345	\$1805	37800	\$1355	38246	\$2580	38424	\$2500
37210	\$4140	37348	\$1805	37803	\$1355	38256	\$610	38427	\$3290
37211	\$5030	37351	\$720	37806	\$1565	38270	\$2230	38430	\$1715
37213	\$6795	37354	\$845	37809	\$1565	38272	\$2230	38436	\$670
37214	\$8254	37369	\$480	37812	\$1445	38273	\$2230	38438	\$3995
37215	\$1085	37372	\$1205	37815	\$245	38274	\$2230	38440	\$2995
37216	\$399	37375	\$3010	37818	\$1285	38275	\$730	38441	\$4735
37217	\$360	37381	\$1925	37821	\$2165	38276	\$2230	38446	\$3085
37218	\$360	37384	\$3010	37824	\$3010	38285	\$350	38447	\$4135
37219	\$730	37387	\$840	37827	\$1395	38286	\$315	38448	\$995
37220	\$2760	37388	\$278	37830	\$1805	38287	\$5470	38449	\$5785
37221	\$1205	37390	\$2405	37833	\$865	38288	\$350	38450	\$2385
37223	\$520	37393	\$605	37836	\$1805	38290	\$6965	38452	\$1495
37224	\$840	37396	\$1925	37839	\$2045	38293	\$7475	38453	\$4490
37226	\$799	37402	\$1205	37842	\$3975	38300	\$1540	38455	\$6285
37227	\$2760	37405	\$2405	37845	\$1805	38303	\$1975	38456	\$4135
37230	\$3010	37408	\$1205	37848	\$3250	38306	\$2280	38457	\$3870
37233	\$1445	37411	\$2405	37851	\$2410	38309	\$2735	38458	\$2050
37245	\$3450	37415	\$122	37854	\$965	38312	\$3500	38460	\$745
37300	\$120	37417	\$1445	38200	\$1030	38315	\$3755	38462	\$880
37303	\$192	37418	\$1930	38203	\$1290	38318	\$4900	38464	\$960
37306	\$1685	37423	\$2405	38206	\$1560	38350	\$1460	38466	\$2585
37309	\$2405	37426	\$2525	38209	\$1755	38353	\$580	38468	\$3985
37318	\$720	37429	\$840	38212	\$2760	38356	\$1910	38469	\$4635
37321	\$240	37432	\$2405	38213	\$1755	38358	\$7200	38470	\$2900
37324	\$600	37435	\$240	38215	\$1030	38359	\$390	38473	\$1495

\* 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
38475	\$2435	38588	\$1445	38742	\$5020	39138	\$1975	39815	\$5900
38477	\$5865	38600	\$3995	38745	\$5570	39139	\$3485	39818	\$5900
38478	\$2840	38603	\$2500	38748	\$5570	39140	\$960	39821	\$6950
38480	\$5865	38609	\$1260	38751	\$5570	39300	\$1025	39900	\$1660
38481	\$6570	38612	\$1405	38754	\$6970	39303	\$1410	39903	\$5130
38483	\$5035	38613	\$1760	38757	\$5570	39306	\$2180	39906	\$2565
38485	\$2390	38615	\$3995	38760	\$5570	39309	\$2315	40004	\$4704
38487	\$5035	38618	\$4980	38763	\$5570	39312	\$1275	40012	\$3335
38488	\$5590	38621	\$1990	38766	\$5570	39315	\$3335	40018	\$510
38489	\$5725	38624	\$2235	38800	\$112	39318	\$2045	40104	\$2886
38490	\$1625	38627	\$1785	38803	\$200	39321	\$1540	40106	\$3335
38493	\$5295	38637	\$1445	38806	\$390	39323	\$880	40109	\$3590
38496	\$1625	38640	\$2500	38809	\$445	39324	\$905	40112	\$4610
38497	\$5340	38643	\$2785	38812	\$590	39327	\$1540	40119	\$2715
38498	\$5340	38647	\$5570	39000	\$214	39330	\$905	40600	\$3085
38500	\$5740	38650	\$4980	39007	\$453	39331	\$1355	40700	\$5650
38501	\$5740	38653	\$4980	39013	\$320	39333	\$1275	40701	\$1280
38503	\$6230	38654	\$4395	39015	\$1105	39503	\$3085	40702	\$600
38504	\$6230	38656	\$2500	39018	\$1025	39604	\$5099	40703	\$4745
38505	\$725	38670	\$4980	39100	\$770	39610	\$2715	40704	\$2530
38506	\$4640	38673	\$5605	39109	\$1540	39612	\$3840	40705	\$2275
38507	\$4980	38677	\$5245	39113	\$6761	39615	\$3840	40706	\$6925
38508	\$6230	38680	\$6220	39115	\$240	39638	\$12104	40707	\$715
38509	\$6230	38700	\$2785	39118	\$940	39639	\$9672	40708	\$1280
38512	\$5475	38703	\$5020	39121	\$2315	39641	\$12766	40709	\$1660
38515	\$6970	38706	\$4750	39124	\$4745	39651	\$15750	40712	\$3365
38518	\$7480	38709	\$5570	39125	\$965	39654	\$11055	40801	\$5630
38550	\$5720	38712	\$6685	39126	\$1170	39656	\$8290	40803	\$3840
38553	\$7245	38715	\$4450	39127	\$1930	39700	\$2045	40850	\$7270
38556	\$8270	38718	\$5570	39128	\$2135	39703	\$1670	40851	\$12720
38559	\$6745	38721	\$3900	39130	\$1975	39710	\$6890	40852	\$1095
38562	\$8270	38724	\$5570	39131	\$415	39712	\$6405	40854	\$1690
38565	\$9275	38727	\$3905	39133	\$510	39715	\$6405	40856	\$820
38568	\$4965	38730	\$5570	39134	\$1100	39718	\$2820	40858	\$1690
38571	\$5465	38733	\$3900	39135	\$510	39720	\$9845	40860	\$6495
38572	\$5185	38736	\$5570	39136	\$515	39801	\$15750	40862	\$610
38577	\$1445	38739	\$5020	39137	\$1955	39803	\$7310	40905	\$1920

\* 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
41500	\$200	41599	\$4375	41710	\$1355	41825	\$905	42510	\$1870
41501	\$520	41603	\$1590	41713	\$1675	41828	\$142	42512	\$1355
41503	\$610	41604	\$595	41716	\$710	41831	\$965	42515	\$1485
41506	\$405	41608	\$2710	41719	\$305	41832	\$595	42518	\$955
41509	\$420	41611	\$1805	41722	\$1520	41834	\$3610	42521	\$3060
41512	\$1520	41614	\$2590	41725	\$1160	41837	\$3190	42524	\$595
41515	\$995	41615	\$2825	41728	\$2315	41840	\$3925	42527	\$1185
41518	\$2425	41617	\$4890	41729	\$1475	41843	\$3610	42530	\$1675
41521	\$2550	41618	\$4895	41731	\$2190	41855	\$810	42533	\$1005
41524	\$735	41620	\$2065	41734	\$2900	41858	\$1275	42536	\$2385
41527	\$1485	41623	\$2965	41737	\$1160	41861	\$1560	42539	\$3410
41530	\$2450	41626	\$400	41740	\$154	41864	\$1085	42542	\$1420
41533	\$2955	41629	\$1290	41743	\$955	41867	\$1585	42543	\$2485
41536	\$3310	41632	\$610	41746	\$2190	41868	\$1015	42545	\$3180
41539	\$2710	41635	\$2955	41749	\$1600	41870	\$1150	42548	\$2860
41542	\$2965	41638	\$3685	41752	\$760	41873	\$1520	42551	\$1805
41545	\$1420	41641	\$122	41755	\$114	41876	\$1520	42554	\$2130
41548	\$1675	41644	\$370	41764	\$315	41879	\$2460	42557	\$2965
41551	\$4110	41647	\$275	41767	\$1890	41880	\$675	42563	\$1550
41554	\$4845	41650	\$275	41770	\$1805	41881	\$1070	42569	\$2965
41557	\$2710	41653	\$205	41773	\$1485	41884	\$240	42572	\$285
41560	\$2965	41656	\$340	41776	\$1520	41885	\$765	42573	\$605
41563	\$3740	41659	\$200	41779	\$1805	41886	\$460	42574	\$1285
41564	\$5000	41662	\$205	41782	\$2460	41889	\$460	42575	\$240
41566	\$2810	41668	\$610	41785	\$3050	41892	\$610	42581	\$295
41569	\$2965	41671	\$1225	41786	\$2000	41895	\$890	42584	\$775
41572	\$2710	41672	\$1575	41787	\$1475	41898	\$675	42587	\$130
41575	\$6125	41674	\$340	41789	\$750	41901	\$1595	42588	\$143
41576	\$9190	41677	\$260	41793	\$955	41904	\$595	42590	\$955
41578	\$6125	41683	\$305	41797	\$405	41905	\$1085	42593	\$595
41579	\$4595	41686	\$205	41801	\$405	41907	\$315	42596	\$1420
41581	\$7050	41689	\$335	41804	\$225	41910	\$1010	42599	\$1530
41584	\$4840	41692	\$460	41807	\$180	42503	\$295	42602	\$1805
41587	\$6590	41698	\$83	41810	\$90	42504	\$1645	42605	\$1290
41590	\$2965	41701	\$260	41813	\$905	42505	\$1645	42608	\$770
41593	\$3915	41704	\$75	41816	\$485	42506	\$1355	42610	\$255
41596	\$4375	41707	\$1085	41822	\$555	42509	\$1675	42611	\$415

