

Medical Items Table of Costs

Effective 1 December 2021



Medical Items Table of Costs

Rules for use

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

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

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

Multiple operation rule

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

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

The multiple operation rule is applied as follows:

Surgical procedures:

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

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

Orthopaedic/Hand surgery procedures:

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

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

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



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

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

Assistance at operations

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

- Subgroup 14 (Hand Surgery),
- Subgroup 15 (Orthopaedic) and,
- Subgroup 17 (Spinal Surgery) of the Medical Benefits Schedule (MBS).

Therefore, payment for surgical assistants is limited to the MBS item numbers that specify eligibility for a surgical assistant benefit.

Where surgical assistance is provided at two or more operations performed on a patient on the one occasion the multiple operation rule is applied to determine the surgeon's fee.

For further details refer to Section T9 'Assistance at Operations' of the MBS.



Perioperative Nurse Surgical Assistants (PNSA)

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

Surgery approval and invoices

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

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

Aftercare

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

Other services

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

Evidence based recommendations

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

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

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

Further information

You can access more information by visiting www.worksafe.qld.gov.au/service-providers or contacting WorkCover on free call 1300 362 128.



Medical Fees

ITEM	MEDICAL	ITEM	MEDICAL	ITEM	MEDICAL	ITEM	MEDICAL	ITEM	MEDICAL
NO.	FEE	NO.	FEE	NO.	FEE	NO.	FEE	NO.	FEE
3	\$43 * dariyad	131	\$163	221	\$190	277	\$116	350	\$395
4	* derived	132	\$615	222	\$200	279	\$116	352	\$200
23	\$86	133	\$310	223	\$243	281	\$147	353	\$116
24	* derived	141	\$810	224	\$96	282	\$216	355	\$230
36	\$158	143	\$540	225	\$222	283	\$150	356	\$340
37	* derived	145	\$975	226	\$307	 285	* derived	357	\$520
44	\$240	147	\$655	227	\$433	286	\$214	358	\$570
47	* derived	149	* derived	228	\$342	 287	* derived	359	\$620
52	\$43	160	\$365	229	\$233	288	* derived	361	\$500
53	\$86	161	\$595	230	\$184	 289	\$615	364	\$98
54	\$158	162	\$805	231	\$114	 291	\$810	366	\$196
57	\$240	163	\$1,000	232	\$114	293	\$540	367	\$295
58	* derived	164	\$1,185	233	\$116	296	\$440	369	\$445
59	* derived	170	\$315	235	\$114	 297	\$440	370	\$490
60	* derived	171	\$330	236	\$195	299	\$520	371	\$150
65	* derived	172	\$410	237	\$325	300	\$98	372	\$214
99	* derived	173	\$43	238	\$84	302	\$196	384	\$131
104	\$188	177	\$117	239	\$144	304	\$295	385	\$355
105	\$100	179	\$28	240	\$239	306	\$445	386	\$164
106	\$188	181	* derived	243	\$131	308	\$490	387	\$425
107	\$250	185	\$61	244	\$61	319	\$445	388	\$225
108	\$166	187	* derived	259	\$60	320	\$98	389	* derived
109	\$290	189	\$117	260	* derived	322	\$196	410	\$43
110	\$355	191	* derived	261	\$116	324	\$295	411	\$86
111	\$100	193	\$86	262	* derived	326	\$445	412	\$158
112	* derived	195	* derived	263	\$170	328	\$495	413	\$240
113	\$131	197	\$158	264	* derived	330	\$162	414	* derived
114	\$232	199	\$240	265	\$60	332	\$260	415	* derived
115	\$100	203	\$173	266	* derived	334	\$355	416	* derived
116	\$164	206	* derived	268	\$116	336	\$515	417	* derived
117	\$154	214	\$357	269	* derived	338	\$550	585	\$262
119	\$88	215	\$595	270	\$170	342	\$122	588	\$262
120	\$88	218	\$833	271	* derived	344	\$158	591	\$197
122	\$425	219	\$1,072	272	\$116	346	\$235	594	\$85
128	\$225	220	\$1,191	276	\$170	348	\$295	599	\$505

^{*} 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
600	\$505	855	\$275		2463	\$76	2949	\$450	5014	\$450
699	\$148	857	\$415		2464	\$147	2954	\$600	5016	\$600
721	\$285	858	\$555		2465	\$216	2958	\$184	5019	\$695
723	\$245	861	\$275		2471	\$22	2972	\$295	5020	\$128
729	\$114	864	\$415	•	2472	\$42	2974	\$400	5021	\$136
731	\$114	866	\$555	•	2475	\$75	2978	\$300	5023	* derived
732	\$144	867	\$80		2478	\$121	2984	\$450	5027	\$225
733	\$47	868	* derived		2480	\$28	2988	\$600	5030	\$355
735	\$280	871	\$164	•	2481	\$61	2992	\$184	5032	\$450
737	\$79	872	\$77		2482	\$117	2996	\$295	5033	\$600
739	\$395	873	\$156		2483	\$173	3000	\$400	5036	\$695
741	\$135	876	* derived		2631	* derived	3003	\$232	5039	\$325
743	\$505	880	\$97		2633	* derived	3005	\$355	5040	\$235
745	\$190	885	\$230	•	2635	* derived	3010	\$164	5041	\$615
747	\$170	891	* derived		2700	\$145	3014	\$88	5042	\$325
750	\$225	894	\$71		2701	\$213	3015	* derived	5043	* derived
758	\$280	896	\$138		2712	\$235	3018	\$425	5044	\$615
761	* derived	898	\$203		2713	\$196	3023	\$225	5060	\$360
763	* derived	900	\$410		2715	\$184	3028	\$163	5063	* derived
766	* derived	941	\$176		2717	\$350	3032	\$300	5200	\$64
769	* derived	942	\$252		2721	\$187	3040	\$450	5203	\$128
788	* derived	2100	\$46		2723	* derived	3044	\$600	5207	\$235
789	* derived	2121	\$89		2725	\$267	3051	\$184	5208	\$360
812	\$37	2122	* derived		2727	* derived	3055	\$295	5220	* derived
820	\$300	2125	* derived		2729	\$187	3062	\$400	5223	* derived
822	\$450	2126	\$101		2731	\$267	3069	\$300	5227	* derived
823	\$600	2137	* derived		2733	\$220	3074	\$450	5228	* derived
825	\$184	2138	* derived		2735	\$315	3078	\$600	6004	\$199
826	\$295	2143	\$195		2799	\$232	3083	\$184	6007	\$285
827	* derived	2147	* derived		2801	\$355	3088	\$295	6009	\$100
828	\$400	2150	\$172		2806	\$164	3093	\$400	6011	\$200
830	\$300	2179	* derived		2814	\$88	5000	\$64	6013	\$280
832	\$450	2195	\$287		2820	* derived	5001	\$136	6015	\$355
834	\$600	2196	\$254		2824	\$425	5003	* derived	6016	* derived
835	\$184	2199	* derived		2832	\$225	5004	\$225	6018	\$309
837	\$295	2220	* derived		2840	\$163	5011	\$225	6019	\$154
838	\$400	2461	\$35	-	2946	\$300	 5012	\$355	6023	\$540

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ITEM NO.	MEDICAL FEE								
6024	\$270	10806	\$300	11012	\$300	11336	\$102	11731	\$81
6025	\$232	10807	\$300	11015	\$410	11339	\$102	11800	\$525
6026	* derived	10808	\$300	11018	\$595	11503	\$395	11801	\$890
6028	\$101	10809	\$300	11021	\$410	11505	\$99	11810	\$440
6029	\$87	10816	\$300	11024	\$270	11506	\$50	11820	\$2,836
6031	\$154	10905	\$135	11027	\$400	11507	\$260	11830	\$555
6032	\$232	10907	\$67	11200	\$96	11508	\$755	11833	\$620
6034	\$309	10910	\$135	11204	\$220	11512	\$148	11900	\$73
6035	\$70	10911	\$135	11205	\$220	11600	\$146	11903	\$290
6037	\$124	10912	\$135	11210	\$220	11602	\$108	11906	\$290
6038	\$185	10913	\$135	11211	\$220	11604	\$108	11909	\$430
6042	\$247	10914	\$135	11215	\$385	11605	\$108	11912	\$430
6051	\$309	10915	\$135	11218	\$485	11607	\$238	11915	\$430
6052	\$154	10916	\$67	11219	\$142	11610	\$108	11917	\$1,110
6057	\$540	10918	\$67	11220	\$142	11611	\$108	11919	\$1,110
6058	\$270	10921	\$334	11221	\$275	11612	\$200	11921	\$230
6059	\$232	10922	\$334	11224	\$150	11614	\$108	12000	\$110
6060	* derived	10923	\$334	11235	\$385	11615	\$162	12001	\$110
6062	\$375	10924	\$422	11237	\$220	11627	\$580	12002	\$110
6063	\$227	10925	\$334	11240	\$220	11704	\$118	12004	\$168
6064	\$87	10926	\$334	11241	\$325	11705	\$59	12005	\$183
6065	\$154	10927	\$422	11242	\$220	11707	\$59	12012	\$48
6067	\$232	10928	\$334	11243	\$220	11713	\$235	12017	\$210
6068	\$309	10929	\$422	11244	\$215	11714	\$91	12021	\$340
6071	\$70	10930	\$334	11300	\$470	11716	\$445	12022	\$407
6072	\$124	10940	\$128	11303	\$470	11717	\$235	12024	\$465
6074	\$185	10941	\$77	11304	\$760	11719	\$225	12200	\$82
6075	\$247	10942	\$67	11306	\$52	11720	\$225	12201	\$3,430
6082	\$103	10944	\$145	11309	\$62	11721	\$235	12203	\$1,370
6084	\$77	10945	\$67	11312	\$90	11723	\$122	12204	\$1,370
10660	\$89	10946	\$135	11315	\$118	11724	\$495	12205	\$1,370
10661	\$71	10947	\$67	11318	\$148	11725	\$640	12207	\$1,370
10801	\$300	10948	\$135	11324	\$90	11726	\$320	12208	\$1,370
10802	\$300	11000	\$390	11327	\$56	11727	\$325	12213	\$1,475
10803	\$300	11003	\$785	11330	\$45	11728	\$81	12215	\$1,635
10804	\$300	11004	\$1,735	11332	\$285	11729	\$410	12217	\$1,475
10805	\$300	11005	\$1,735	11333	\$102	 11730	\$410	12250	\$780

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ITEM NO.	MEDICAL FEE								
12254	\$2,150	13312	\$96	1410	\$710	14278	\$680	15328	\$2,100
12261	\$2,255	13318	\$630	1410	5 \$710	14280	\$680	15331	\$1,885
12268	\$2,420	13319	\$565	1411	\$1,190	14283	\$680	15332	\$2,005
12306	\$275	13400	\$245	14118	\$1,510	14285	\$680	15335	\$1,705
12312	\$275	13506	\$445	1412	4 \$710	14288	\$680	15336	\$1,825
12315	\$275	13700	\$800	1420	1 \$679	15000	\$114	15338	\$2,105
12320	\$275	13703	\$290	14202	2 \$344	15003	* derived	15339	\$192
12321	\$275	13706	\$200	1420	3 \$128	15006	\$310	15342	\$480
12322	\$275	13750	\$330	1420	5 \$81	15012	\$168	15345	\$1,285
12325	\$82	13755	\$330	14209	9 \$225	15100	\$154	15348	\$146
12326	\$82	13757	\$178	14212	2 \$515	15106	\$180	15351	\$385
12500	\$520	13760	\$1,850	1421	5 \$514	15112	\$400	15354	\$450
12524	\$415	13815	\$280	1421	7 \$441	15211	\$130	15357	\$128
12527	\$275	13818	\$580	14218	3 \$255	15215	\$172	15500	\$545
12533	\$245	13830	\$180	14219	9 \$514	15218	\$172	15503	\$745
13015	\$731	13832	\$2,345	14220	\$441	15221	\$172	15506	\$1,175
13020	\$743	13834	\$1,305	1422	1 \$136	15224	\$172	15509	\$470
13025	\$332	13835	\$300	1422	4 \$164	15227	\$172	15512	\$400
13030	\$469	13837	\$1,305	1422	7 \$255	15245	\$225	15513	\$740
13100	\$435	13838	\$300	1423	\$940	15248	\$225	15515	\$700
13103	\$230	13839	\$78	1423	7 \$1,720	15251	\$225	15518	\$490
13104	\$430	13840	\$1,570	1424	\$300	15254	\$225	15521	\$970
13106	\$285	13842	\$220	1424	7 \$5,309	15257	\$225	15524	\$1,925
13109	\$690	13848	\$445	14249	\$5,309	15275	\$315	15527	\$470
13110	\$690	13851	\$1,305	1425	5 \$370	15303	\$905	15530	\$770
13200	\$5,735	13854	\$300	1425	\$660	15304	\$905	15533	\$1,515
13201	\$5,365	13857	\$370	1425	7 \$1,265	15307	\$1,705	15536	\$970
13202	\$860	13870	\$950	1425	3 \$370	15308	\$1,825	15539	\$1,925
13203	\$1,435	13873	\$705	14259	\$660	15311	\$845	15550	\$1,135
13206	\$2,460	13876	\$200	14260	\$1,265	15312	\$845	15553	\$1,225
13209	\$245	13881	\$385	1426	3 \$160	15315	\$1,645	15555	\$1,285
13290	\$585	13882	\$300	1426	4 \$320	15316	\$1,755	15556	\$1,235
13292	\$1,170	13885	\$435	1426	\$160	15319	\$1,025	15559	\$1,495
13300	\$152	13888	\$230	1426	5 \$320	15320	\$1,025	15562	\$2,080
13303	\$225	13899	\$615	1427	\$425	15323	\$1,825	15565	\$11,055
13306	\$1,100	13950	\$265	1427	2 \$425	15324	\$1,940	15600	\$4,725
13309	\$855	14050	\$146	1427	7 \$680	15327	\$1,985	15700	\$158