\* 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
42614	\$136	42704	\$1095	42807	\$980	43804	\$2625	43942	\$590
42615	\$192	42705	\$2590	42808	\$980	43807	\$2860	43945	\$2490
42617	\$310	42707	\$1900	42809	\$1155	43810	\$3340	43948	\$355
42620	\$215	42710	\$2135	42810	\$1520	43813	\$3340	43951	\$2230
42622	\$220	42713	\$890	42811	\$1215	43816	\$3100	43954	\$2725
42623	\$2475	42716	\$3290	42812	\$475	43819	\$2505	43957	\$2960
42626	\$2820	42719	\$1485	42815	\$1545	43822	\$2505	43960	\$1040
42629	\$2615	42725	\$3545	42818	\$1420	43825	\$2860	43963	\$4145
42632	\$285	42731	\$4015	42821	\$240	43828	\$3160	43966	\$4740
42635	\$1650	42734	\$890	42824	\$180	43831	\$2465	43969	\$6515
42638	\$1070	42738	\$890	42833	\$1675	43834	\$2860	43972	\$4740
42641	\$1145	42739	\$890	42836	\$1975	43837	\$3575	43975	\$5570
42644	\$205	42740	\$890	42839	\$1935	43840	\$3100	43978	\$4740
42647	\$595	42741	\$890	42842	\$2360	43843	\$4770	43981	\$1305
42650	\$205	42743	\$1805	42845	\$495	43846	\$5125	43984	\$3315
42651	\$450	42744	\$810	42848	\$1935	43849	\$1310	43987	\$3675
42652	\$2330	42746	\$2645	42851	\$1935	43852	\$4175	43990	\$4500
42653	\$3545	42749	\$3280	42854	\$965	43855	\$4410	43993	\$4855
42656	\$3930	42752	\$3670	42857	\$1070	43858	\$1550	43996	\$5450
42662	\$2035	42755	\$460	42860	\$2290	43861	\$4290	43999	\$680
42665	\$1530	42758	\$1935	42863	\$2170	43864	\$3220	44102	\$655
42667	\$390	42761	\$1485	42866	\$1930	43867	\$1790	44105	\$116
42668	\$205	42764	\$1290	42869	\$1350	43870	\$2505	44130	\$1185
42672	\$2125	42767	\$2965	42872	\$650	43873	\$3340	44133	\$940
42673	\$1155	42770	\$810	43021	\$1795	43876	\$2860	44136	\$435
42676	\$320	42773	\$2130	43022	\$1970	43879	\$3340	44325	\$775
42677	\$148	42776	\$3225	43023	\$490	43882	\$4290	44328	\$905
42680	\$770	42779	\$3230	43500	\$315	43900	\$2825	44331	\$1520
42683	\$315	42782	\$1070	43503	\$540	43903	\$4710	44334	\$3030
42686	\$710	42785	\$845	43506	\$905	43906	\$4120	44338	\$415
42689	\$295	42788	\$845	43509	\$905	43909	\$4120	44342	\$620
42692	\$775	42791	\$845	43512	\$905	43912	\$3890	44346	\$825
42695	\$1180	42794	\$156	43515	\$905	43915	\$2945	44350	\$1030
42698	\$3270	42801	\$2825	43518	\$1520	43930	\$1265	44354	\$1240
42701	\$1805	42802	\$1415	43521	\$1175	43933	\$1335	44358	\$515
42702	\$4170	42805	\$1575	43524	\$1520	43936	\$2490	44359	\$845
42703	\$1355	42806	\$845	43801	\$2465	43939	\$1895	44361	\$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
44364	\$775	45218	\$1540	45483	\$15495	45545	\$1940	45623	\$2300
44367	\$1330	45221	\$860	45484	\$11690	45546	\$615	45624	\$2775
44370	\$1870	45224	\$385	45485	\$2565	45548	\$855	45625	\$775
44373	\$3805	45227	\$1515	45486	\$1855	45551	\$1365	45626	\$860
44376	*Derived	45230	\$830	45487	\$1215	45553	\$1810	45627	\$913
45000	\$1665	45233	\$1660	45488	\$1690	45554	\$2155	45629	\$1395
45003	\$1850	45236	\$1260	45489	\$2530	45556	\$2350	45632	\$1525
45006	\$3195	45239	\$770	45490	\$3375	45558	\$3525	45635	\$1810
45009	\$1010	45240	\$775	45491	\$5065	45560	\$1395	45641	\$3205
45012	\$1705	45400	\$625	45492	\$6080	45561	\$5145	45644	\$3750
45015	\$925	45403	\$1245	45493	\$1215	45562	\$3365	45645	\$630
45018	\$1585	45406	\$1390	45494	\$8025	45563	\$3365	45646	\$2545
45019	\$1180	45409	\$2025	45496	\$1220	45564	\$7810	45647	\$3750
45021	\$475	45412	\$3095	45497	\$950	45565	\$5860	45650	\$415
45024	\$1185	45415	\$3715	45498	\$765	45566	\$2905	45652	\$940
45025	\$475	45418	\$4390	45499	\$570	45568	\$1365	45653	\$940
45026	\$1065	45439	\$830	45500	\$3130	45569	\$1800	45656	\$2015
45027	\$370	45442	\$1775	45501	\$5025	45570	\$2380	45659	\$1440
45030	\$355	45445	\$1735	45502	\$5030	45572	\$905	45660	\$8235
45033	\$740	45448	\$1155	45503	\$5310	45575	\$2150	45661	\$3660
45035	\$2080	45451	\$1395	45504	\$5025	45578	\$2505	45662	\$2090
45036	\$3470	45460	\$4225	45505	\$5025	45581	\$855	45665	\$985
45039	\$740	45461	\$3010	45506	\$625	45584	\$1945	45668	\$980
45042	\$950	45462	\$2175	45512	\$845	45587	\$2345	45669	\$980
45045	\$950	45464	\$6450	45515	\$580	45588	\$3505	45671	\$2860
45048	\$2295	45465	\$4595	45518	\$695	45590	\$1275	45674	\$860
45051	\$1415	45466	\$3315	45519	\$1315	45593	\$1500	45675	\$1365
45054	\$645	45468	\$6445	45520	\$2765	45596	\$2460	45676	\$1625
45200	\$830	45469	\$4290	45522	\$1940	45597	\$3340	45677	\$1705
45201	\$1225	45471	\$8100	45524	\$2015	45599	\$1945	45680	\$1945
45202	\$1225	45472	\$6110	45527	\$2020	45602	\$2010	45683	\$2300
45203	\$1245	45474	\$9755	45528	\$3030	45605	\$1660	45686	\$2550
45206	\$1180	45475	\$7360	45530	\$2980	45608	\$2225	45689	\$755
45207	\$1180	45477	\$11880	45533	\$3380	45611	\$1585	45692	\$710
45209	\$1585	45478	\$8960	45536	\$1245	45614	\$1600	45695	\$1350
45212	\$785	45480	\$13600	45539	\$2905	45617	\$625	45698	\$1320
45215	\$3440	45481	\$10260	45542	\$1660	45620	\$860	45701	\$3025