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ITEM NO.	MEDICAL FEE								
15705	\$260	17650	\$546	18280	\$910	20164	\$364	20474	\$1,183
15710	\$260	17655	\$728	18282	\$728	20170	\$546	20475	\$910
15715	\$265	17680	\$364	18284	\$728	20172	\$637	20500	\$1,365
15800	\$330	17690	\$182	18286	\$728	20174	\$819	20520	\$546
15850	\$570	18213	\$364	18288	\$910	20176	\$910	20522	\$364
15900	\$710	18216	\$728	18290	\$1,820	20190	\$455	20524	\$364
16003	\$1,670	18219	* derived	18292	\$910	20192	\$910	20526	\$910
16006	\$1,280	18222	\$273	18294	\$1,820	20210	\$1,365	20528	\$728
16009	\$875	18225	\$364	18296	\$1,365	20212	\$455	20540	\$1,183
16012	\$760	18226	\$1,365	18297	\$273	20214	\$819	20542	\$1,365
16015	\$7,635	18227	* derived	18298	\$1,820	20216	\$1,820	20546	\$1,365
16018	\$4,580	18228	\$455	18350	\$330	20220	\$910	20548	\$1,365
16401	\$245	18230	\$1,820	18351	\$358	20222	\$546	20560	\$1,820
16408	\$182	18232	\$728	18353	\$660	20225	\$1,092	20600	\$910
16500	\$116	18233	\$728	18354	\$330	20230	\$1,092	20604	\$1,183
16501	\$470	18234	\$910	18360	\$330	20300	\$455	20620	\$910
16502	\$116	18236	\$455	18365	\$330	20305	\$1,365	20622	\$1,183
16505	\$116	18238	\$273	18366	\$430	20320	\$546	20630	\$728
16508	\$116	18240	\$455	18368	\$715	20321	\$910	20632	\$637
16509	\$116	18242	\$273	18375	\$615	20330	\$728	20634	\$910
16511	\$770	18244	\$728	18377	\$358	20350	\$910	20670	\$1,183
16512	\$220	18248	\$637	18379	\$615	20352	\$455	20680	\$273
16514	\$118	18250	\$455	20100	\$455	20355	\$1,092	20690	\$455
16515	\$3,320	18252	\$728	20102	\$546	20400	\$273	20700	\$273
16518	\$1,660	18254	\$728	20104	\$364	20401	\$364	20702	\$364
16519	\$3,320	18256	\$455	20120	\$455	20402	\$455	20703	\$364
16520	\$3,320	18258	\$455	20124	\$364	20403	\$455	20704	\$910
16522	\$4,690	18260	\$637	20140	\$455	20404	\$546	20706	\$637
16527	\$3,320	18262	\$455	20142	\$455	20405	\$728	20730	\$455
16528	\$3,320	18264	\$728	20143	\$546	20406	\$1,183	20740	\$455
17609	* derived	18266	\$455	20144	\$637	20410	\$364	20745	\$637
17610	\$182	18268	\$637	20145	\$637	20420	\$455	20750	\$455
17615	\$364	18270	\$637	20146	\$455	20440	\$364	20752	\$546
17620	\$546	18272	\$455	20147	\$546	20450	\$455	20754	\$637
17625	\$728	18274	\$637	20148	\$364	20452	\$546	20756	\$819
17640	\$182	18276	\$910	20160	\$546	20470	\$546	20770	\$1,365
17645	\$364	18278	\$637	20162	\$637	20472	\$910	20790	\$728

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ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE		ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
20791	\$910	20900	\$273	21130	\$273		21430	\$364	21682	\$364
20792	\$1,183	20902	\$364	21140	\$1,365		21432	\$455	21685	\$910
20793	\$1,365	20904	\$637	21150	\$910		21440	\$728	21700	\$273
20794	\$1,092	20905	\$910	21155	\$910		21445	\$910	21710	\$364
20798	\$910	20906	\$364	21160	\$364		21460	\$273	21712	\$455
20799	\$546	20910	\$364	21170	\$728		21461	\$364	21714	\$455
20800	\$273	20911	\$455	21195	\$273		21462	\$273	21716	\$455
20802	\$455	20912	\$455	21199	\$364		21464	\$364	21730	\$273
20803	\$364	20914	\$637	21200	\$364		21472	\$455	21732	\$364
20804	\$910	20916	\$637	21202	\$364		21474	\$455	21740	\$455
20806	\$637	20920	\$364	21210	\$546		21480	\$364	21756	\$546
20810	\$364	20924	\$364	21212	\$910		21482	\$455	21760	\$637
20815	\$546	20926	\$364	21214	\$910		21484	\$455	21770	\$728
20820	\$455	20928	\$546	21216	\$1,274		21486	\$637	21772	\$546
20830	\$364	20930	\$364	21220	\$364		21490	\$273	21780	\$364
20832	\$546	20932	\$364	21230	\$546		21500	\$728	21785	\$910
20840	\$546	20934	\$546	21232	\$455		21502	\$546	21790	\$1,365
20841	\$728	20936	\$728	21234	\$728		21520	\$364	21800	\$273
20842	\$364	20938	\$364	21260	\$364		21522	\$455	21810	\$364
20844	\$910	20940	\$364	21270	\$728		21530	\$1,365	21820	\$273
20845	\$910	20942	\$455	21272	\$364		21532	\$728	21830	\$364
20846	\$910	20943	\$364	21274	\$546		21535	\$910	21832	\$637
20847	\$910	20944	\$546	21275	\$910		21600	\$273	21834	\$364
20848	\$910	20946	\$728	21280	\$1,365		21610	\$455	21840	\$728
20850	\$1,092	20948	\$364	21300	\$273		21620	\$364	21842	\$546
20855	\$1,365	20950	\$455	21321	\$364		21622	\$455	21850	\$364
20860	\$546	20952	\$364	21340	\$364		21630	\$455	21860	\$273
20862	\$637	20954	\$910	21360	\$455		21632	\$546	21865	\$910
20863	\$910	20956	\$364	21380	\$273		21634	\$819	21870	\$1,365
20864	\$910	20958	\$455	21382	\$364		21636	\$1,365	21872	\$728
20866	\$910	20960	\$637	21390	\$273		21638	\$910	21878	\$273
20867	\$910	21100	\$273	21392	\$364		21650	\$728	21879	\$455
20868	\$910	21110	\$455	21400	\$364		21652	\$910	21880	\$637
20880	\$1,365	21112	\$364	21402	\$637		21654	\$728	21881	\$819
20882	\$910	21114	\$455	21403	\$910		21656	\$910	21882	\$1,001
20884	\$455	21116	\$546	21404	\$455		21670	\$364	21883	\$1,183
20886	\$546	21120	\$546	21420	\$273	-	21680	\$273	21884	\$1,365

^{*} 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
21885	\$1,547	22007	\$364	23170			23540	\$5,278	23910	\$8,645
21886	\$1,729	22008	\$364	23180		-	23550	\$5,369	 23920	\$8,736
21887	\$1,911	22012	\$273	23190			23560	\$5,460	23930	\$8,827
21900	\$273	22014	\$273	23200	\$2,184	-	23570	\$5,551	23940	\$8,918
21906	\$455	22015	\$546	23210	\$2,275		23580	\$5,642	 23950	\$9,009
21908	\$546	22020	\$364	23220	\$2,366		23590	\$5,733	23960	\$9,100
21910	\$819	22025	\$364	23230	\$2,457		23600	\$5,824	23970	\$9,191
21912	\$455	22031	\$455	23240	\$2,548		23610	\$5,915	23980	\$9,282
21914	\$546	22036	\$273	23250	\$2,639		23620	\$6,006	23990	\$9,373
21915	\$455	22041	\$182	23260	\$2,730		23630	\$6,097	24100	\$9,464
21916	\$455	22042	\$91	23270	\$2,821		23640	\$6,188	24101	\$9,555
21918	\$455	22051	\$819	23280	\$2,912		23650	\$6,279	24102	\$9,646
21922	\$546	22055	\$1,092	23290	\$3,003		23660	\$6,370	24103	\$9,737
21925	\$364	22065	\$455	23300	\$3,094		23670	\$6,461	24104	\$9,828
21926	\$364	22075	\$1,365	23310	\$3,185		23680	\$6,552	24105	\$9,919
21930	\$546	22900	\$546	23320	\$3,276		23690	\$6,643	24106	\$10,010
21935	\$455	22905	\$546	23330	\$3,367		23700	\$6,734	24107	\$10,101
21936	\$455	23010	\$91	23340	\$3,458		23710	\$6,825	24108	\$10,192
21939	\$273	23025	\$182	23350	\$3,549		23720	\$6,916	24109	\$10,283
21941	\$637	23035	\$273	23360	\$3,640		23730	\$7,007	24110	\$10,374
21942	\$910	23045	\$364	23370	\$3,731		23740	\$7,098	24111	\$10,465
21943	\$455	23055	\$455	23380	\$3,822		23750	\$7,189	24112	\$10,556
21945	\$455	23065	\$546	23390	\$3,913		23760	\$7,280	24113	\$10,647
21949	\$455	23075	\$637	23400	\$4,004		23770	\$7,371	24114	\$10,738
21952	\$364	23085	\$728	23410	\$4,095		23780	\$7,462	24115	\$10,829
21955	\$455	23091	\$819	23420	\$4,186		23790	\$7,553	24116	\$10,920
21959	\$455	23101	\$910	23430	\$4,277		23800	\$7,644	24117	\$11,011
21962	\$455	23111	\$1,001	23440	\$4,368		23810	\$7,735	24118	\$11,102
21965	\$455	23112	\$1,092	23450	\$4,459		23820	\$7,826	24119	\$11,193
21969	\$728	23113	\$1,183	23460	\$4,550		23830	\$7,917	24120	\$11,284
21970	\$1,365	23114	\$1,274	23470	\$4,641		23840	\$8,008	24121	\$11,375
21973	\$455	23115	\$1,365	23480	\$4,732		23850	\$8,099	24122	\$11,466
21976	\$455	23116	\$1,456	23490	\$4,823		23860	\$8,190	24123	\$11,557
21980	\$455	23117	\$1,547	23500	\$4,914		23870	\$8,281	24124	\$11,648
21990	\$273	23118	\$1,638	23510	\$5,005		23880	\$8,372	24125	\$11,739
21997	\$364	23119	\$1,729	23520	\$5,096		23890	\$8,463	24126	\$11,830
22002	\$364	23121	\$1,820	23530	\$5,187		23900	\$8,554	24127	\$11,921

^{*} 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
24128	\$12,012	30055	\$220	30226	\$440		30315	\$3,615	30428	\$4,830
24129	\$12,103	30058	\$420	30229	\$790		30317	\$3,950	30430	\$6,725
24130	\$12,194	30061	\$64	30232	\$650		30318	\$3,615	30431	\$1,605
24131	\$12,285	30062	\$174	30235	\$870		30320	\$3,950	30433	\$2,100
24132	\$12,376	30064	\$290	30238	\$440		30323	\$3,950	30439	\$540
24133	\$12,467	30068	\$805	30241	\$940		30324	\$3,950	30440	\$1,530
24134	\$12,558	30071	\$200	30244	\$940		30329	\$715	30441	\$395
24135	\$12,649	30072	\$200	30246	\$2,065		30330	\$2,080	30442	\$540
24136	\$12,740	30075	\$510	30247	\$2,210		30332	\$775	30443	\$2,140
25000	\$91	30078	\$132	30250	\$3,615		30335	\$2,060	30445	\$2,365
25005	\$182	30081	\$290	30251	\$5,310		30336	\$2,475	30448	\$2,815
25010	\$273	30084	\$160	30253	\$2,410		30382	\$3,780	30449	\$3,130
25014	\$91	30087	\$80	30255	\$3,205		30384	\$3,215	30450	\$1,520
25020	\$182	30090	\$350	30256	\$1,015		30385	\$1,640	30451	\$785
25025	* derived	30093	\$355	30259	\$575		30387	\$1,870	30452	\$1,090
25030	* derived	30094	\$555	30262	\$174		30388	\$4,620	30454	\$2,680
25050	* derived	30097	\$270	30266	\$435		30390	\$640	30455	\$2,970
25200	* derived	30099	\$240	30269	\$440		30392	\$1,690	30457	\$3,990
25205	* derived	30103	\$540	30272	\$870		30396	\$2,940	30458	\$2,970
30001	* derived	30104	\$325	30275	\$5,090		30397	\$670	30460	\$2,500
30003	\$77	30107	\$575	30278	\$134		30399	\$925	30461	\$4,355
30006	\$134	30176	\$2,685	30281	\$340		30400	\$1,830	30463	\$5,250
30010	\$220	30180	\$360	30283	\$575		30406	\$160	30464	\$6,305
30014	\$460	30183	\$725	30286	\$1,165		30408	\$1,135	30469	\$4,980
30017	\$940	30187	\$655	30289	\$1,475		30409	\$570	30472	\$2,690
30020	\$1,860	30189	\$375	30293	\$1,300		30411	\$255	30473	\$645
30023	\$940	30190	\$1,010	30294	\$5,090		30412	\$152	30475	\$1,040
30024	\$940	30192	\$100	30296	\$2,960		30414	\$1,995	30478	\$945
30026	\$160	30196	\$320	30297	\$2,960		30415	\$3,990	30479	\$1,390
30029	\$240	30202	\$120	30299	\$1,855		30416	\$2,170	30481	\$1,030
30032	\$215	30207	\$110	30300	\$2,225		30417	\$3,255	30482	\$730
30035	\$320	30210	\$435	30302	\$1,485		30418	\$4,620	30483	\$515
30038	\$240	30216	\$67	30303	\$1,780	ľ	30419	\$2,360	30484	\$1,050
30042	\$535	30219	\$67	30306	\$2,370	ľ	30421	\$5,780	30485	\$1,640
30045	\$320	30223	\$435	30310	\$2,310	ľ	30422	\$1,955	30488	\$260
30049	\$550	30224	\$700	30311	\$1,786		30425	\$3,780	30490	\$1,515
30052	\$745	30225	\$785	30314	\$1,675		30427	\$4,515	30491	\$1,595