\* 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
45704	\$865	45805	\$530	45879	\$980	46351	\$1240	46459	\$615
45707	\$2075	45807	\$755	45882	\$106	46354	\$1650	46462	\$975
45710	\$1245	45809	\$1135	45885	\$1050	46357	\$2065	46464	\$740
45713	\$1570	45811	\$1535	45888	\$780	46360	\$2475	46465	\$735
45714	\$2205	45813	\$1800	45891	\$1850	46363	\$690	46468	\$1280
45716	\$2225	45815	\$905	45894	\$625	46366	\$420	46471	\$1855
45720	\$2580	45817	\$1175	45897	\$3455	46369	\$690	46474	\$2400
45723	\$3135	45819	\$1520	45900	\$740	46372	\$1400	46477	\$2940
45726	\$3290	45821	\$1250	45939	\$1050	46375	\$1665	46480	\$1230
45729	\$3980	45823	\$335	45945	\$290	46378	\$2205	46483	\$975
45731	\$3720	45825	\$1035	45975	\$405	46381	\$975	46486	\$735
45732	\$4545	45827	\$990	45978	\$495	46384	\$975	46489	\$870
45735	\$4300	45829	\$755	45981	\$270	46387	\$2015	46492	\$1185
45738	\$5215	45831	\$990	45984	\$1940	46390	\$2710	46494	\$595
45741	\$4715	45833	\$1240	45987	\$1940	46393	\$3135	46495	\$665
45744	\$5735	45835	\$1540	45990	\$2650	46396	\$1080	46498	\$720
45747	\$5160	45837	\$1795	45993	\$2650	46399	\$1700	46500	\$865
45752	\$6230	45839	\$1795	45996	\$750	46402	\$1700	46501	\$1080
45753	\$6175	45841	\$1450	46300	\$1100	46405	\$2075	46502	\$995
45754	\$7405	45843	\$890	46303	\$1210	46408	\$2270	46503	\$1240
45755	\$1195	45845	\$1550	46306	\$1845	46411	\$1375	46504	\$3605
45758	\$2105	45847	\$530	46307	\$1730	46414	\$1730	46507	\$4220
45761	\$1985	45849	\$1775	46309	\$1730	46417	\$1650	46510	\$1150
45767	\$6720	45851	\$435	46312	\$2145	46420	\$690	46513	\$186
45770	\$5115	45853	\$2533	46315	\$2860	46423	\$1100	46516	\$370
45773	\$4670	45855	\$1250	46318	\$3575	46426	\$1110	46519	\$465
45776	\$4670	45857	\$2000	46321	\$4295	46429	\$1375	46522	\$1385
45779	\$3440	45859	\$1040	46324	\$2650	46432	\$1400	46525	\$186
45782	\$2625	45861	\$2670	46325	\$2765	46435	\$1650	46528	\$555
45785	\$4450	45863	\$2960	46327	\$690	46438	\$445	46531	\$280
45788	\$4390	45865	\$890	46330	\$1135	46441	\$1100	46534	\$775
45791	\$2390	45867	\$980	46333	\$1855	46442	\$920	47000	\$148
45794	\$1550	45869	\$3635	46336	\$865	46444	\$1590	47003	\$176
45797	\$580	45871	\$4095	46339	\$1520	46447	\$1990	47006	\$355
45799	\$90	45873	\$4600	46342	\$1520	46450	\$690	47009	\$355
45801	\$390	45875	\$1485	46345	\$1855	46453	\$1235	47012	\$705
45803	\$1000	45877	\$1485	46348	\$825	46456	\$330	47015	\$176

\* 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
47018	\$415	47381	\$805	47477	\$740	47582	\$1040	47756	\$1280
47021	\$555	47384	\$1075	47480	\$1485	47585	\$1335	47762	\$750
47024	\$415	47385	\$915	47483	\$1780	47588	\$4150	47765	\$1235
47027	\$550	47386	\$1485	47486	\$2965	47591	\$5040	47768	\$1510
47030	\$415	47387	\$860	47489	\$4450	47594	\$680	47771	\$1735
47033	\$555	47390	\$1280	47492	\$740	47597	\$1030	47774	\$1370
47036	\$178	47393	\$1715	47495	\$1485	47600	\$1365	47777	\$1370
47039	\$235	47396	\$595	47498	\$2215	47603	\$1780	47780	\$1780
47042	\$235	47399	\$1190	47501	\$2965	47606	\$740	47783	\$1780
47045	\$315	47402	\$885	47504	\$4450	47609	\$1120	47786	\$2260
47048	\$680	47405	\$595	47507	\$4450	47612	\$1280	47789	\$2260
47051	\$920	47408	\$1190	47510	\$4450	47615	\$1485	47900	\$565
47054	\$680	47411	\$355	47513	\$1190	47618	\$1850	47903	\$785
47057	\$265	47414	\$715	47516	\$1365	47621	\$1280	47904	\$188
47060	\$355	47417	\$830	47519	\$2730	47624	\$1780	47906	\$375
47063	\$535	47420	\$1620	47522	\$2375	47627	\$505	47912	\$188
47066	\$710	47423	\$680	47525	\$2730	47630	\$1075	47915	\$565
47069	\$148	47426	\$1030	47528	\$2375	47633	\$355	47916	\$285
47072	\$198	47429	\$1370	47531	\$3025	47636	\$530	47918	\$785
47301	\$275	47432	\$1715	47534	\$3410	47639	\$715	47920	\$1250
47304	\$310	47435	\$1300	47537	\$1365	47642	\$475	47921	\$375
47307	\$630	47438	\$2080	47540	\$680	47645	\$715	47924	\$126
47310	\$1035	47441	\$2580	47543	\$710	47648	\$935	47927	\$470
47313	\$1010	47444	\$710	47546	\$1075	47651	\$740	47930	\$875
47316	\$2000	47447	\$1075	47549	\$1415	47654	\$1120	47933	\$690
47319	\$2050	47450	\$1415	47552	\$1190	47657	\$1485	47936	\$845
47348	\$295	47451	\$1715	47555	\$1780	47663	\$445	47948	\$530
47351	\$740	47453	\$830	47558	\$2375	47666	\$740	47951	\$400
47354	\$530	47456	\$1235	47561	\$860	47672	\$355	47954	\$1260
47357	\$1190	47459	\$1670	47564	\$1280	47678	\$530	47957	\$960
47361	\$415	47462	\$355	47565	\$2240	47726	\$445	47960	\$440
47362	\$625	47465	\$715	47566	\$2860	47729	\$740	47963	\$720
47364	\$885	47466	\$350	47567	\$1485	47732	\$1190	47966	\$1455
47367	\$705	47467	\$715	47570	\$1715	47735	\$122	47969	\$880
47370	\$1275	47468	\$1370	47573	\$2150	47738	\$1070	47972	\$700
47373	\$915	47471	\$134	47576	\$355	47741	\$1465	47975	\$1230
47378	\$535	47474	\$595	47579	\$505	47753	\$1280	47978	\$745

\* 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
47981	\$500	48915	\$2375	49227	\$2225	49536	\$2965	49821	\$1365
47982	\$1195	48918	\$4745	49300	\$1630	49539	\$2965	49824	\$2390
48200	\$2375	48921	\$4895	49303	\$1720	49542	\$4150	49827	\$1485
48203	\$2875	48924	\$5635	49306	\$3410	49545	\$2375	49830	\$2595
48206	\$1780	48927	\$1155	49309	\$2375	49548	\$3015	49833	\$1630
48209	\$2285	48930	\$2375	49312	\$2965	49551	\$4210	49836	\$2820
48212	\$1780	48933	\$3115	49315	\$2670	49554	\$5930	49837	\$2060
48215	\$2285	48936	\$2375	49318	\$4150	49557	\$860	49838	\$3545
48218	\$1780	48939	\$3410	49319	\$7255	49558	\$860	49839	\$1630
48221	\$2375	48942	\$4450	49321	\$5040	49559	\$1430	49842	\$2820
48224	\$1185	48945	\$860	49324	\$5930	49560	\$1930	49845	\$1485
48227	\$1540	48948	\$1930	49327	\$6820	49561	\$2360	49848	\$505
48230	\$1335	48951	\$2820	49330	\$6820	49562	\$2575	49851	\$650
48233	\$1930	48954	\$2965	49333	\$7710	49563	\$2820	49854	\$1185
48236	\$2520	48957	\$3410	49336	\$740	49564	\$2920	49857	\$1095
48239	\$1395	48960	\$2965	49339	\$8750	49566	\$3115	49860	\$890
48242	\$1930	49100	\$1040	49342	\$8750	49569	\$2380	49863	\$1335
48400	\$1040	49103	\$2225	49345	\$10380	49700	\$860	49866	\$950
48403	\$1630	49106	\$2965	49346	\$2665	49703	\$1930	49878	\$178
48406	\$1040	49109	\$2225	49360	\$1085	49706	\$1040	50100	\$860
48409	\$1630	49112	\$2225	49363	\$1305	49709	\$2225	50102	\$1920
48412	\$1985	49115	\$3560	49366	\$1925	49712	\$2375	50103	\$1040
48415	\$2520	49116	\$4690	49500	\$1185	49715	\$3560	50104	\$980
48418	\$1985	49117	\$5630	49503	\$1545	49716	\$4690	50106	\$1485
48421	\$2520	49118	\$860	49506	\$2340	49717	\$5630	50109	\$1485
48424	\$2375	49121	\$1930	49509	\$2375	49718	\$1185	50112	\$1130
48427	\$2875	49200	\$2580	49512	\$3410	49721	\$740	50115	\$440
48500	\$1040	49203	\$1930	49515	\$2670	49724	\$2075	50118	\$1365
48503	\$1040	49206	\$1780	49517	\$3810	49727	\$890	50121	\$2670
48506	\$1540	49209	\$2375	49518	\$4150	49728	\$1685	50127	\$2200
48509	\$740	49210	\$3130	49519	\$7255	49800	\$415	50130	\$980
48512	\$2820	49211	\$3755	49521	\$5040	49803	\$535	50200	\$595
48900	\$890	49212	\$740	49524	\$5930	49806	\$415	50201	\$1505
48903	\$1780	49215	\$2045	49527	\$5040	49809	\$680	50203	\$1305
48906	\$1780	49218	\$860	49530	\$6230	49812	\$1365	50206	\$1930
48909	\$2375	49221	\$1930	49533	\$7120	49815	\$2375	50209	\$2375
48912	\$1040	49224	\$2225	49534	\$1430	49818	\$860	50212	\$4300

\* 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
50215	\$5635	50375	\$1485	50524	\$1540	51014	\$10480	51073	\$8970
50218	\$7325	50378	\$2595	50528	\$2370	51015	\$12230	51102	\$3290
50221	\$6525	50381	\$1935	50532	\$2060	51020	\$1985	51103	\$6720
50224	\$7710	50384	\$3400	50536	\$2750	51021	\$3620	51110	\$2375
50227	\$8750	50387	\$1935	50540	\$1895	51022	\$4505	51111	\$1010
50230	\$4450	50390	\$680	50544	\$950	51023	\$5360	51112	\$680
50233	\$5930	50393	\$2515	50548	\$1895	51024	\$6435	51113	\$755
50236	\$4450	50394	\$8255	50552	\$1635	51025	\$7276	51114	\$1335
50239	\$2965	50396	\$1380	50556	\$2180	51026	\$8075	51115	\$1335
50300	\$3440	50399	\$2740	50560	\$1705	51031	\$2965	51120	\$740
50303	\$4700	50402	\$1255	50564	\$2275	51032	\$3560	51130	\$5810
50306	\$7335	50405	\$1710	50568	\$1990	51033	\$4155	51131	\$5810
50309	\$905	50408	\$2970	50572	\$2655	51034	\$4450	51140	\$1395
50312	\$2080	50411	\$3895	50576	\$2180	51035	\$4745	51141	\$2580
50315	\$2060	50414	\$5255	50580	\$2275	51036	\$5040	51145	\$920
50318	\$2060	50417	\$3895	50584	\$2180	51041	\$3410	51150	\$1115
50321	\$2760	50420	\$3215	50588	\$2845	51042	\$4775	51160	\$3195
50324	\$4100	50423	\$2965	50600	\$1575	51043	\$5975	51165	\$4025
50327	\$4800	50426	\$1380	50604	\$6685	51044	\$6485	51170	\$7065
50330	\$680	50450	\$3665	50608	\$12420	51045	\$6825	51171	\$2970
50333	\$1835	50451	\$3665	50612	\$17665	51051	\$7655	51300	\$255
50336	\$2740	50455	\$4150	50616	\$2245	51052	\$9310	51303	*Derived
50339	\$1670	50456	\$4150	50620	\$12420	51053	\$10595	51306	\$354
50342	\$1935	50460	\$6195	50624	\$12420	51054	\$5650	51309	*Derived
50345	\$1030	50461	\$6195	50628	\$15340	51055	\$8475	51312	*Derived
50348	\$680	50465	\$8725	50632	\$12895	51056	\$9890	51315	\$774
50349	\$1000	50466	\$8725	50636	\$14330	51057	\$6525	51318	\$511
50351	\$4755	50470	\$11060	50640	\$7920	51058	\$7345	51700	\$184
50352	\$178	50471	\$11060	50644	\$7645	51059	\$8970	51703	\$98
50353	\$1115	50475	\$12765	50650	\$1490	51061	\$8515	51800	\$255
50354	\$3895	50476	\$12765	50654	\$1785	51062	\$11065	51803	*Derived
50357	\$1670	50500	\$995	50658	\$710	51063	\$13405	51900	\$920
50360	\$1935	50504	\$1325	50950	\$2340	51064	\$15485	51902	\$196
50363	\$1485	50508	\$1420	50952	\$2340	51065	\$16720	51904	\$1170
50366	\$2595	50512	\$1895	51011	\$6040	51066	\$17420	51906	\$1760
50369	\$1935	50516	\$1280	51012	\$6990	51071	\$6795	52000	\$210
50372	\$3400	50520	\$1470	51013	\$8735	51072	\$7070	52003	\$315