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE								
30492	\$2,345	30635	\$870	30754	\$4,937	31358	\$815	31472	\$3,475
30494	\$1,220	30640	\$2,645	30755	\$3,703	31359	\$995	31500	\$620
30495	\$2,345	30641	\$1,085	30756	\$2,500	31360	\$505	31503	\$825
30515	\$2,040	30642	\$2,330	30760	\$1,687	31361	\$560	31506	\$930
30517	\$2,585	30644	\$1,605	30761	\$2,177	31362	\$405	31509	\$775
30518	\$2,880	30648	\$1,333	30762	\$4,770	31363	\$735	31512	\$1,450
30520	\$1,955	30651	\$1,495	30763	\$1,937	31364	\$505	31515	\$970
30521	\$3,615	30652	\$1,495	30770	\$2,399	31365	\$480	31516	\$1,940
30526	\$6,240	30655	\$2,625	30771	\$4,839	31366	\$285	31519	\$1,530
30529	\$3,780	30657	\$3,738	30780	\$4,030	31367	\$645	31524	\$2,165
30530	\$2,270	30663	\$420	30790	\$2,012	31368	\$380	31525	\$1,492
30532	\$2,635	30666	\$134	30791	\$1,250	31369	\$740	31530	\$1,350
30533	\$3,125	30672	\$1,140	30792	\$3,426	31370	\$435	31533	\$330
30559	\$2,460	30676	\$1,110	30800	\$2,066	31371	\$1,080	31536	\$555
30560	\$2,730	30679	\$260	30810	\$3,291	31372	\$930	31548	\$400
30562	\$1,725	30680	\$3,460	30820	\$528	31373	\$1,075	31551	\$485
30563	\$1,725	30682	\$3,460	31000	\$1,565	31374	\$845	31554	\$1,030
30565	\$2,520	30684	\$4,260	31001	\$1,955	31375	\$915	31557	\$775
30574	\$360	30686	\$4,260	31002	\$2,350	31376	\$1,060	31560	\$825
30577	\$3,150	30687	\$1,390	31003	\$1,666	31400	\$800	31563	\$485
30583	\$3,450	30688	\$1,080	31004	\$2,083	31403	\$925	31566	\$365
30584	\$5,105	30690	\$1,665	31005	\$2,500	31406	\$1,545	31569	\$2,437
30589	\$3,615	30692	\$1,080	31206	\$290	31409	\$4,670	31572	\$2,999
30590	\$3,990	30694	\$1,665	31211	\$370	31412	\$5,310	31575	\$2,437
30593	\$5,460	30720	\$1,278	31216	\$435	31423	\$1,205	31578	\$2,437
30594	\$6,305	30721	\$1,386	31220	\$555	31426	\$2,405	31581	\$2,999
30596	\$2,605	30722	\$1,495	31221	\$555	31429	\$3,750	31584	\$4,415
30599	\$3,780	30723	\$1,495	31225	\$985	31432	\$4,010	31585	\$2,387
30600	\$2,275	30724	\$1,502	31245	\$1,110	31435	\$2,950	31587	\$281
30601	\$2,770	30725	\$2,663	31250	\$1,110	31438	\$4,315	31590	\$750
30606	\$3,215	30730	\$2,777	31340	* derived	31454	\$1,675	32000	\$2,845
30615	\$1,605	30731	\$2,083	31345	\$610	31456	\$730	32003	\$2,970
30621	\$1,085	30732	\$11,403	31346	\$610	31458	\$875	32004	\$3,255
30628	\$94	30750	\$5,916	31350	\$1,255	31460	\$1,060	32005	\$3,690
30629	\$1,605	30751	\$5,916	31355	\$2,075	31462	\$1,550	32006	\$3,255
30630	\$1,440	30752	\$4,437	31356	\$665	31466	\$3,885	32009	\$3,755
30631	\$620	30753	\$4,937	31357	\$330	31468	\$4,270	32012	\$4,150

^{*} 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
32015	\$4,895	32111	\$1,745	32212	\$385		32721	\$5,700	33145	\$7,685
32013	\$4,330	32111	\$2,150	32212	\$1,920		32724	\$6,490	33148	\$9,570
32021	\$1,545	32112	\$475	32213	\$970	-	32730	\$4,915	33151	\$9,100
32023	\$1,595	32115	\$360	32217	\$365	-	32733	\$5,700	33154	\$6,740
32024	\$3,755	32117	\$2,760	32216	\$1,720		32736	\$1,260	33157	\$7,525
32025	\$5,085	32120	\$705	32217	\$455	-	32739	\$3,910	33160	\$7,920
32026	\$5,475	32123	\$920	32218	\$455		32742	\$4,495	33163	\$6,350
32028	\$5,865	32126	\$1,505	32220	\$2,560		32745	\$5,120	33166	\$6,350
32029	\$1,175	32129	\$1,745	32221	\$2,560	-	32748	\$5,540	33169	\$4,960
32030	\$2,925	32123	\$1,485	32222	\$1,015		32751	\$3,595	33172	\$3,860
32033	\$4,290	32132	\$124	32223	\$1,015		32754	\$4,495	33175	\$3,585
32036	\$5,270	32135	\$184	32224	\$1,015		32757	\$1,260	33178	\$4,555
32039	\$4,150	32138	\$1,115	32225	\$1,015		32760	\$1,260	33181	\$5,570
32042	\$3,565	32139	\$1,115	32226	\$1,015		32763	\$3,595	33500	\$3,085
32045	\$1,335	32142	\$192	32227	\$1,435		32766	\$4,075	33506	\$3,825
32046	\$2,125	32145	\$385	32228	\$1,015		32769	\$825	33509	\$4,140
32047	\$2,475	32147	\$124	32229	\$715	-	33050	\$4,425	33512	\$4,600
32051	\$6,370	32150	\$790	32230	\$1,917		33055	\$3,550	33515	\$5,060
32054	\$5,845	32153	\$184	32500	\$325		33070	\$2,560	33518	\$3,825
32057	\$1,545	32156	\$465	32504	\$805		33075	\$3,255	33521	\$4,140
32060	\$6,370	32159	\$1,145	32507	\$1,605		33080	\$3,975	33524	\$4,915
32063	\$5,845	32162	\$1,335	32508	\$1,605		33100	\$4,345	33527	\$5,700
32066	\$1,545	32165	\$1,745	32511	\$2,390		33103	\$6,095	33530	\$4,915
32069	\$4,715	32166	\$585	32514	\$2,790		33109	\$7,385	33533	\$5,545
32072	\$158	32168	\$375	32517	\$3,595		33112	\$6,380	33536	\$4,080
32075	\$285	32171	\$245	32520	\$1,605		33115	\$4,325	33539	\$2,915
32084	\$340	32174	\$245	32522	\$2,390		33116	\$4,325	33542	\$4,175
32094	\$1,565	32175	\$460	32523	\$1,605		33118	\$4,805	33545	\$840
32095	\$365	32177	\$475	32526	\$2,390		33119	\$4,805	33548	\$1,685
32096	\$705	32180	\$700	32700	\$4,345		33121	\$5,285	33551	\$835
32099	\$950	32183	\$1,565	32703	\$3,715		33124	\$3,655	33554	\$795
32102	\$1,795	32186	\$1,565	32708	\$4,390		33127	\$4,810	33800	\$3,560
32103	\$2,150	32200	\$840	32710	\$4,880		33130	\$4,180	33803	\$3,385
32104	\$2,760	32203	\$1,800	32711	\$5,370		33133	\$3,130	33806	\$2,460
32105	\$1,335	32206	\$1,625	32712	\$3,810		33136	\$7,920	33810	\$1,725
32106	\$3,755	32209	\$2,610	32715	\$3,810		33139	\$4,810	33811	\$5,165
32108	\$2,760	32210	\$725	32718	\$3,595		33142	\$4,495	33812	\$2,815

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE								
33815	\$2,425	34175	\$3,600	35300	\$1,545	35530	\$745	35614	\$225
33818	\$2,830	34500	\$945	35303	\$1,980	35536	\$1,050	35615	\$162
33821	\$3,235	34503	\$1,245	35306	\$1,990	35539	\$825	35616	\$1,380
33824	\$3,085	34506	\$630	35307	\$3,525	 35542	\$975	35618	\$665
33827	\$3,385	34509	\$2,945	35309	\$2,280	35545	\$490	35620	\$170
33830	\$4,150	34512	\$3,260	35312	\$2,590	35548	\$2,525	35622	\$1,875
33833	\$4,025	34515	\$2,315	35315	\$2,590	35551	\$2,455	35623	\$2,405
33836	\$4,810	34518	\$3,885	35317	\$1,075	35552	\$3,675	35626	\$250
33839	\$5,595	34521	\$2,300	35319	\$1,930	35554	\$122	35627	\$340
33842	\$2,770	34524	\$1,260	35320	\$2,590	35557	\$610	35630	\$560
33845	\$1,940	34527	\$1,605	35321	\$2,430	35560	\$2,225	35633	\$690
33848	\$1,940	34528	\$800	35324	\$915	35561	\$4,185	35634	\$2,255
34100	\$2,145	34530	\$595	35327	\$1,190	35562	\$3,435	35635	\$1,210
34103	\$1,265	34533	\$3,740	35330	\$2,315	35564	\$1,575	35636	\$1,380
34106	\$880	34538	\$830	35331	\$1,765	35565	\$2,050	35637	\$1,225
34109	\$945	34539	\$590	35360	\$2,470	35566	\$1,125	35638	\$2,250
34112	\$2,595	34800	\$2,460	35361	\$2,115	35568	\$1,860	35640	\$565
34115	\$2,910	34803	\$5,440	35362	\$1,765	35569	\$475	35641	\$4,525
34118	\$4,180	34806	\$2,915	35363	\$1,415	35570	\$1,650	35643	\$660
34121	\$3,350	34809	\$2,915	35401	\$1,959	35571	\$1,650	35644	\$625
34124	\$3,665	34812	\$3,545	35404	\$1,070	35572	\$390	35645	\$975
34127	\$4,810	34815	\$2,915	35406	\$2,510	35573	\$2,475	35646	\$620
34130	\$1,510	34818	\$3,235	35408	\$1,750	35577	\$2,010	35647	\$620
34133	\$1,685	34821	\$4,385	35410	\$2,520	35578	\$2,010	35648	\$975
34136	\$2,700	34824	\$1,510	35412	\$8,845	35581	\$1,650	35649	\$1,355
34139	\$2,700	34827	\$1,825	35414	\$12,635	35582	\$2,475	35653	\$2,000
34142	\$3,085	34830	\$2,145	35500	\$225	35585	\$4,390	35657	\$2,000
34145	\$2,420	34833	\$2,770	35502	\$225	35595	\$3,040	35658	\$1,235
34148	\$4,345	35000	\$2,145	35507	\$525	35596	\$1,935	35661	\$2,685
34151	\$5,915	35003	\$2,770	35508	\$785	35597	\$4,390	35664	\$4,435
34154	\$7,095	35006	\$3,250	35509	\$245	35599	\$2,110	35667	\$3,750
34157	\$3,600	35009	\$2,700	35513	\$630	35602	\$1,880	35670	\$3,275
34160	\$6,740	35012	\$2,100	35517	\$415	35605	\$1,040	35680	\$1,625
34163	\$8,625	35100	\$1,030	35518	\$775	35608	\$176	35684	\$1,015
34166	\$8,625	35103	\$655	35520	\$162	35611	\$176	35688	\$1,125
34169	\$4,815	35200	\$550	35523	\$162	35612	\$1,540	35691	\$515
34172	\$3,920	35202	\$2,615	35527	\$415	35613	\$1,230	35694	\$1,785

^{*} 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
35697	\$2,665	36546	\$1,835	36652	\$1,720	37014	\$2,820		37217	\$370
35700	\$2,020	36549	\$2,205	36654	\$2,210	37015	\$3,385		37218	\$370
35703	\$190	36552	\$1,960	36656	\$2,825	37016	\$5,320		37219	\$890
35706	\$188	36558	\$1,715	36663	\$1,765	37018	\$7,980		37220	\$2,810
35709	\$120	36561	\$445	36664	\$1,585	37019	\$5,345		37221	\$1,225
35710	\$1,410	36564	\$2,455	36665	\$335	37020	\$1,960		37223	\$530
35713	\$1,285	36567	\$2,700	36666	\$890	37021	\$8,015	ľ	37224	\$860
35717	\$1,555	36570	\$3,435	36667	\$420	37023	\$1,105		37226	\$806
35720	\$1,690	36573	\$2,455	36668	\$415	37026	\$1,105		37227	\$2,810
35723	\$1,340	36576	\$3,065	36800	\$74	37029	\$2,455		37230	\$3,065
35726	\$1,340	36579	\$1,960	36803	\$1,225	37038	\$1,840		37233	\$1,470
35729	\$660	36585	\$1,960	36806	\$1,715	37039	\$1,890	ľ	37245	\$3,515
35730	\$660	36588	\$2,455	36809	\$2,205	37040	\$2,415	ľ	37300	\$122
35750	\$2,385	36591	\$2,945	36811	\$855	37041	\$122		37303	\$196
35753	\$2,640	36594	\$2,455	36812	\$440	37042	\$2,415		37306	\$1,715
35754	\$3,280	36597	\$2,455	36815	\$625	37043	\$1,790	ľ	37309	\$2,455
35756	\$2,385	36600	\$2,945	36818	\$730	37044	\$1,840	ľ	37318	\$735
35759	\$1,670	36603	\$3,435	36821	\$860	37045	\$3,785		37321	\$245
36502	\$1,900	36604	\$715	36822	\$1,225	37046	\$2,065		37324	\$615
36503	\$3,680	36606	\$6,130	36823	\$1,405	37047	\$4,415		37327	\$860
36504	\$770	36607	\$2,080	36824	\$565	37048	\$2,455		37330	\$1,715
36505	\$600	36608	\$805	36827	\$615	37050	\$1,960		37333	\$1,470
36506	\$2,455	36609	\$1,960	36830	\$540	37053	\$2,210		37336	\$1,960
36507	\$1,015	36610	\$4,830	36833	\$735	37200	\$2,700		37338	\$2,415
36508	\$2,000	36611	\$7,530	36836	\$615	37201	\$2,185		37339	\$640
36509	\$2,085	36612	\$1,715	36840	\$860	37202	\$1,095		37340	\$2,415
36516	\$2,455	36615	\$1,960	36842	\$860	37203	\$3,065		37341	\$2,415
36519	\$3,435	36618	\$1,715	36845	\$1,840	37206	\$1,470		37342	\$2,205
36522	\$2,945	36621	\$1,225	36848	\$615	37207	\$3,065		37343	\$3,685
36525	\$4,170	36624	\$1,470	36851	\$615	37208	\$1,470		37344	\$2,415
36528	\$3,435	36627	\$1,840	36854	\$1,225	37209	\$3,435		37345	\$1,840
36529	\$4,225	36633	\$1,960	36860	\$440	37210	\$4,220		37348	\$1,840
36531	\$3,065	36636	\$1,055	36863	\$1,225	37211	\$5,125	ľ	37351	\$735
36532	\$4,405	36639	\$2,205	37000	\$1,960	37213	\$6,330		37354	\$860
36533	\$5,205	36645	\$2,820	37004	\$1,715	37214	\$7,690	·	37369	\$490
36537	\$1,840	36649	\$715	37008	\$1,105	37215	\$1,105	ľ	37372	\$2,455
36543	\$3,435	36650	\$450	37011	\$245	37216	\$595		37375	\$3,065