\* 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
52006	\$315	52081	\$132	52186	\$2375	52442	\$1945	52832	\$2045
52009	\$540	52084	\$335	52300	\$830	52444	\$2300	53000	\$83
52010	\$730	52087	\$565	52303	\$1245	52446	\$2550	53003	\$260
52012	\$63	52090	\$905	52306	\$1850	52450	\$710	53004	\$75
52015	\$285	52092	\$1175	52309	\$625	52452	\$1350	53006	\$1355
52018	\$790	52094	\$1520	52312	\$830	52456	\$3025	53009	\$710
52021	\$90	52095	\$1250	52315	\$1395	52458	\$865	53012	\$305
52024	\$196	52096	\$375	52318	\$445	52460	\$2076	53015	\$1520
52025	\$540	52097	\$530	52319	\$740	52480	\$2015	53016	\$1225
52027	\$500	52098	\$400	52321	\$1415	52482	\$1365	53017	\$1575
52030	\$235	52099	\$126	52324	\$1585	52484	\$1625	53019	\$1775
52033	\$530	52102	\$470	52327	\$785	52600	\$1035	53052	\$326
52034	\$106	52105	\$875	52330	\$2205	52603	\$990	53054	\$315
52035	\$1365	52106	\$335	52333	\$2075	52606	\$755	53056	\$205
52036	\$390	52108	\$985	52336	\$1245	52609	\$990	53058	\$340
52039	\$1000	52111	\$980	52337	\$3455	52612	\$1240	53060	\$340
52042	\$530	52114	\$1660	52339	\$1570	52615	\$1540	53062	\$260
52045	\$755	52117	\$2010	52342	\$2580	52618	\$1795	53064	\$433
52048	\$1135	52120	\$2197	52345	\$3135	52621	\$1795	53068	\$335
52051	\$1535	52122	\$2225	52348	\$3290	52624	\$1450	53070	\$460
52054	\$1800	52123	\$1945	52351	\$3980	52626	\$890	53200	\$148
52055	\$66	52126	\$2460	52354	\$3720	52627	\$1550	53203	\$290
52056	\$66	52129	\$3340	52357	\$4545	52630	\$580	53206	\$435
52057	\$425	52130	\$1395	52360	\$4300	52633	\$1550	53209	\$4390
52058	\$685	52131	\$1930	52363	\$5215	52636	\$580	53212	\$2390
52059	\$770	52132	\$675	52366	\$4715	52800	\$905	53215	\$1250
52060	\$435	52133	\$240	52369	\$5735	52803	\$1275	53218	\$2000
52061	\$640	52135	\$410	52372	\$5160	52806	\$905	53220	\$1040
52062	\$855	52138	\$1085	52375	\$6230	52809	\$1540	53221	\$2670
52063	\$920	52141	\$1050	52378	\$1985	52812	\$2180	53224	\$2960
52064	\$565	52144	\$780	52379	\$3750	52815	\$2315	53225	\$890
52066	\$995	52147	\$1010	52380	\$6175	52818	\$1540	53226	\$980
52069	\$565	52148	\$2025	52382	\$7405	52821	\$3335	53227	\$3635
52072	\$170	52158	\$3145	52420	\$740	52824	\$1050	53230	\$4095
52073	\$435	52180	\$595	52424	\$1585	52826	\$770	53233	\$4600
52075	\$425	52182	\$1305	52430	\$3130	52828	\$1025	53236	\$1485
52078	\$855	52184	\$1930	52440	\$1705	52830	\$1410	53239	\$1485

\* 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
53242	\$980	55037	\$77	55276	\$344	55844	\$177	55888	\$222
53400	\$405	55038	\$222	55278	\$344	55846	\$77	55889	\$77
53403	\$495	55039	\$77	55280	\$344	55848	\$277	55890	\$246
53406	\$1280	55048	\$222	55282	\$344	55850	\$366	55891	\$85
53409	\$1280	55049	\$77	55284	\$344	55854	\$77	55892	\$222
53410	\$270	55054	\$222	55292	\$344	55856	\$222	55893	\$77
53411	\$750	55065	\$199	55294	\$344	55857	\$77	55894	\$246
53412	\$1235	55066	\$443	55296	\$225	55858	\$246	55895	\$85
53413	\$1510	55068	\$71	55600	\$222	55859	\$85	56001	\$396
53414	\$1735	55070	\$199	55603	\$222	55860	\$222	56007	\$508
53415	\$1370	55071	\$421	55700	\$122	55861	\$77	56010	\$512
53416	\$1370	55073	\$69	55703	\$71	55862	\$246	56013	\$508
53418	\$1780	55076	\$222	55704	\$142	55863	\$85	56016	\$589
53419	\$1780	55079	\$77	55705	\$71	55864	\$222	56022	\$457
53422	\$2260	55084	\$199	55706	\$203	55865	\$77	56028	\$684
53423	\$2260	55085	\$69	55707	\$142	55866	\$246	56030	\$457
53424	\$1940	55118	\$559	55708	\$71	55867	\$85	56036	\$684
53425	\$1940	55126	\$468	55709	\$77	55868	\$222	56101	\$467
53427	\$2650	55127	\$468	55712	\$233	55869	\$77	56107	\$690
53429	\$2650	55128	\$468	55715	\$81	55870	\$246	56219	\$662
53439	\$750	55129	\$468	55718	\$203	55871	\$85	56220	\$487
53453	\$1275	55130	\$345	55721	\$233	55872	\$222	56221	\$487
53455	\$1500	55132	\$468	55723	\$77	55873	\$77	56223	\$487
53458	\$114	55133	\$422	55725	\$81	55874	\$246	56224	\$713
53459	\$1070	55134	\$468	55729	\$55	55875	\$85	56225	\$713
53460	\$1465	55135	\$718	55736	\$258	55876	\$222	56226	\$713
53700	\$332	55137	\$468	55739	\$116	55877	\$77	56233	\$487
53702	\$166	55141	\$835	55759	\$305	55878	\$246	56234	\$713
53704	\$100	55143	\$835	55762	\$122	55879	\$85	56237	\$487
53706	\$332	55145	\$968	55764	\$325	55880	\$222	56238	\$713
55028	\$222	55146	\$968	55766	\$132	55881	\$77	56301	\$599
55029	\$77	55238	\$344	55768	\$305	55882	\$246	56307	\$812
55030	\$222	55244	\$344	55770	\$122	55883	\$85	56401	\$508
55031	\$77	55246	\$344	55772	\$325	55884	\$222	56407	\$731
55032	\$222	55248	\$344	55774	\$132	55885	\$77	56409	\$508
55033	\$77	55252	\$344	55812	\$222	55886	\$246	56412	\$731
55036	\$226	55274	\$344	55814	\$77	55887	\$85	56501	\$782

\* 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
56507	\$975	57709	\$88	58521	\$88	59903	\$233	61109	\$526
56553	\$1056	57712	\$96	58524	\$115	59912	\$620	61310	\$735
56620	\$447	57715	\$124	58527	\$141	59925	\$736	61311	\$1131
56622	\$447	57721	\$202	58700	\$94	59970	\$342	61313	\$607
56623	\$679	57901	\$131	58706	\$321	60000	\$1145	61314	\$840
56626	\$679	57902	\$131	58715	\$308	60003	\$1679	61321	\$658
56627	\$447	57905	\$131	58718	\$256	60006	\$2388	61324	\$1306
56628	\$679	57907	\$96	58721	\$281	60009	\$2794	61325	\$658
56629	\$447	57915	\$96	58900	\$73	60012	\$1145	61328	\$455
56630	\$679	57918	\$96	58903	\$97	60015	\$1679	61329	\$1964
56801	\$947	57921	\$96	58909	\$183	60018	\$2388	61332	\$1670
56807	\$1137	57924	\$96	58912	\$224	60021	\$2794	61333	\$887
57001	\$947	57927	\$101	58915	\$160	60024	\$1145	61336	\$1210
57007	\$1153	57930	\$67	58916	\$281	60027	\$1679	61337	\$960
57201	\$315	57933	\$159	58921	\$275	60030	\$2388	61340	\$506
57341	\$954	57939	\$131	58927	\$155	60033	\$2794	61341	\$1201
57351	\$1035	57942	\$101	58933	\$417	60036	\$1145	61344	\$200
57352	\$1035	57945	\$88	58936	\$398	60039	\$1679	61345	\$1964
57353	\$1035	57960	\$96	58939	\$283	60042	\$2388	61348	\$887
57354	\$1035	57963	\$96	59103	\$43	60045	\$2794	61349	\$1964
57357	\$1035	57966	\$96	59300	\$182	60048	\$1145	61353	\$773
57360	\$1421	57969	\$96	59302	\$410	60051	\$1679	61356	\$786
57362	\$230	58100	\$136	59303	\$110	60054	\$2388	61357	\$1306
57506	\$60	58103	\$112	59305	\$231	60057	\$2794	61360	\$807
57509	\$81	58106	\$156	59312	\$177	60060	\$1145	61361	\$923
57512	\$82	58108	\$223	59314	\$107	60063	\$1679	61364	\$994
57515	\$110	58109	\$95	59318	\$96	60066	\$2388	61368	\$446
57518	\$66	58112	\$197	59700	\$196	60069	\$2794	61369	\$4032
57521	\$88	58115	\$223	59703	\$154	60072	\$98	61372	\$446
57522	\$66	58120	\$223	59712	\$231	60075	\$195	61373	\$979
57523	\$88	58121	\$223	59718	\$273	60078	\$293	61376	\$287
57524	\$100	58300	\$81	59724	\$460	60500	\$88	61381	\$1149
57527	\$134	58306	\$182	59733	\$219	60503	\$60	61383	\$1250
57541	\$150	58500	\$72	59739	\$150	60506	\$129	61384	\$1375
57700	\$82	58503	\$96	59751	\$283	60509	\$201	61386	\$665
57703	\$110	58506	\$123	59754	\$445	60918	\$96	61387	\$862
57706	\$66	58509	\$81	59763	\$272	60927	\$77	61389	\$741

\* 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
61390	\$820	61523	\$1906	63070	\$404	63322	\$404	63501	\$500
61393	\$1211	61524	\$1906	63073	\$404	63325	\$404	63502	\$500
61394	\$1306	61525	\$1906	63101	\$493	63328	\$404	63507	\$403
61397	\$494	61529	\$1906	63111	\$493	63331	\$404	63510	\$448
61398	\$1964	61538	\$1802	63114	\$493	63334	\$336	63513	\$404
61402	\$1210	61541	\$1906	63125	\$493	63337	\$448	63516	\$404
61406	\$1964	61553	\$1998	63128	\$493	63340	\$404	63519	\$404
61409	\$1747	61559	\$1836	63131	\$493	63361	\$404	63522	\$448
61410	\$1964	61565	\$1906	63151	\$359	63385	\$448	63531	\$690
61413	\$452	61571	\$1906	63154	\$359	63388	\$448	63533	\$690
61414	\$1306	61575	\$1906	63161	\$359	63391	\$403	63545	\$550
61421	\$960	61577	\$1906	63164	\$359	63395	\$856	63546	\$550
61425	\$1201	61598	\$1906	63167	\$359	63397	\$856	63547	\$690
61426	\$1110	61604	\$1906	63170	\$359	63401	\$404	63551	\$404
61429	\$1086	61610	\$1906	63173	\$359	63404	\$404	63554	\$359
61430	\$1319	61620	\$1906	63176	\$359	63416	\$404	63557	\$493
61433	\$994	61622	\$1906	63179	\$359	63425	\$404	63560	\$404
61434	\$1231	61628	\$1906	63182	\$359	63428	\$404	65060	\$22
61438	\$1346	61632	\$1906	63185	\$359	63440	\$404	65066	\$29
61441	\$979	61640	\$1998	63201	\$448	63443	\$404	65070	\$47
61442	\$1505	61646	\$1998	63204	\$448	63446	\$404	65072	\$28
61445	\$574	61647	\$1906	63219	\$448	63454	\$1200	65075	\$144
61446	\$667	61650	\$1757	63222	\$448	63461	\$359	65078	\$250
61449	\$912	63001	\$404	63225	\$448	63464	\$690	65079	\$250
61450	\$795	63004	\$404	63228	\$448	63467	\$690	65081	\$265
61453	\$1029	63007	\$404	63231	\$448	63470	\$404	65082	\$265
61454	\$696	63010	\$336	63234	\$448	63473	\$628	65084	\$465
61457	\$941	63040	\$336	63237	\$448	63476	\$404	65087	\$240
61461	\$1056	63043	\$359	63240	\$448	63482	\$404	65090	\$31
61462	\$258	63046	\$404	63243	\$448	63487	\$690	65093	\$61
61469	\$696	63049	\$404	63271	\$493	63489	\$1440	65096	\$112
61473	\$351	63052	\$404	63274	\$493	63491	\$45	65099	\$305
61480	\$774	63055	\$404	63277	\$493	63494	\$45	65102	\$460
61485	\$1998	63058	\$404	63280	\$493	63496	\$250	65105	\$305
61495	\$446	63061	\$404	63301	\$381	63497	\$157	65108	\$460
61499	\$506	63064	\$404	63304	\$381	63498	\$45	65109	\$36
61505	\$200	63067	\$404	63307	\$381	63499	\$157	65110	\$36

\* 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
65111	\$64	66539	\$84	66655	\$56	66750	\$106	66826	\$84
65114	\$25	66542	\$52	66656	\$56	66751	\$152	66827	\$60
65117	\$56	66545	\$44	66659	\$102	66752	\$68	66828	\$144
65120	\$38	66548	\$55	66660	\$102	66755	\$106	66830	\$170
65123	\$56	66557	\$27	66662	\$220	66756	\$280	66831	\$84
65126	\$77	66560	\$56	66663	\$220	66757	\$280	66832	\$84
65129	\$98	66563	\$68	66665	\$84	66758	\$68	66833	\$116
65137	\$70	66566	\$93	66666	\$84	66761	\$37	66834	\$116
65142	\$70	66569	\$118	66667	\$84	66764	\$25	66835	\$116
65144	\$156	66572	\$142	66671	\$102	66767	\$49	66836	\$116
65147	\$104	66575	\$166	66674	\$110	66770	\$74	66837	\$116
65150	\$196	66578	\$192	66677	\$31	66773	\$68	66838	\$68
65153	\$390	66581	\$215	66680	\$205	66776	\$68	66839	\$124
65156	\$585	66584	\$27	66683	\$205	66779	\$110	66840	\$68
65157	\$196	66587	\$130	66686	\$140	66780	\$110	66841	\$47
65158	\$196	66590	\$84	66695	\$87	66782	\$37	66900	\$210
65159	\$196	66593	\$53	66696	\$87	66783	\$37	69300	\$34
65162	\$29	66596	\$95	66697	\$38	66785	\$110	69303	\$60
65165	\$95	66605	\$84	66698	\$122	66788	\$182	69306	\$92
65166	\$95	66606	\$84	66701	\$160	66789	\$110	69309	\$132
65171	\$70	66607	\$205	66704	\$196	66790	\$71	69312	\$92
65175	\$70	66610	\$205	66707	\$230	66791	\$205	69316	\$78
65176	\$134	66623	\$114	66711	\$86	66792	\$205	69317	\$97
65177	\$198	66626	\$66	66712	\$124	66800	\$50	69318	\$88
65178	\$265	66629	\$56	66714	\$86	66803	\$84	69319	\$116
65179	\$325	66632	\$56	66715	\$37	66804	\$50	69321	\$132
65180	\$70	66635	\$56	66716	\$86	66805	\$35	69324	\$118
65181	\$64	66638	\$80	66719	\$112	66806	\$118	69325	\$118
66500	\$27	66639	\$80	66722	\$122	66812	\$96	69327	\$230
66503	\$32	66641	\$80	66723	\$122	66815	\$166	69328	\$230
66506	\$38	66642	\$80	66724	\$42	66816	\$166	69330	\$350
66509	\$44	66644	\$56	66725	\$158	66817	\$118	69331	\$350
66512	\$49	66647	\$124	66728	\$194	66819	\$84	69333	\$56
66517	\$54	66650	\$67	66731	\$230	66820	\$84	69336	\$94
66518	\$55	66651	\$67	66734	\$265	66821	\$60	69339	\$52
66519	\$112	66652	\$56	66743	\$56	66822	\$144	69345	\$144
66536	\$32	66653	\$122	66749	\$91	66825	\$84	69354	\$84