^{*} See Appendix A for derived fee descriptions



ITEM	MEDICAL	ITEM	MEDICAL	ITEM	MEDICAL	ITEM	MEDICAL		ITEM	MEDICAL
NO.	FEE	NO.	FEE	NO.	FEE	NO.	FEE		NO.	FEE
37381	\$1,960	37827	\$1,425	38307		 38438	\$4,075		38511	\$1,595
37384	\$3,065	37830	\$1,840	38308	\$6,415	38440	\$3,050		38512	\$5,580
37387	\$860	37833	\$880	38309	\$3,785	38441	\$4,825	_	38513	\$2,660
37388	\$245	37836	\$1,840	38310	\$7,230	38446	\$3,145		38515	\$7,105
37390	\$2,455	37839	\$2,085	38311	\$5,605	38447	\$4,215		38516	\$7,210
37393	\$615	37842	\$4,050	38313	\$6,415	38448	\$1,010		38517	\$8,780
37396	\$1,960	37845	\$1,840	38314	\$7,230	38449	\$5,895		38518	\$7,625
37402	\$1,225	37848	\$3,315	38316	\$4,730	38450	\$2,430		38519	\$3,170
37405	\$2,455	37851	\$2,455	38317	\$6,015	38452	\$1,525		38550	\$6,180
37408	\$1,225	37854	\$980	38319	\$6,830	38453	\$4,575		38553	\$7,770
37411	\$2,455	38200	\$1,050	38320	\$4,730	38455	\$6,405		38554	\$11,270
37415	\$124	38203	\$1,315	38322	\$6,015	38456	\$4,215		38555	\$8,885
37417	\$1,470	38206	\$1,590	38323	\$6,830	38457	\$3,945		38556	\$8,430
37418	\$1,965	38209	\$1,790	38350	\$1,485	38458	\$2,090	_	38557	\$10,255
37423	\$2,455	38212	\$2,815	38353	\$590	38460	\$755		38558	\$13,525
37426	\$2,575	38213	\$1,790	38356	\$1,950	38461	\$4,109		38568	\$5,060
37429	\$860	38241	\$1,135	38358	\$5,135	38462	\$900		38571	\$5,825
37432	\$2,455	38244	\$2,935	38359	\$395	38463	\$4,109		38572	\$5,285
37435	\$245	38247	\$4,510	38362	\$1,025	38464	\$975		38600	\$4,075
37438	\$735	38248	\$2,935	38365	\$765	38466	\$2,635		38603	\$2,550
37601	\$735	38249	\$4,510	38368	\$4,480	38467	\$2,955	_	38609	\$1,280
37604	\$730	38251	\$2,935	38415	\$1,145	38468	\$4,060		38612	\$1,435
37605	\$1,150	38252	\$4,510	38416	\$1,665	38469	\$4,725		38615	\$4,075
37606	\$1,705	38254	\$1,050	38417	\$1,665	38471	\$2,795		38618	\$5,075
37607	\$3,680	38256	\$620	38418	\$2,550	38472	\$765		38621	\$2,025
37610	\$5,510	38270	\$2,275	38419	\$465	38474	\$5,820		38624	\$2,280
37613	\$735	38272	\$2,275	38420	\$625	38477	\$5,980		38627	\$1,820
37616	\$1,840	38273	\$2,275	38421	\$4,075	38484	\$6,090		38637	\$1,475
37619	\$735	38274	\$1,025	38422	\$905	38485	\$2,440		38643	\$4,040
37623	\$615	38275	\$745	38423	\$685	38487	\$5,135		38653	\$5,430
37800	\$1,380	38276	\$2,275	38424	\$2,550	38490	\$1,655		38656	\$2,550
37803	\$1,380	38285	\$285	38425	\$1,625	38493	\$5,395		38670	\$5,075
37812	\$1,470	38286	\$260	38426	\$1,105	38499	\$6,090	_	38673	\$5,715
37815	\$245	38287	\$5,575	38427	\$3,350	38502	\$6,320	_	38677	\$5,345
37818	\$1,310	38288	\$360	38428	\$707	38508	\$5,310		38680	\$6,340
37821	\$2,205	38290	\$7,100	38430	\$1,750	38509	\$6,350		38700	\$2,840
37824	\$3,070	38293	\$7,620	38436	\$685	38510	\$1,660		38703	\$5,140

^{*} 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
38706	\$4,840	39125	\$980		39503	\$3,145		40702	\$610	41548	\$1,710
38709	\$5,725	39126	\$1,190		39604	\$5,870		40703	\$7,970	41551	\$4,190
38715	\$4,535	39127	\$1,965		39610	\$3,400		40704	\$2,580	41554	\$4,940
38718	\$5,760	39128	\$2,175		39612	\$3,915		40705	\$2,315	41557	\$2,760
38721	\$3,975	39130	\$2,010		39615	\$6,275		40706	\$8,485	41560	\$3,025
38724	\$5,825	39131	\$420		39638	\$14,010		40707	\$725	41563	\$3,810
38727	\$3,980	39133	\$520		39639	\$11,190		40708	\$1,305	41564	\$5,095
38730	\$5,675	39134	\$1,120		39641	\$14,780		40709	\$4,760	41566	\$2,865
38733	\$3,975	39135	\$520		39651	\$17,025		40712	\$8,485	41569	\$3,025
38736	\$5,675	39136	\$525		39654	\$14,010		40801	\$5,740	41572	\$2,760
38739	\$5,235	39137	\$1,995		39656	\$11,190		40803	\$3,915	41575	\$6,240
38742	\$5,115	39138	\$2,010		39700	\$6,005		40850	\$7,410	41576	\$9,365
38745	\$5,675	39139	\$3,555		39703	\$4,765		40851	\$12,965	41578	\$6,240
38748	\$5,675	39140	\$975		39710	\$7,970		40852	\$1,115	41579	\$4,685
38751	\$5,675	39300	\$1,045		39712	\$9,270		40854	\$1,720	41581	\$7,185
38754	\$7,105	39303	\$1,435		39715	\$8,890		40856	\$835	41584	\$4,930
38757	\$5,675	39306	\$2,220		39718	\$5,350		40858	\$1,720	41587	\$6,715
38760	\$5,675	39307	\$2,720		39720	\$8,485		40860	\$6,620	41590	\$3,025
38764	\$5,675	39309	\$2,360		39801	\$17,025		40862	\$620	41593	\$3,990
38766	\$5,675	39312	\$1,300		39803	\$17,025		40905	\$1,960	41596	\$4,460
38800	\$114	39315	\$3,400		39815	\$6,015		41500	\$205	41599	\$4,460
38803	\$205	39318	\$2,085		39818	\$7,970		41501	\$495	41603	\$1,620
38806	\$395	39319	\$1,435		39821	\$9,015		41503	\$625	41604	\$605
38809	\$455	39321	\$1,570		39900	\$4,760		41506	\$415	41608	\$2,760
38812	\$600	39323	\$895		39903	\$7,185		41509	\$425	41611	\$1,840
39000	\$216	39324	\$920		39906	\$2,615		41512	\$1,550	41614	\$2,640
39007	\$520	39327	\$1,570		40004	\$5,220		41515	\$1,010	41615	\$2,875
39013	\$325	39328	\$1,570		40012	\$5,615		41518	\$2,470	41617	\$4,985
39015	\$1,125	39329	\$1,175		40018	\$520		41521	\$2,600	41618	\$4,985
39018	\$2,620	39330	\$920		40104	\$2,825		41524	\$750	41620	\$2,105
39100	\$785	39331	\$1,385		40106	\$7,125		41527	\$1,510	41623	\$3,025
39109	\$4,700	39332	\$1,385		40109	\$6,145		41530	\$2,495	41626	\$405
39113	\$6,930	39333	\$1,300		40112	\$7,310		41533	\$3,010	41629	\$1,315
39115	\$245	39336	\$920		40119	\$3,145	ľ	41536	\$3,370	41632	\$625
39118	\$960	39339	\$1,385		40600	\$3,145		41539	\$2,760	41635	\$3,010
39121	\$2,360	39342	\$1,805		40700	\$7,715		41542	\$3,025	41638	\$3,755
39124	\$4,835	39345	\$920	-	40701	\$1,305		41545	\$1,445	41641	\$124

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE		ITEM NO.	MEDICAL FEE		ITEM NO.	MEDICAL FEE
41644	\$375	41764	\$325	41880			42584	\$790		42676	\$325
41647	\$280	41767	\$1,925	41881	•		42587	\$132	-	42677	\$152
41650	\$280	41770	\$1,840	41884			42588	\$132	-	42680	\$785
41653	\$210	41773	\$1,510	41885	-		42590	\$975	-	42683	\$320
41656	\$350	41776	\$1,550	41886			42593	\$605	-	42686	\$725
41659	\$205	41779	\$1,840	41907	\$320		42596	\$1,445	_	42689	\$300
41662	\$210	41782	\$2,505	41910	\$1,030		42599	\$1,560	-	42692	\$790
41668	\$625	41785	\$3,105	42503	\$300		42602	\$1,840	-	42695	\$1,205
41671	\$1,250	41786	\$2,040	42504	\$1,680		42605	\$1,315	_	42698	\$3,330
41672	\$1,605	41787	\$1,500	42505	\$1,680		42608	\$785		42701	\$1,840
41674	\$345	41793	\$975	42506	\$1,380		42610	\$260	_	42702	\$4,250
41677	\$265	41797	\$415	42509	\$1,710		42611	\$420		42703	\$1,380
41683	\$310	41801	\$415	42510	\$1,905		42614	\$138		42704	\$1,115
41686	\$210	41804	\$230	42512	\$1,380		42615	\$196		42705	\$2,614
41689	\$340	41807	\$184	42515	\$1,510		42617	\$315		42707	\$1,940
41692	\$465	41810	\$92	42518	\$975		42620	\$220		42710	\$2,175
41698	\$84	41813	\$920	42521	\$3,120		42622	\$225		42713	\$910
41701	\$265	41816	\$495	42524	\$605		42623	\$2,525		42716	\$3,350
41704	\$76	41822	\$565	42527	\$1,210		42626	\$2,875		42719	\$1,510
41707	\$1,105	41825	\$920	42530	\$1,710		42629	\$2,665		42725	\$3,615
41710	\$1,380	41828	\$144	42533	\$1,025		42632	\$290		42731	\$4,090
41713	\$1,710	41831	\$985	42536	\$2,430		42635	\$1,685		42734	\$905
41716	\$725	41832	\$605	42539	\$3,475		42638	\$1,090		42738	\$910
41719	\$310	41834	\$3,680	42542	\$1,445		42641	\$1,165		42739	\$910
41722	\$1,550	41837	\$3,250	42543	\$2,535		42644	\$210		42740	\$910
41725	\$1,180	41840	\$4,000	42545	\$3,245		42647	\$605		42741	\$910
41728	\$2,360	41843	\$3,680	42548	\$2,915		42650	\$210		42743	\$1,840
41729	\$1,500	41855	\$830	42551	\$1,840		42651	\$460		42744	\$825
41731	\$2,235	41858	\$1,300	42554	\$2,170		42652	\$2,375		42746	\$2,695
41734	\$2,955	41861	\$1,590	42557	\$3,025		42653	\$3,615		42749	\$3,340
41737	\$1,185	41864	\$1,105	42563	\$1,575		42656	\$4,005	_	42752	\$3,740
41740	\$158	41867	\$1,615	42569	\$3,025		42662	\$2,075		42755	\$465
41743	\$975	41868	\$1,035	42572	\$290		42665	\$1,560	_	42758	\$1,970
41746	\$2,235	41870	\$1,170	42573	\$615		42667	\$400		42761	\$1,510
41749	\$1,630	41873	\$1,550	42574	\$1,310		42668	\$210		42764	\$1,315
41752	\$775	41876	\$1,550	42575	\$245		42672	\$2,170		42767	\$3,025
41755	\$116	41879	\$2,505	42581	\$300	Ι.	42673	\$1,180	_	42770	\$830

^{*} 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
42773	\$2,170	43022	\$2,005		43909	\$4,200	44342	\$630	45202	\$1,250
42776	\$3,285	43023	\$500	-	43912	\$3,965	44346	\$840	45203	\$1,270
42779	\$3,290	43521	\$1,195	-	43915	\$3,000	44350	\$1,050	45206	\$1,205
42782	\$1,090	43527	\$920	-	43930	\$1,285	44354	\$1,260	45207	\$1,200
42785	\$860	43530	\$920	-	43933	\$1,360	44358	\$630	45209	\$1,615
42788	\$860	43533	\$1,550	-	43936	\$2,535	44359	\$860	45212	\$800
42791	\$860	43801	\$2,510	_	43939	\$1,930	44361	\$1,135	45215	\$3,505
42794	\$160	43804	\$2,675	_	43942	\$605	44364	\$790	45218	\$1,570
42801	\$2,880	43807	\$2,915	_	43945	\$2,535	44367	\$1,355	45221	\$875
42802	\$1,440	43810	\$3,400	_	43948	\$360	44370	\$1,905	45224	\$395
42805	\$1,605	43813	\$3,400	_	43951	\$2,270	44373	\$3,875	45227	\$1,540
42806	\$860	43816	\$3,160	_	43954	\$2,775	44376	* derived	45230	\$845
42807	\$995	43819	\$2,550	_	43957	\$3,020	45000	\$1,700	45233	\$1,695
42808	\$995	43822	\$2,550	_	43960	\$1,060	45003	\$1,885	45236	\$1,285
42809	\$1,180	43825	\$2,915		43963	\$4,225	45006	\$3,255	45239	\$785
42810	\$1,550	43828	\$3,220	_	43966	\$4,830	45009	\$1,030	45240	\$790
42811	\$1,235	43831	\$2,510		43969	\$6,640	45012	\$1,740	45400	\$635
42812	\$485	43834	\$2,915	_	43972	\$4,830	45015	\$945	45403	\$1,270
42815	\$1,570	43837	\$3,645	_	43975	\$5,675	45018	\$1,615	45406	\$1,415
42818	\$1,445	43840	\$3,160		43978	\$4,830	45019	\$1,205	45409	\$2,065
42821	\$245	43843	\$4,860		43981	\$1,330	45021	\$485	45412	\$3,155
42824	\$184	43846	\$5,225		43984	\$3,380	45024	\$1,210	45415	\$3,785
42833	\$1,710	43849	\$1,335		43987	\$3,745	45025	\$485	45418	\$4,475
42836	\$2,015	43852	\$4,250		43990	\$4,590	45026	\$1,085	45439	\$845
42839	\$1,970	43855	\$4,495		43993	\$4,950	45027	\$375	45442	\$1,810
42842	\$2,410	43858	\$1,580		43996	\$5,555	45030	\$365	45445	\$1,770
42845	\$505	43861	\$4,375		43999	\$695	45033	\$755	45448	\$1,180
42848	\$1,970	43864	\$3,280		44102	\$670	45035	\$2,120	45451	\$1,420
42851	\$1,970	43867	\$1,820		44105	\$118	45036	\$3,540	45460	\$4,305
42854	\$985	43870	\$2,550		44130	\$1,205	45039	\$755	45461	\$3,070
42857	\$1,090	43873	\$3,400		44133	\$960	45042	\$965	45462	\$2,215
42860	\$2,335	43876	\$2,915		44136	\$440	45045	\$965	45464	\$6,570
42863	\$2,210	43879	\$3,400		44325	\$790	45048	\$2,340	45465	\$4,680
42866	\$1,965	43882	\$4,375	_	44328	\$920	45051	\$1,440	45466	\$3,375
42869	\$1,375	43900	\$2,880		44331	\$1,550	45054	\$655	45468	\$6,570
42872	\$665	43903	\$4,800		44334	\$3,090	45200	\$845	45469	\$4,375
43021	\$1,830	43906	\$4,200	_	44338	\$420	45201	\$1,250	45471	\$8,255

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITEI NO		ITEM NO.	MEDICAL FEE	IT!		MEDICAL FEE
45472	\$6,230	45527	\$2,060	4560	2 \$2,050	45680	\$1,985	457	785	\$4,535
45474	\$9,940	45528	\$3,090	4560	5 \$1,695	45683	\$2,340	457	788	\$4,475
45475	\$7,500	45530	\$3,040	4560	8 \$2,265	45686	\$2,600	457	791	\$2,435
45477	\$12,105	45533	\$3,445	4561	1 \$1,615	45689	\$765	457	794	\$1,580
45478	\$9,130	45536	\$1,270	4561	4 \$1,630	45692	\$725	457	797	\$590
45480	\$13,860	45539	\$2,960	4561	.7 \$635	45695	\$1,375	457	799	\$92
45481	\$10,455	45542	\$1,695	4562	.0 \$875	45698	\$1,345	458	301	\$395
45483	\$15,790	45545	\$1,975	4562	3 \$2,340	45701	\$3,085	458	303	\$1,015
45484	\$11,915	45546	\$625	4562	4 \$2,830	45704	\$880	458	305	\$540
45485	\$2,615	45548	\$875	4562	5 \$790	45707	\$2,115	458	307	\$770
45486	\$1,890	45551	\$1,390	4562	6 \$875	45710	\$1,270	458	309	\$1,160
45487	\$1,240	45553	\$1,845	4562	7 \$875	45713	\$1,600	458	311	\$1,565
45488	\$1,720	45554	\$2,195	4562	9 \$1,420	45714	\$2,250	458	313	\$1,830
45489	\$2,580	45556	\$2,395	4563	2 \$1,555	45716	\$2,265	458	315	\$1,022
45490	\$3,440	45558	\$3,595	4563	\$1,845	45720	\$2,630	458	317	\$1,195
45491	\$5,160	45560	\$1,420	4564	1 \$3,265	45723	\$3,195	458	319	\$1,685
45492	\$6,195	45561	\$5,245	4564	4 \$3,825	45726	\$3,355	458	321	\$1,250
45493	\$1,240	45562	\$3,430	4564	5 \$645	45729	\$4,055	458	323	\$340
45494	\$8,175	45563	\$3,430	4564	6 \$2,590	45731	\$3,795	458	325	\$1,055
45496	\$1,240	45564	\$7,960	4564	7 \$3,825	45732	\$4,630	458	327	\$1,010
45497	\$970	45565	\$5,970	4565	0 \$425	45735	\$4,385	458	329	\$770
45498	\$780	45566	\$2,960	4565	2 \$955	45738	\$5,315	458	331	\$1,010
45499	\$580	45568	\$1,390	4565	3 \$955	45741	\$4,805	458	333	\$1,265
45500	\$3,190	45569	\$1,835	4565	\$2,055	45744	\$5,845	458	335	\$1,570
45501	\$5,120	45570	\$2,425	4565	8 \$1,465	45747	\$5,260	458	337	\$1,830
45502	\$5,125	45572	\$920	4565	9 \$1,465	45752	\$6,350	458	339	\$1,830
45503	\$5,410	45575	\$2,190	4566	\$8,390	45753	\$6,295	458	341	\$1,475
45504	\$5,120	45578	\$2,555	4566	\$3,730	45754	\$7,545	458	343	\$905
45505	\$5,120	45581	\$875	4566	2 \$2,130	45755	\$1,220	458	345	\$1,580
45506	\$635	45584	\$1,980	4566	\$1,000	45758	\$2,145	458	347	\$535
45512	\$860	45587	\$2,390	4566	8 \$995	45761	\$2,025	458	349	\$1,810
45515	\$590	45588	\$3,575	4566	9 \$995	45767	\$6,845	458	351	\$445
45518	\$710	45590	\$1,300	4567	1 \$2,915	45770	\$5,215	458	353	\$2,556
45519	\$1,340	45593	\$1,525	4567	4 \$875	45773	\$4,760	458	355	\$1,275
45520	\$2,820	45596	\$2,510	4567	5 \$1,390	45776	\$4,760	458	357	\$2,040
45522	\$1,975	45597	\$3,405	4567	6 \$1,655	45779	\$3,505	458	359	\$1,060
45524	\$2,055	45599	\$1,980	4567	\$1,740	45782	\$2,675	458	361	\$2,720

^{*} 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
45863	\$3,015	46330	\$1,160	46420	\$700		46528	\$565	47357	\$1,210
45865	\$905	46333	\$1,890	46423	\$1,120		46531	\$285	47361	\$425
45867	\$995	46335	\$1,550	46426	\$1,130		46534	\$790	47362	\$635
45869	\$3,705	46336	\$880	46432	\$1,785		47000	\$152	47364	\$900
45871	\$4,175	46339	\$1,550	46434	\$1,585		47003	\$180	47367	\$720
45873	\$4,690	46340	\$1,315	46438	\$455		47007	\$1,135	47370	\$1,300
45875	\$1,510	46341	\$820	46441	\$1,120		47009	\$360	47373	\$930
45877	\$1,510	46342	\$1,550	46442	\$940		47012	\$720	47381	\$820
45879	\$995	46345	\$1,890	46444	\$1,620		47015	\$180	47384	\$1,095
45882	\$108	46348	\$840	46450	\$700		47018	\$425	47385	\$930
45885	\$1,070	46351	\$1,260	46453	\$1,260		47021	\$565	47386	\$1,515
45888	\$795	46354	\$1,685	46456	\$335		47024	\$420	47387	\$875
45891	\$1,885	46357	\$2,105	46464	\$755		47027	\$2,085	47390	\$1,305
45894	\$635	46360	\$2,525	46465	\$750		47030	\$425	47393	\$1,745
45897	\$3,525	46363	\$705	46468	\$1,300		47033	\$2,085	47396	\$605
45900	\$755	46364	\$1,550	46471	\$1,890		47042	\$240	47399	\$1,210
45939	\$1,070	46365	\$880	46474	\$2,445		47045	\$900	47402	\$905
45945	\$300	46367	\$1,350	46477	\$2,995		47047	\$695	47405	\$605
45975	\$415	46370	\$430	46480	\$1,255		47049	\$1,242	47408	\$1,210
45978	\$505	46372	\$1,425	46483	\$995		47052	\$1,211	47411	\$365
45981	\$275	46375	\$1,695	46486	\$750		47053	\$1,615	47414	\$725
45984	\$1,975	46378	\$2,250	46489	\$885		47054	\$695	47417	\$850
45987	\$1,975	46379	\$2,840	46492	\$1,210		47057	\$270	47420	\$1,655
45990	\$2,700	46380	\$3,580	46493	\$945		47060	\$365	47423	\$695
45993	\$2,700	46381	\$995	46495	\$675		47063	\$545	47426	\$1,050
45996	\$765	46384	\$995	46498	\$735		47066	\$725	47429	\$1,395
46300	\$1,345	46387	\$2,050	46500	\$880		47069	\$152	47432	\$1,745
46303	\$1,725	46390	\$2,765	46501	\$1,100		47301	\$280	47435	\$1,325
46308	\$1,780	46393	\$3,195	46502	\$1,320		47304	\$315	47438	\$2,120
46309	\$1,760	46394	\$3,970	46503	\$1,265		47307	\$640	47441	\$2,630
46312	\$2,185	46395	\$4,950	46504	\$3,675		47310	\$1,055	47444	\$725
46315	\$2,915	46399	\$1,730	46507	\$5,020		47313	\$1,025	47447	\$1,095
46318	\$3,645	46401	\$2,050	46510	\$1,175		47316	\$2,035	47450	\$1,445
46321	\$4,375	46408	\$2,315	46513	\$190		47319	\$2,090	47451	\$1,750
46322	\$2,640	46411	\$1,400	46519	\$475		47348	\$300	47453	\$845
46324	\$3,110	46414	\$1,760	46522	\$1,410	ľ	47351	\$755	47456	\$1,255
46325	\$3,110	46417	\$1,685	46525	\$190		47354	\$540	47459	\$1,700

^{*} 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
47462	\$365	47573	\$2,190	47780	\$1,815		48412	\$2,025	49100	\$1,060
47465	\$1,655	47579	\$515	47783	\$1,815		48415	\$2,570	49104	\$1,715
47466	\$360	47582	\$1,375	47786	\$2,305		48419	\$2,025	49105	\$2,515
47467	\$725	47585	\$1,420	47789	\$2,305		48420	\$2,570	49106	\$3,025
47468	\$1,395	47588	\$4,230	47900	\$575		48421	\$2,980	49109	\$2,265
47471	\$138	47591	\$5,140	47903	\$800		48422	\$2,930	49112	\$2,265
47474	\$605	47592	\$1,055	47904	\$192		48423	\$2,420	49115	\$3,625
47477	\$755	47593	\$2,580	47906	\$385		48424	\$2,420	49116	\$4,780
47480	\$1,510	47595	\$520	47915	\$580		48426	\$2,930	49117	\$5,740
47483	\$1,815	47597	\$1,050	47916	\$290		48427	\$2,930	49118	\$875
47486	\$3,025	47600	\$1,815	47918	\$800		48430	\$880	49121	\$1,965
47489	\$4,535	47603	\$2,285	47921	\$385		48433	\$3,460	49124	\$1,066
47491	\$4,985	47612	\$1,305	47924	\$128		48435	\$1,815	49200	\$2,630
47495	\$1,510	47615	\$1,515	47927	\$480		48507	\$1,185	49203	\$2,510
47498	\$2,260	47618	\$1,885	47929	\$1,290		48509	\$1,060	49206	\$1,815
47501	\$3,025	47621	\$1,305	47953	\$1,480		48512	\$2,870	49209	\$2,420
47511	\$4,535	47624	\$1,815	47954	\$1,285		48900	\$905	49210	\$3,190
47514	\$2,640	47630	\$1,095	47955	\$1,975		48903	\$1,815	49212	\$755
47516	\$1,390	47637	\$625	47956	\$2,990		48906	\$1,815	49213	\$2,820
47519	\$2,780	47639	\$725	47960	\$445		48909	\$2,420	49215	\$2,085
47528	\$2,420	47648	\$955	47964	\$735		48915	\$2,420	49218	\$875
47531	\$3,085	47657	\$1,515	47967	\$1,480		48918	\$4,835	49219	\$875
47534	\$3,475	47663	\$450	47975	\$1,250		48921	\$4,985	49220	\$1,955
47537	\$1,390	47666	\$755	47978	\$760		48924	\$5,745	49221	\$1,965
47540	\$695	47672	\$365	47981	\$510		48927	\$1,180	49224	\$2,265
47543	\$725	47678	\$540	47982	\$1,220		48939	\$3,475	49227	\$2,265
47546	\$1,095	47735	\$730	47983	\$2,780		48942	\$4,535	49230	\$3,110
47549	\$1,735	47738	\$1,090	47984	\$2,780		48945	\$875	49233	\$1,255
47552	\$1,210	47741	\$1,490	48245	\$1,015		48948	\$1,965	49236	\$1,875
47555	\$1,815	47753	\$1,305	48248	\$1,570		48951	\$2,870	49239	\$935
47558	\$3,240	47756	\$1,305	48251	\$1,290		48954	\$3,025	49300	\$1,660
47559	\$2,465	47762	\$765	48254	\$2,930		48958	\$3,475	49303	\$1,755
47561	\$875	47765	\$1,255	48257	\$1,290		48960	\$3,025	49306	\$3,475
47565	\$2,285	47768	\$1,535	48400	\$1,060		48972	\$1,480	49309	\$2,420
47566	\$2,910	47771	\$1,770	48403	\$1,660		48980	\$2,570	49315	\$2,720
47568	\$1,305	47774	\$1,395	48406	\$1,060	ľ	48983	\$1,885	49318	\$4,230
47570	\$1,745	47777	\$1,395	48409	\$1,660		48986	\$2,570	49319	\$7,395