\* 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
69357	\$168	69494	\$70	71099	\$73	71170	\$36	73045	\$126
69360	\$250	69495	\$91	71101	\$48	71180	\$95	73047	\$250
69363	\$70	69496	\$116	71103	\$144	71183	\$130	73049	\$182
69378	\$490	69497	\$70	71106	\$31	71186	\$166	73051	\$460
69379	\$490	69498	\$18	71119	\$48	71189	\$43	73059	\$118
69380	\$2070	69499	\$250	71121	\$57	71192	\$79	73060	\$156
69381	\$490	69500	\$250	71123	\$67	71195	\$110	73061	\$140
69382	\$490	69501	\$248	71125	\$76	71198	\$112	73062	\$235
69383	\$490	71057	\$98	71127	\$485	71200	\$98	73063	\$260
69384	\$43	71058	\$140	71129	\$600	71203	\$112	73064	\$194
69387	\$78	71059	\$80	71131	\$715	72813	\$220	73065	\$235
69390	\$118	71060	\$122	71133	\$29	72814	\$194	73066	\$590
69393	\$156	71062	\$122	71134	\$290	72816	\$235	73067	\$345
69396	\$196	71064	\$57	71135	\$575	72817	\$265	73070	\$108
69400	\$43	71066	\$41	71137	\$83	72818	\$295	73287	\$990
69401	\$38	71068	\$41	71139	\$285	72823	\$265	73289	\$900
69405	\$43	71069	\$65	71141	\$545	72824	\$385	73290	\$990
69408	\$76	71071	\$90	71143	\$715	72825	\$490	73291	\$580
69411	\$106	71072	\$41	71145	\$1170	72826	\$530	73292	\$1480
69413	\$138	71073	\$295	71146	\$295	72827	\$570	73293	\$580
69445	\$250	71074	\$41	71147	\$112	72828	\$610	73294	\$580
69451	\$250	71075	\$75	71148	\$112	72830	\$745	73298	\$3085
69471	\$96	71076	\$295	71149	\$300	72836	\$1145	73299	\$1030
69472	\$43	71077	\$75	71151	\$330	72838	\$1285	73300	\$275
69474	\$78	71079	\$74	71153	\$95	72844	\$84	73301	\$3085
69475	\$43	71081	\$112	71154	\$95	72846	\$164	73302	\$1030
69478	\$80	71083	\$56	71155	\$130	72847	\$245	73305	\$560
69479	\$113	71085	\$80	71156	\$35	72848	\$205	73308	\$96
69480	\$225	71087	\$104	71157	\$166	72849	\$285	73309	\$96
69481	\$110	71089	\$80	71159	\$200	72850	\$325	73311	\$96
69482	\$410	71090	\$80	71163	\$69	72851	\$1465	73312	\$96
69483	\$410	71091	\$146	71164	\$112	72852	\$1955	73314	\$605
69484	\$47	71092	\$65	71165	\$95	72855	\$505	73315	\$605
69488	\$490	71093	\$210	71166	\$130	72856	\$670	73317	\$96
69489	\$490	71095	\$112	71167	\$166	72857	\$785	73318	\$96
69491	\$555	71096	\$112	71168	\$200	72860	\$235	73320	\$106
69492	\$555	71097	\$70	71169	\$95	73043	\$55	73321	\$106

\* 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
73323	\$106	73831	\$18	75023	\$120	75806	\$1003	90002	\$80
73324	\$106	73832	\$10	75024	\$1556	75809	\$1188	90020	\$34
73325	\$194	73833	\$23	75027	\$2134	75812	\$1320	90035	\$75
73326	\$600	73834	\$16	75030	\$1900	75815	\$1610	90043	\$145
73327	\$136	73835	\$19	75033	\$3115	75818	\$1900	90051	\$214
73332	\$830	73836	\$5	75034	\$1585	75821	\$1531	90092	\$16
73333	\$1545	73837	\$16	75036	\$4302	75824	\$1768	90093	\$31
73334	\$875	73899	\$48	75037	\$5418	75827	\$2033	90095	\$69
73335	\$1210	73900	\$7	75039	\$1440	75830	\$2244	90096	\$111
73336	\$520	73920	\$7	75042	\$538	75833	\$2745	90183	\$28
73337	\$894	73922	\$23	75045	\$2883	75836	\$3141	90188	\$60
73338	\$816	73923	\$7	75048	\$739	75839	\$71	90202	\$116
73339	\$1030	73924	\$40	75049	\$865	75842	\$106	90212	\$171
73340	\$515	73925	\$7	75050	\$1670	75845	\$528	90250	\$143
73341	\$900	73926	\$23	75051	\$2564	75848	\$633	90251	\$211
73343	\$520	73927	\$7	75150	\$222	75851	\$317	90252	\$182
73344	\$900	73928	\$48	75153	\$112	75854	\$317	90253	\$268
73351	\$894	73929	\$7	75156	\$198	82200	\$19	90254	\$115
73521	\$27	73930	\$48	75200	\$142	82205	\$42	90255	\$169
73523	\$116	73931	\$7	75203	\$214	82210	\$79	90256	\$145
73525	\$78	73932	\$30	75206	\$71	82215	\$117	90257	\$214
73527	\$28	73933	\$7	75400	\$427	82220	\$57	90260	\$918
73529	\$79	73934	\$48	75403	\$491	82221	\$107	90261	\$535
73801	\$19	73935	\$7	75406	\$559	82222	\$158	90262	\$918
73802	\$12	73936	\$28	75409	\$633	82223	\$57	90263	\$535
73803	\$17	73937	\$7	75412	\$354	82224	\$107	90264	\$143
73804	\$22	73938	\$28	75415	\$427	82225	\$158	90265	\$115
73805	\$12	73939	\$7	75600	\$602	82300	\$447	90266	\$574
73806	\$28	73940	\$30	75603	\$707	82306	\$51	90267	\$268
73807	\$19	75001	\$222	75606	\$707	82309	\$61	90268	\$574
73808	\$24	75004	\$112	75609	\$1056	82312	\$86	90269	\$268
73809	\$6	75006	\$198	75612	\$1307	82315	\$114	90271	\$185
73810	\$19	75009	\$177	75615	\$484	82318	\$141	90272	*Derived
73811	\$31	75012	\$280	75618	\$601	82324	\$76	90273	\$265
73828	\$16	75015	\$385	75621	\$601	82327	\$46	90274	*Derived
73829	\$10	75018	\$491	75800	\$214	82332	\$136	90275	\$148
73830	\$14	75021	\$602	75803	\$855	90001	\$110	90276	*Derived

\* 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
90277	\$212	91825	\$160	92495	\$120				
90278	*Derived	91826	\$87	92496	\$156				
90279	\$185	91827	\$96	92497	\$235				
90280	\$265	91828	\$192	92498	\$290				
90281	\$148	91829	\$290	92499	\$385				
90282	\$212	91830	\$435	92500	\$196				
91790	\$42	91831	\$485	92610	\$280				
91792	\$42	91832	\$184	92611	\$99				
91794	\$28	91833	\$98	92612	\$196				
91795	\$42	91834	\$350	92613	\$270				
91797	\$42	91835	\$160	92614	\$345				
91799	\$28	91836	\$87	92617	\$280				
91800	\$84	91837	\$96	92618	\$99				
91801	\$154	91838	\$192	92619	\$196				
91802	\$235	91839	\$290	92620	\$270				
91803	\$84	91840	\$435	92621	\$345				
91804	\$154	91841	\$485	92701	\$356				
91805	\$235	91842	\$185	92712	\$356				
91806	\$60	91843	\$265						
91807	\$116	91844	\$148						
91808	\$171	91845	\$212						
91809	\$84	92115	\$169						
91810	\$154	92121	\$135						
91811	\$235	92127	\$169						
91812	\$84	92133	\$135						
91813	\$154	92435	\$795						
91814	\$235	92436	\$530						
91815	\$60	92437	\$430						
91816	\$116	92455	\$120						
91817	\$171	92456	\$156						
91818	\$185	92457	\$235						
91819	\$265	92458	\$290						
91820	\$148	92459	\$385						
91821	\$212	92460	\$196						
91822	\$184	92475	\$795						
91823	\$98	92476	\$530						
91824	\$350	92477	\$430						