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE								
49321	\$5,140	49544	\$4,925	49761	\$1,660	49798	\$3,185	50206	\$1,965
49360	\$1,105	49548	\$3,070	49762	\$1,845	49800	\$425	50209	\$2,420
49363	\$1,330	49551	\$4,290	49763	\$2,025	49803	\$545	50212	\$4,385
49366	\$1,965	49554	\$6,045	49764	\$2,210	49806	\$425	50215	\$5,745
49372	\$2,960	49564	\$2,980	49765	\$2,390	49809	\$695	50218	\$7,465
49374	\$5,500	49565	\$4,275	49766	\$2,575	49812	\$1,390	50221	\$6,650
49376	\$6,770	49569	\$2,425	49767	\$2,755	49814	\$3,185	50224	\$7,860
49378	\$5,925	49570	\$875	49768	\$2,940	49815	\$4,400	50233	\$6,045
49380	\$7,195	49572	\$2,390	49769	\$3,345	49818	\$875	50236	\$4,535
49382	\$9,310	49574	\$2,390	49770	\$4,860	49821	\$1,390	50239	\$3,025
49384	\$11,000	49576	\$2,390	49771	\$1,066	49824	\$2,435	50242	\$2,720
49386	\$7,615	49578	\$2,390	49772	\$941	49827	\$1,510	50245	\$8,155
49388	\$8,885	49580	\$2,390	49773	\$1,305	49830	\$2,645	50300	\$3,505
49390	\$10,580	49582	\$2,820	49774	\$920	49833	\$1,660	50303	\$4,790
49392	\$14,810	49584	\$2,820	49775	\$1,245	49836	\$2,870	50306	\$7,475
49394	\$12,695	49586	\$2,820	49776	\$3,775	49837	\$2,100	50309	\$925
49396	\$8,465	49590	\$1,066	49777	\$2,235	49838	\$3,615	50310	\$100
49398	\$6,345	49703	\$1,965	49778	\$3,350	49839	\$1,660	50312	\$2,735
49500	\$1,210	49706	\$1,060	49779	\$3,910	49845	\$2,080	50321	\$2,815
49503	\$1,575	49709	\$2,265	49780	\$4,470	49851	\$1,390	50324	\$4,180
49506	\$2,385	49712	\$3,025	49781	\$3,350	49854	\$1,210	50330	\$695
49509	\$2,420	49715	\$4,230	49782	\$1,815	49857	\$1,120	50333	\$1,870
49512	\$4,230	49716	\$4,780	49783	\$2,455	49860	\$1,055	50335	\$1,870
49515	\$2,720	49717	\$5,740	49784	\$2,805	49866	\$965	50336	\$2,795
49516	\$6,795	49718	\$1,210	49785	\$3,155	49878	\$182	50339	\$1,805
49517	\$3,880	49724	\$2,115	49786	\$3,510	49881	\$631	50345	\$1,050
49518	\$4,230	49727	\$905	49787	\$3,860	49884	\$1,066	50348	\$695
49519	\$7,395	49728	\$1,720	49788	\$4,210	49887	\$852	50351	\$4,845
49521	\$5,140	49730	\$1,955	49789	\$3,590	49890	\$1,439	50352	\$182
49524	\$6,045	49732	\$1,955	49790	\$3,115	50107	\$1,510	50354	\$3,970
49525	\$5,140	49734	\$1,060	49791	\$1,415	50112	\$1,150	50357	\$1,700
49527	\$5,040	49736	\$1,995	49792	\$1,590	50115	\$450	50360	\$1,975
49530	\$6,345	49738	\$1,510	49793	\$1,860	50118	\$2,515	50369	\$1,975
49533	\$8,235	49740	\$4,051	49794	\$2,125	50130	\$995	50372	\$3,465
49534	\$2,340	49742	\$4,910	49795	\$2,390	50200	\$605	50375	\$1,510
49536	\$3,025	49744	\$7,365	49796	\$2,655	50201	\$1,535	50378	\$2,645
49542	\$4,230	49760	\$1,145	49797	\$2,920	50203	\$1,330	50381	\$1,975

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE	ITE No		MEDICAL FEE		ITEM NO.	MEDICAL FEE	ITEM NO.	MEDICAL FEE
50384	\$3,465	50560	\$1,740	510	31	\$3,025		51120	\$755	52030	\$240
50390	\$695	50564	\$2,320	510	32	\$3,625		51130	\$5,920	52033	\$540
50393	\$2,560	50568	\$2,030	510	33	\$4,235		51131	\$5,920	52034	\$108
50394	\$8,415	50572	\$2,705	510	34	\$4,535		51140	\$1,420	52035	\$1,390
50395	\$2,960	50576	\$2,220	510	35	\$4,835		51141	\$2,630	52036	\$395
50396	\$1,405	50580	\$2,320	510	36	\$5,140		51145	\$940	52039	\$1,015
50399	\$2,795	50584	\$2,220	510	41	\$3,475		51150	\$1,140	52042	\$540
50411	\$3,970	50588	\$2,900	510	42	\$4,865		51160	\$3,255	52045	\$770
50414	\$5,355	50592	\$3,085	510	43	\$6,090		51165	\$4,105	52048	\$1,160
50417	\$3,970	50596	\$965	510	44	\$6,605		51170	\$7,200	52051	\$1,565
50420	\$3,275	50600	\$1,605	510	45	\$6,955		51171	\$3,025	52054	\$1,830
50423	\$3,025	50604	\$6,815	510	51	\$7,800		51300	\$260	52055	\$67
50426	\$1,405	50608	\$12,655	510	52	\$9,490		51303	* derived	52056	\$67
50428	\$2,820	50612	\$18,005	510	53	\$10,795		51309	* derived	52057	\$435
50450	\$3,735	50616	\$2,290	510	54	\$5,760		51312	* derived	52058	\$700
50451	\$3,735	50620	\$12,655	510	55	\$8,635		51315	\$781	52059	\$785
50455	\$4,225	50624	\$12,655	510	56	\$10,075		51318	\$516	52060	\$440
50456	\$4,225	50628	\$15,635	510	57	\$6,650		51700	\$188	52061	\$650
50460	\$6,310	50632	\$13,145	510	58	\$7,485		51703	\$100	52062	\$870
50461	\$6,310	50636	\$14,605	510	59	\$9,145		51800	\$260	52063	\$940
50465	\$8,890	50640	\$8,075	510	61	\$8,680		51803	* derived	52064	\$575
50466	\$8,890	50644	\$7,790	510	62	\$11,275		51900	\$940	52066	\$1,015
50470	\$11,275	50654	\$1,820	510	63	\$13,665		51902	\$198	52069	\$575
50471	\$11,275	50950	\$2,385	510	64	\$15,785		51904	\$1,195	52072	\$174
50475	\$13,010	50952	\$2,385	510	65	\$17,040		51906	\$1,790	52073	\$440
50476	\$13,010	51011	\$6,155	510	66	\$17,755		52000	\$215	52075	\$435
50508	\$1,450	51012	\$7,120	510	71	\$6,925		52003	\$320	52078	\$870
50512	\$1,930	51013	\$8,900	510	72	\$7,205		52006	\$320	52081	\$134
50524	\$1,570	51014	\$10,680	510	73	\$9,145		52009	\$550	52084	\$340
50528	\$2,415	51015	\$12,460	511	02	\$3,350		52010	\$745	52087	\$575
50532	\$2,100	51020	\$2,025	511	.03	\$6,850		52012	\$64	52090	\$955
50536	\$2,800	51021	\$3,685	511	10	\$2,420		52015	\$290	52092	\$1,195
50540	\$1,930	51022	\$4,590	511	11	\$1,030		52018	\$805	52094	\$1,574
50544	\$965	51023	\$5,465	511	12	\$695	ľ	52021	\$92	52095	\$1,250
50548	\$1,930	51024	\$6,560	511	13	\$770		52024	\$200	52096	\$385
50552	\$1,665	51025	\$7,342	511	14	\$1,360		52025	\$550	52097	\$530
50556	\$2,220	51026	\$8,230	511	15	\$1,360		52027	\$510	52098	\$400

^{*} 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
52099	\$128	52324	\$1,615	52484	\$1,655		53019	\$1,810	53415	\$1,395
52102	\$480	52327	\$800	52600	\$1,055		53052	\$329	53416	\$1,395
52105	\$875	52330	\$2,250	52603	\$1,010		53054	\$325	53418	\$1,815
52106	\$340	52333	\$2,115	52606	\$770		53056	\$210	53419	\$1,815
52108	\$1,000	52336	\$1,270	52609	\$1,010		53058	\$350	53422	\$2,305
52111	\$995	52337	\$3,525	52612	\$1,265		53060	\$345	53423	\$2,305
52114	\$1,695	52339	\$1,600	52615	\$1,570		53062	\$265	53424	\$1,975
52117	\$2,050	52342	\$2,630	52618	\$1,830		53064	\$437	53425	\$1,975
52120	\$2,217	52345	\$3,195	52621	\$1,830		53068	\$340	53427	\$2,700
52122	\$2,265	52348	\$3,355	52624	\$1,475		53070	\$465	53429	\$2,700
52123	\$1,980	52351	\$4,055	52626	\$905		53200	\$152	53439	\$765
52126	\$2,510	52354	\$3,795	52627	\$1,580		53203	\$300	53453	\$1,300
52129	\$3,405	52357	\$4,630	52630	\$590		53206	\$445	53455	\$1,525
52130	\$1,395	52360	\$4,385	52633	\$1,580		53209	\$4,475	53458	\$115
52131	\$1,930	52363	\$5,315	52636	\$590		53212	\$2,435	53459	\$1,090
52132	\$685	52366	\$4,805	52800	\$920		53215	\$1,275	53460	\$1,490
52133	\$245	52369	\$5,845	52803	\$1,300		53218	\$2,040	53700	\$334
52135	\$420	52372	\$5,260	52806	\$920		53220	\$1,060	53702	\$168
52138	\$1,105	52375	\$6,350	52809	\$1,570		53221	\$2,720	53704	\$101
52141	\$1,070	52378	\$2,025	52812	\$2,220		53224	\$3,015	53706	\$334
52144	\$795	52379	\$3,825	52815	\$2,360		53225	\$905	54006	\$229
52147	\$1,030	52380	\$6,295	52818	\$1,570		53226	\$995	54007	\$115
52148	\$2,065	52382	\$7,545	52821	\$3,400		53227	\$3,705	54011	\$229
52158	\$3,205	52420	\$755	52824	\$1,070		53230	\$4,175	54012	\$115
52180	\$605	52424	\$1,615	52826	\$785		53233	\$4,690	55028	\$224
52182	\$1,330	52430	\$3,190	52828	\$1,045		53236	\$1,510	55029	\$78
52184	\$1,965	52440	\$1,740	52830	\$1,435		53239	\$1,510	55030	\$224
52186	\$2,420	52442	\$1,985	52832	\$2,085		53242	\$995	55031	\$78
52300	\$845	52444	\$2,340	53000	\$84		53400	\$415	55032	\$224
52303	\$1,270	52446	\$2,600	53003	\$265		53403	\$505	55033	\$78
52306	\$1,885	52450	\$725	53004	\$76		53406	\$1,305	55036	\$228
52309	\$635	52452	\$1,375	53006	\$1,380		53409	\$1,305	55037	\$78
52312	\$845	52456	\$3,085	53009	\$725	ľ	53410	\$275	55038	\$224
52315	\$1,420	52458	\$880	53012	\$310		53411	\$765	55039	\$78
52318	\$445	52460	\$2,095	53015	\$1,550		53412	\$1,255	55048	\$224
52319	\$740	52480	\$2,055	53016	\$1,250	ľ	53413	\$1,535	55049	\$78
52321	\$1,440	52482	\$1,390	53017	\$1,605		53414	\$1,770	55054	\$224