\* 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 \$27.15 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 \$27.15 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 \$27.15 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 \$27.15 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 \$21.70 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 \$21.70 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 \$21.70 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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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 \$21.70 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 \$21.40 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 \$1.65 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 \$21.40 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 \$1.65 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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 263 plus \$1.65 per patient.</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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 265 plus \$1.65 per patient.</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 \$21.40 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 \$1.65 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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 270 plus \$1.65 per patient.</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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 283 plus \$1.65 per patient.</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 \$21.40 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 \$1.65 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>

ITEM NO.	DESCRIPTION
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 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 \$26.65 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 \$26.65 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 \$26.65 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 \$26.65 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>

ITEM NO.	DESCRIPTION
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 \$21.40 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 \$1.65 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 occasion each patient.</p> <p>*Derived fee: The fee for item 737, plus \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 737 plus \$1.65 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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus \$1.65 per patient.</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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus \$1.65 per patient.</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 \$38.50 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 \$38.50 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>



ITEM NO.	DESCRIPTION
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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 812 plus \$1.65 per patient.</p>
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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 867 plus \$1.65 per patient.</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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 873 plus \$1.65 per patient.</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 \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 885 plus \$1.65 per patient.</p>

ITEM NO.	DESCRIPTION
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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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> <p>*Derived fee: The fee for item 2100 plus \$48.15 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus \$3.35 per patient.</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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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 \$48.15 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus \$3.35 per patient.</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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus \$2.10 per patient.</p>

ITEM NO.	DESCRIPTION
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 \$48.15 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus \$3.35 per patient.</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> <p>*Derived fee: The fee for item 2195 plus \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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 \$48.15 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 \$3.35 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>

ITEM NO.	DESCRIPTION
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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2725 plus \$2.10 per patient.</p>
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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5000 plus \$2.10 per patient.</p>

ITEM NO.	DESCRIPTION
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 *Derived fee: The fee for item 5020, plus \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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. *Derived fee: The fee for item 5040, plus \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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. *Derived fee: The fee for item 5060, plus \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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. *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. *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>

ITEM NO.	DESCRIPTION
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 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>

ITEM NO.	DESCRIPTION
13210	<p>Professional attendance on a patient by a specialist practising in his or her specialty if: (a) the attendance is by video conference; and (b) item 13209 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service for which a direction made under subsection 19 (2) of the Act applies.</p> <p>*Derived fee: 50% of the fee for item 13209. 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 \$17.60.</p>
15009	<p>Radiotherapy, superficial attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields.</p> <p>*Derived fee: The fee for item 15006 plus for each field in excess of 1, an amount of \$19.15.</p>
15103	<p>Radiotherapy, deep or orthovoltage each attendance at which fractionated treatment is given at 3 or more treatments per week - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields).</p> <p>*Derived fee: The fee for item 15100 plus for each field in excess of 1, an amount of \$19.40.</p>
15109	<p>Radiotherapy, deep or orthovoltage each attendance at which fractionated treatment is given at 2 treatments per week or less frequently - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields).</p> <p>*Derived fee: The fee for item 15106 plus for each field in excess of 1, an amount of \$23.40.</p>
15115	<p>Radiotherapy, deep or orthovoltage attendance at which a single dose technique is applied - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields).</p> <p>*Derived fee: The fee for item 15112 plus for each field in excess of 1, an amount of \$48.75.</p>
15214	<p>Radiation oncology treatment, using cobalt unit or caesium teletherapy unit - each attendance at which treatment is given 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields).</p> <p>*Derived fee: The fee for item 15211 plus for each field in excess of 1, an amount of \$32.90.</p>
15230	<p>RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung).</p> <p>*Derived fee: The fee for item 15215 plus for each field in excess of 1, an amount of \$39.15.</p>



ITEM NO.	DESCRIPTION
15233	<p>RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (prostate).</p> <p>*Derived fee: The fee for item 15218 plus for each field in excess of 1, an amount of \$39.15.</p>
15236	<p>RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast).</p> <p>*Derived fee: The fee for item 15221 plus for each field in excess of 1, an amount of \$39.15.</p>
15239	<p>RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15230, 15233 or 15236.</p> <p>*Derived fee: The fee for item 15224 plus for each field in excess of 1, an amount of \$39.15.</p>
15242	<p>RADIATION ONCOLOGY TREATMENT, using a single photon energy linear accelerator with or without electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site.</p> <p>*Derived fee: The fee for item 15227 plus for each field in excess of 1, an amount of \$39.15.</p>
15260	<p>RADIATION ORADIATION ONCOLOGY treatment, using a dual photon energy linear accelerator with a minimum higher energy of at least 10mv photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (lung).</p> <p>*Derived fee: The fee for item 15245 plus for each field in excess of 1, an amount of \$39.15.</p>
15263	<p>RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (prostate).</p> <p>*Derived fee: The fee for item 15248 plus for each field in excess of 1, an amount of \$39.15.</p>
15266	<p>RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site (breast).</p> <p>*Derived fee: The fee for item 15251 plus for each field in excess of 1, an amount of \$39.15.</p>
15269	<p>RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to primary site for diseases and conditions not covered by items 15260, 15263 or 15266.</p> <p>*Derived fee: The fee for item 15254 plus for each field in excess of 1, an amount of \$39.15.</p>

ITEM NO.	DESCRIPTION
15272	<p>RADIATION ONCOLOGY TREATMENT, using a dual photon energy linear accelerator with a minimum higher energy of at least 10MV photons, with electron facilities - each attendance at which treatment is given - 2 or more fields up to a maximum of 5 additional fields (rotational therapy being 3 fields) - treatment delivered to secondary site.</p> <p>*Derived fee: The fee for item 15257 plus for each field in excess of 1, an amount of \$39.15.</p>
16399	<p>Professional attendance on a patient by a specialist practising in his or her specialty of obstetrics if: (a) the attendance is by video conference; and (b) item 16401, 16404, 16406, 16500, 16590 or 16591 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service for which a direction made under subsection 19 (2) of the Act applies.</p> <p>*Derived fee: 50% of the fee for item 16401, 16404, 16406, 16500, 16590 or 16591. Benefit: 85% of the derived fee.</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> <p>*Derived fee: The fee for item 18216 plus \$19.60 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 \$29.05 for each additional 15 minutes or part thereof beyond the first hour of attendance by the medical practitioner.</p>

ITEM NO.	DESCRIPTION
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 the fee for the anaesthetic service. That is: (a) an anaesthesia item/s in the range 20100 - 21997 or 22900, plus (b) an item in the range 23010 - 24136, plus (c) where applicable, an item in the range 25000-25015, plus (d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051.</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: An additional amount of 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 in the range 23010 - 24136, plus</p> <p>(c) where applicable, an item in the range 25000-25015, plus</p> <p>(d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051.</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 in the range 23010 - 24136, plus</p> <p>(c) where applicable, an item in the range 25000 - 25015, plus</p> <p>(d) where performed, any associated therapeutic or diagnostic service/s in the range 22001-22051 or 22065-22075.</p>
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 \$102.00 (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>

ITEM NO.	DESCRIPTION
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 \$102.00 (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>
3134	<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 &amp; 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 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>

ITEM NO.	DESCRIPTION
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 \$26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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: Derived Fee: The fee for item 90273, plus 26.75 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 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: Derived Fee: The fee for item 90275, plus \$21.70 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: Derived Fee: The fee for item 90277, plus \$21.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 90277 plus \$1.65 per patient.</p>

# WorkCover

QUEENSLAND

we cover, we care

[worksafe.qld.gov.au](https://worksafe.qld.gov.au)