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE								
55065	\$201	55294	\$347	55857	\$78	56001	\$400	56629	\$451
55066	\$447	55296	\$227	55858	\$248	56007	\$512	56630	\$685
55068	\$72	55600	\$224	55859	\$86	56010	\$516	56801	\$956
55070	\$201	55603	\$224	55860	\$224	56013	\$512	56807	\$1,147
55071	\$425	55700	\$123	55861	\$78	56016	\$594	57001	\$956
55073	\$70	55703	\$72	55862	\$248	56022	\$461	57007	\$1,163
55076	\$224	55704	\$143	55863	\$86	56028	\$690	57201	\$318
55079	\$78	55705	\$72	55864	\$224	56030	\$461	57341	\$963
55084	\$201	55706	\$205	55865	\$78	56036	\$690	57352	\$1,045
55085	\$70	55707	\$143	55866	\$248	56101	\$471	57353	\$1,045
55118	\$564	55708	\$72	55867	\$86	56107	\$696	57354	\$1,045
55126	\$473	55709	\$78	55868	\$224	56219	\$668	57357	\$1,045
55127	\$473	55712	\$236	55869	\$78	56220	\$492	57360	\$1,434
55128	\$473	55715	\$82	55870	\$248	56221	\$492	57362	\$232
55129	\$473	55718	\$205	55871	\$86	56223	\$492	57506	\$61
55130	\$348	55721	\$236	55872	\$224	56224	\$720	57509	\$81
55132	\$473	55723	\$78	55874	\$248	56225	\$720	57512	\$83
55133	\$425	55725	\$82	55876	\$224	56226	\$720	57515	\$111
55134	\$473	55729	\$56	55877	\$78	56233	\$492	57518	\$67
55135	\$724	55736	\$260	55878	\$248	56234	\$720	57521	\$89
55137	\$473	55739	\$117	55879	\$86	56237	\$492	57522	\$67
55141	\$842	55759	\$307	55880	\$224	56238	\$720	57523	\$89
55143	\$842	55762	\$123	55881	\$78	56301	\$604	57524	\$101
55145	\$976	55764	\$328	55882	\$248	56307	\$819	57527	\$135
55146	\$976	55766	\$133	55883	\$86	56401	\$512	57541	\$151
55238	\$347	55768	\$307	55884	\$224	56407	\$737	57700	\$83
55244	\$347	55770	\$123	55885	\$78	56409	\$512	57703	\$111
55246	\$347	55772	\$328	55886	\$248	56412	\$737	57706	\$67
55248	\$347	55774	\$133	55887	\$86	56501	\$789	57709	\$89
55252	\$347	55812	\$224	55888	\$224	56507	\$984	57712	\$97
55274	\$347	55814	\$78	55889	\$78	56553	\$1,065	57715	\$125
55276	\$347	55844	\$179	55890	\$248	56620	\$451	57721	\$203
55278	\$347	55846	\$78	55891	\$86	56622	\$451	57901	\$132
55280	\$347	55848	\$280	55892	\$224	56623	\$685	57902	\$132
55282	\$347	55850	\$369	55893	\$78	56626	\$685	57905	\$132
55284	\$347	55854	\$78	55894	\$248	56627	\$451	57907	\$97
55292	\$347	55856	\$224	55895	\$86	56628	\$685	57915	\$97

^{*} 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
57918	\$97	58903	\$98	60024	\$1,155		61349	\$1,964	61450	\$795
57921	\$97	58909	\$184	60027	\$1,694		61353	\$773	61453	\$1,029
57924	\$97	58912	\$226	60030	\$2,409		61356	\$786	61454	\$696
57927	\$102	58915	\$162	60033	\$2,819		61357	\$1,306	61457	\$941
57930	\$67	58916	\$284	60036	\$1,155		61360	\$807	61461	\$1,056
57933	\$160	58921	\$277	60039	\$1,694		61361	\$923	61462	\$258
57939	\$132	58927	\$157	60042	\$2,409		61364	\$994	61469	\$696
57942	\$102	58933	\$421	60045	\$2,819		61368	\$446	61473	\$351
57945	\$89	58936	\$401	60048	\$1,155		61369	\$4,032	61480	\$774
57960	\$97	58939	\$285	60051	\$1,694		61372	\$446	61485	\$1,998
57963	\$97	59103	\$44	60054	\$2,409		61373	\$979	61495	\$446
57966	\$97	59300	\$183	60057	\$2,819		61376	\$287	61499	\$506
57969	\$97	59302	\$414	60060	\$1,155		61381	\$1,149	61505	\$200
58100	\$138	59303	\$111	60063	\$1,694		61383	\$1,250	61523	\$1,906
58103	\$113	59305	\$234	60066	\$2,409		61384	\$1,375	61524	\$1,906
58106	\$158	59312	\$178	60069	\$2,819		61386	\$665	61525	\$1,906
58108	\$225	59314	\$108	60072	\$99		61387	\$862	61529	\$1,906
58109	\$96	59318	\$96	60075	\$197		61389	\$741	61538	\$1,802
58112	\$199	59700	\$198	60078	\$295		61390	\$820	61541	\$1,906
58115	\$225	59703	\$156	60500	\$89		61393	\$1,211	61553	\$1,998
58120	\$225	59712	\$233	60503	\$61		61397	\$494	61559	\$1,836
58121	\$225	59718	\$276	60506	\$131		61402	\$1,210	61565	\$1,906
58300	\$82	59724	\$464	60509	\$203		61409	\$1,747	61571	\$1,906
58306	\$183	59733	\$221	60918	\$97		61413	\$452	61575	\$1,906
58500	\$72	59739	\$151	60927	\$78		61421	\$960	61577	\$1,906
58503	\$97	59751	\$285	61109	\$530		61425	\$1,201	61598	\$1,906
58506	\$125	59754	\$449	61310	\$735		61426	\$1,110	61604	\$1,906
58509	\$81	59763	\$274	61313	\$607		61429	\$1,086	61610	\$1,906
58521	\$89	59970	\$345	61314	\$840		61430	\$1,319	61620	\$1,906
58524	\$116	60000	\$1,155	61321	\$658		61433	\$994	61622	\$1,906
58527	\$142	60003	\$1,694	61324	\$1,306		61434	\$1,231	61628	\$1,906
58700	\$94	60006	\$2,409	61325	\$658		61438	\$1,346	61632	\$1,906
58706	\$323	60009	\$2,819	61328	\$455		61441	\$979	61640	\$1,998
58715	\$310	60012	\$1,155	61329	\$1,964		61442	\$1,505	61646	\$1,998
58718	\$258	60015	\$1,694	61340	\$506		61445	\$574	61647	\$1,906
58721	\$283	60018	\$2,409	61345	\$1,964	ľ	61446	\$667	61650	\$1,757
58900	\$73	60021	\$2,819	61348	\$887		61449	\$912	63001	\$404

^{*} 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
63004	\$404	63228	\$448	63467			65078	\$255		65176	\$138
63007	\$404	63231	\$448	63470	\$404	-	65079	\$255		65177	\$205
63010	\$336	63234	\$448	63473	\$628		65081	\$275	_	65178	\$270
63040	\$336	63237	\$448	63476	\$404		65082	\$275	_	65179	\$340
63043	\$359	63240	\$448	63482	\$404		65084	\$480		65180	\$72
63046	\$404	63243	\$448	63487	\$690	-	65087	\$250		65181	\$66
63049	\$404	63271	\$493	63489	\$1,440		65090	\$32		66500	\$28
63052	\$404	63274	\$493	63491	\$45		65093	\$63	_	66503	\$34
63055	\$404	63277	\$493	63494	\$45		65096	\$116	_	66506	\$39
63058	\$404	63280	\$493	63496	\$250		65099	\$320		66509	\$45
63061	\$404	63301	\$381	63497	\$157		65102	\$475		66512	\$51
63064	\$404	63304	\$381	63498	\$45		65105	\$320		66517	\$56
63067	\$404	63307	\$381	63499	\$157		65108	\$475		66518	\$57
63070	\$404	63322	\$404	63501	\$500		65109	\$37		66519	\$116
63073	\$404	63325	\$404	63502	\$500		65110	\$37		66536	\$33
63101	\$493	63328	\$404	63507	\$403		65111	\$66		66539	\$87
63111	\$493	63331	\$404	63510	\$448		65114	\$26		66542	\$54
63114	\$493	63334	\$336	63513	\$404		65117	\$58		66560	\$58
63125	\$493	63337	\$448	63516	\$404		65120	\$40		66563	\$70
63128	\$493	63340	\$404	63519	\$404		65123	\$58		66566	\$96
63131	\$493	63361	\$404	63522	\$448		65126	\$79		66569	\$122
63151	\$359	63385	\$448	63531	\$690		65129	\$102		66572	\$146
63154	\$359	63388	\$448	63533	\$690		65137	\$72		66575	\$172
63161	\$359	63391	\$403	63541	\$450		65142	\$72		66578	\$198
63164	\$359	63395	\$856	63543	\$450		65144	\$162		66581	\$225
63167	\$359	63397	\$856	63545	\$550		65147	\$108		66584	\$28
63170	\$359	63401	\$404	63546	\$550		65150	\$200		66587	\$136
63173	\$359	63404	\$404	63547	\$690		65153	\$405		66590	\$87
63176	\$359	63416	\$404	63551	\$404		65156	\$605		66593	\$54
63179	\$359	63425	\$404	63554	\$359		65157	\$200		66596	\$99
63182	\$359	63428	\$404	63557	\$493		65158	\$200		66605	\$87
63185	\$359	63440	\$404	63560	\$404		65159	\$200		66606	\$87
63201	\$448	63443	\$404	65060	\$23		65162	\$30		66607	\$215
63204	\$448	63446	\$404	65066	\$30		65165	\$98		66610	\$215
63219	\$448	63454	\$1,200	65070	\$48		65166	\$98		66623	\$118
63222	\$448	63461	\$359	65072	\$29		65171	\$72	_	66626	\$69
63225	\$448	63464	\$690	65075	\$148		65175	\$72	_	66629	\$58

^{*} 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
66632	\$58	66715	\$39	66804			69321	\$136	69475	\$45
66635	\$58	66716	\$89	66805		-	69324	\$122	69478	\$83
66638	\$83	66719	\$116	66806		-	69325	\$122	69479	\$113
66639	\$83	66722	\$126	66812	\$99	-	69327	\$240	69480	\$225
66641	\$83	66723	\$126	66815	\$170	-	69328	\$240	69481	\$114
66642	\$83	66724	\$44	66816	\$170	-	69330	\$360	69482	\$425
66644	\$58	66725	\$164	66817	\$122	-	69331	\$360	69483	\$425
66647	\$128	66728	\$200	66819	\$87	-	69333	\$58	69484	\$49
66650	\$69	66731	\$240	66820	\$87	-	69336	\$97	69488	\$505
66651	\$69	66734	\$275	66821	\$62		69339	\$54	69489	\$505
66652	\$58	66743	\$58	66822	\$148		69345	\$150	69491	\$575
66653	\$128	66749	\$94	66825	\$87		69354	\$87	69492	\$575
66655	\$58	66750	\$110	66826	\$87		69357	\$174	69494	\$72
66656	\$58	66751	\$158	66827	\$62		69360	\$260	69495	\$95
66659	\$106	66752	\$70	66828	\$148		69363	\$72	69496	\$120
66660	\$106	66755	\$110	66830	\$176		69378	\$510	69497	\$72
66662	\$230	66756	\$290	66831	\$87		69379	\$510	69498	\$18
66663	\$230	66757	\$290	66832	\$87		69380	\$2,145	69499	\$260
66665	\$87	66758	\$70	66833	\$120		69381	\$510	69500	\$260
66666	\$87	66761	\$38	66834	\$120		69382	\$510	69501	\$248
66667	\$87	66764	\$26	66835	\$120		69383	\$510	71057	\$102
66671	\$106	66767	\$51	66836	\$120		69384	\$44	71058	\$144
66674	\$114	66770	\$76	66837	\$120		69387	\$81	71059	\$83
66677	\$32	66773	\$70	66838	\$70		69390	\$122	71060	\$126
66680	\$210	66776	\$70	66839	\$128		69393	\$162	71062	\$126
66683	\$210	66779	\$114	66840	\$70		69396	\$200	71064	\$59
66686	\$144	66780	\$114	66841	\$48		69400	\$44	71066	\$42
66695	\$90	66782	\$38	66900	\$220		69401	\$39	71068	\$42
66696	\$90	66783	\$38	69300	\$36		69405	\$44	71069	\$68
66697	\$39	66785	\$114	69303	\$62		69408	\$78	71071	\$93
66698	\$128	66788	\$188	69306	\$95		69411	\$110	71072	\$42
66701	\$164	66789	\$114	69309	\$136		69413	\$142	71073	\$305
66704	\$200	66790	\$73	69312	\$95		69445	\$260	71074	\$42
66707	\$240	66791	\$210	69316	\$80		69451	\$260	71075	\$77
66711	\$89	66792	\$210	69317	\$100		69471	\$99	71076	\$305
66712	\$128	66800	\$52	69318	\$91		69472	\$45	71077	\$77
66714	\$89	66803	\$87	69319	\$120	_	69474	\$81	71079	\$77

^{*} 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
71081	\$116	71154	\$98	72846			73309	\$99		73806	\$29
71083	\$58	71155	\$134	72847	\$250	-	73311	\$99		73807	\$20
71085	\$83	71156	\$37	72848	\$210		73312	\$99	_	73808	\$25
71087	\$108	71157	\$172	72849	\$295		73314	\$625	_	73809	\$7
71089	\$83	71159	\$210	72850	\$340		73315	\$625		73810	\$20
71090	\$83	71163	\$71	72851	\$1,515	-	73317	\$99	_	73811	\$32
71091	\$150	71164	\$116	72852	\$2,020		73318	\$99		73828	\$16
71092	\$67	71165	\$99	72855	\$520		73320	\$110		73829	\$10
71093	\$220	71166	\$136	72856	\$695		73321	\$110		73830	\$14
71095	\$116	71167	\$172	72857	\$815		73323	\$110		73831	\$18
71096	\$116	71168	\$210	72860	\$245		73324	\$110		73832	\$10
71097	\$73	71169	\$99	73043	\$ \$57		73325	\$200		73833	\$23
71099	\$76	71170	\$37	73045	\$130		73326	\$620		73834	\$16
71101	\$50	71180	\$99	73047	\$260		73327	\$140		73835	\$19
71103	\$148	71183	\$134	73049	\$188		73332	\$860		73836	\$5
71106	\$32	71186	\$172	73051	. \$475		73333	\$1,600		73837	\$16
71119	\$50	71189	\$45	73059	\$122		73334	\$905		73899	\$50
71121	\$59	71192	\$81	73060	\$162		73335	\$1,250		73900	\$7
71123	\$69	71195	\$114	73061	\$144		73336	\$520		73920	\$7
71125	\$79	71198	\$116	73062	\$245		73337	\$894		73922	\$23
71127	\$505	71200	\$102	73063	\$270		73338	\$816		73923	\$7
71129	\$620	71203	\$116	73064	\$200		73339	\$1,065		73924	\$42
71131	\$740	72813	\$230	73065	\$240		73340	\$530		73925	\$7
71133	\$30	72814	\$200	73066	\$610		73341	\$900		73926	\$23
71134	\$300	72816	\$245	73067	\$355		73343	\$1,327		73927	\$7
71135	\$595	72817	\$275	73070	\$112		73344	\$900		73928	\$50
71137	\$86	72818	\$305	73287	\$1,025		73351	\$894		73929	\$7
71139	\$295	72823	\$275	73289	\$930		73521	\$28		73930	\$50
71141	\$565	72824	\$400	73290	\$1,025		73523	\$120		73931	\$7
71143	\$740	72825	\$510	73291	\$600		73525	\$81		73932	\$31
71145	\$1,210	72826	\$550	73292	\$1,530		73527	\$29		73933	\$7
71146	\$305	72827	\$590	73293	\$600		73529	\$82		73934	\$50
71147	\$116	72828	\$630	73294	\$600		73801	\$20		73935	\$7
71148	\$116	72830	\$770	73301	\$3,195		73802	\$13		73936	\$29
71149	\$310	72836	\$1,185	73302	\$1,065		73803	\$18		73937	\$7
71151	\$340	72838	\$1,330	73305	\$575		73804	\$23		73938	\$29
71153	\$98	72844	\$87	73308	\$ \$99		73805	\$13	_	73939	\$7

^{*} See Appendix A for derived fee descriptions



ITEM NO.	MEDICAL FEE								
73940	\$31	75603	\$714	82306	\$51	91821	\$214	92425	\$309
75001	\$224	75606	\$714	82309	\$62	91822	\$188	92426	\$154
75004	\$113	75609	\$1,065	82312	\$87	91823	\$100	92427	\$88
75006	\$199	75612	\$1,319	82315	\$115	91824	\$355	92435	\$810
75009	\$178	75615	\$488	82318	\$142	91825	\$164	92436	\$540
75012	\$283	75618	\$606	82324	\$77	91826	\$88	92437	\$440
75015	\$389	75621	\$606	82327	\$46	91827	\$98	92455	\$122
75018	\$495	75800	\$216	82332	\$137	91828	\$196	92456	\$158
75021	\$607	75803	\$863	90001	\$111	91829	\$295	92457	\$235
75023	\$122	75806	\$1,012	90002	\$81	91830	\$445	92458	\$295
75024	\$1,570	75809	\$1,199	90005	\$130	91831	\$490	92459	\$395
75027	\$2,153	75812	\$1,332	90020	\$35	91832	\$188	92460	\$200
75030	\$1,917	75815	\$1,625	90035	\$76	91833	\$100	92461	\$89
75033	\$3,143	75818	\$1,917	90043	\$147	91834	\$355	92462	\$177
75034	\$1,600	75821	\$1,544	90051	\$216	91835	\$164	92463	\$272
75036	\$4,341	75824	\$1,784	90092	\$16	91836	\$88	92464	\$376
75037	\$5,467	75827	\$2,051	90093	\$31	91837	\$98	92465	\$436
75039	\$1,453	75830	\$2,264	90095	\$69	91838	\$196	92466	\$533
75042	\$543	75833	\$2,770	90096	\$111	91839	\$295	92471	\$309
75045	\$2,909	75836	\$3,169	90183	\$28	91840	\$445	92472	\$154
75048	\$746	75839	\$72	90188	\$61	91841	\$490	92473	\$88
75049	\$873	75842	\$107	90282	\$214	91842	\$187	92475	\$810
75050	\$1,685	75845	\$533	91790	\$43	91843	\$267	92476	\$540
75051	\$2,587	75848	\$639	91792	\$43	91844	\$150	92477	\$440
75150	\$224	75851	\$320	91794	\$28	91845	\$214	92495	\$122
75153	\$113	75854	\$320	91800	\$86	91846	\$175	92496	\$158
75156	\$199	82200	\$19	91801	\$158	91847	\$88	92497	\$235
75200	\$144	82205	\$42	91802	\$240	91848	\$175	92498	\$295
75203	\$216	82210	\$80	91803	\$86	91849	\$88	92499	\$395
75206	\$72	82215	\$118	91804	\$158	91890	\$41	92500	\$200
75400	\$431	82220	\$57	91805	\$240	91891	\$89	92501	\$89
75403	\$495	82221	\$108	91806	\$61	91892	\$25	92502	\$177
75406	\$564	82222	\$159	91807	\$117	91893	\$48	92503	\$272
75409	\$639	82223	\$57	91808	\$173	92115	\$170	92504	\$376
75412	\$357	82224	\$108	91818	\$187	92121	\$136	92505	\$436
75415	\$431	82225	\$159	91819	\$267	92127	\$170	92506	\$533
75600	\$607	82300	\$451	91820	\$150	92133	\$136	92517	\$40

^{*} See Appendix A for derived fee descriptions



ITEM	MEDICAL
NO.	FEE
92518	\$87
92519	\$169
92520	\$249
92525	\$40
92526	\$87
92527	\$169
92528	\$249
92610	\$285
92611	\$100
92612	\$200
92613	\$280
92614	\$355
92615	\$265
92616	\$88
92617	\$285
92618	\$100
92619	\$200
92620	\$280
92621	\$355
92625	\$265
92626	\$88
92701	\$364
92702	\$175
92712	\$364
92713	\$175
92746	\$173
92747	\$87
93624	\$71
93625	\$86
93626	\$55
93627	\$78
93634	\$99
93635	\$114
93636	\$78
93637	\$100

93644

93645

\$56 \$63

ITEM NO.	MEDICAL FEE
93646	\$40
93647	\$55
93653	\$84
93654	\$91
93655	\$63
93656	\$77
93715	\$57

^{*} See Appendix A for derived fee descriptions



Appendix A: derived fee descriptions

ITEM NO.	DESCRIPTION
4	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 3, plus \$27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 3 plus \$2.15 per patient.
24	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 23, plus \$27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 23 plus \$2.15 per patient.
37	Professional attendance by a general practitioner (other than attendance at consulting rooms or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 36, plus \$27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 36 plus \$2.15 per patient.
47	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. *Derived fee: The fee for item 44, plus \$27.40 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 44 plus \$2.15 per patient.



ITEM NO.	DESCRIPTION
58	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies), not more than 5 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$8.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$8.50 plus \$.70 per patient.
59	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$16.00, plus \$17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$16.00 plus \$.70 per patient.
60	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$35.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$35.50 plus \$.70 per patient.
65	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 45 minutes in duration-an attendance on one or more patients at one place on one occasion-each patient, by: (a) a medical practitioner (who is not a general practitioner); or (b) a Group A1 disqualified general practitioner, as defined in the dictionary of the General Medical Services Table (GMST). *Derived fee: An amount equal to \$57.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$57.50 plus \$.70 per patient.
99	Professional attendance on a patient by a specialist practising in the specialist's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 104 lasting more than 10 minutes; or (ii) provided with item 105; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 104 or 105. Benefit: 85% of the derived fee.



ITEM NO.	DESCRIPTION
112	Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 110 lasting more than 10 minutes; or (ii) provided with item 116, 119, 132 or 133; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for the associated item. Benefit: 85% of derived fee.
149	Professional attendance on a patient by a consultant physician or specialist practising in the consultant physician's or specialist's specialty of geriatric medicine if: (a) the attendance is by video conference; and (b) item 141 or 143 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance- at least 15 kms by road from the physician or specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service: for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 141 or 143. Benefit: 85% of the derived fee.
181	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies), not more than 5 minutes in duration an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. *Derived fee: The fee for item 179, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 179 plus \$1.70 per patient.
187	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 5 minutes in duration but not more than 25 minutes an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. *Derived fee: The fee for item 185, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 185 plus \$1.70 per patient.
191	Professional attendance (other than an attendance at consulting rooms or a residential aged care facility or a service to which any other item in the table applies) of more than 25 minutes in duration but not more than 45 minutes an attendance on one or more patients at one place on one occasion each patient, by a medical practitioner in an eligible area. *Derived fee: The fee for item 189, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 189 plus \$1.70 per patient.



ITEM NO.	DESCRIPTION
195	Professional attendance by a general practitioner who is a qualified medical acupuncturist, on one or more patients at a hospital, lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation, at which acupuncture is performed by the qualified medical acupuncturist by the application of stimuli on or through the skin by any means, including any consultation on the same occasion and another attendance on the same day related to the condition for which the acupuncture is performed. *Derived fee: The fee for item 193, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 193 plus \$2.10 per patient.
206	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. *Derived fee: The fee for item 203, plus \$21.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 203 plus \$1.70 per patient.
260	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus. *Derived fee: The fee for item 259, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 259 plus \$1.70 per patient.
262	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. *Derived fee: The fee for item 261, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 261 plus \$1.70 per patient.
264	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus. *Derived fee: The fee for item 263, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 263 plus \$1.70 per patient.
266	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care. *Derived fee: The fee for item 265, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 265 plus \$1.70 per patient.



ITEM NO.	DESCRIPTION
269	Professional attendance at a place other than consulting rooms of more than 25 minutes, but not more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care. *Derived fee: The fee for item 268, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 268 plus \$1.70 per patient.
271	Professional attendance at a place other than consulting rooms of more than 45 minutes in duration by a medical practitioner in an eligible area, that completes the minimum requirements of the Asthma Cycle of Care. *Derived fee: The fee for item 270, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 270 plus \$1.70 per patient.
285	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes. *Derived fee: The fee for item 283, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 283 plus \$1.70 per patient.
287	Professional attendance at a place other than consulting rooms by a medical practitioner, for providing focussed psychological strategies for assessed mental disorders by a medical practitioner registered with the Chief Executive Medicare as meeting the credentialing requirements for provision of this service, and lasting at least 40 minutes. *Derived fee: The fee for item 286, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 286 plus \$1.70 per patient.
288	Professional attendance on a patient by a consultant physician practising in the consultant physician's specialty of psychiatry if: (a) the attendance is by video conference; and (b) item 291, 293, 296, 300, 302, 304, 306, 308, 310, 312, 314, 316, 318, 319, 348, 350 or 352 applies to the attendance; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 291, 293,296, 300, 302, 304, 306, 308, 310, 312, 314, 316, 318, 319, 348, 350 or 352.Benefit: 85% of derived fee.



ITEM NO.	DESCRIPTION
389	Professional attendance on a patient by a consultant occupational physician practising in the consultant occupational physician's specialty of occupational medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 385 lasting more than 10 minutes; or (ii) provided with item 386; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 385 or 386. Benefit: 85% of the derived fee.
414	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. *Derived fee: The fee for item 410, plus \$26.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 410 plus \$2.10 per patient.
415	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. *Derived fee: The fee for item 411, plus \$26.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 411 plus \$2.10 per patient.
416	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. *Derived fee: The fee for item 412, plus \$26.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 412 plus \$2.10 per patient.
417	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. *Derived fee: The fee for item 413, plus \$26.90 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 413 plus \$2.10 per patient.



ITEM NO.	DESCRIPTION
761	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes an attendance on one or more patients on one occasion each patient. *Derived fee: The fee for item 733, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 733 plus \$1.70 per patient.
763	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes an attendance on one or more patients on one occasion each patient. *Derived fee: The fee for item 737, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 737 plus \$1.70 per patient.
766	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes an attendance on one or more patients on one occasion each patient. *Derived fee: The fee for item 741, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus \$1.70 per patient.
769	Professional attendance by a medical practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 45 minutes an attendance on one or more patients on one occasion each patient. *Derived fee: The fee for item 745, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus \$1.70 per patient.
788	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 25 minutes in duration but not more than 45 minutes by a medical practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient. *Derived fee: The fee for item 741, plus \$38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 741 plus \$2.70 per patient.
789	Professional attendance (other than a service to which another item applies) at a residential aged care facility (other than a professional attendance at a self-contained unit) or professional attendance at consulting rooms situated within such a complex if the patient is accommodated in the residential aged care facility (other than accommodation in a self-contained unit) of more than 45 minutes in duration by a medical practitioner an attendance on one or more patients at one residential aged care facility on one occasion each patient. *Derived fee: The fee for item 745, plus \$38.85 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 745 plus \$2.70 per patient.



ITEM NO.	DESCRIPTION
827	Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient. *Derived fee: The fee for item 812, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 812 plus \$1.70 per patient.
868	Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient. *Derived fee: The fee for item 867, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 867 plus \$1.70 per patient.
876	Professional attendance not in consulting rooms of at least 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient. *Derived fee: The fee for item 873, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 873 plus \$1.70 per patient.
891	Professional attendance not in consulting rooms of at least 40 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance at least 15 kms by road from the specialist or physician mentioned in paragraph(a); for an attendance on one or more patients at one place on one occasion each patient. *Derived fee: The fee for item 885, plus \$21.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 885 plus \$1.70 per patient.



ITEM NO.	DESCRIPTION
2122	Professional attendance not in consulting rooms of at least 5 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2100 plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus \$2.10 per patient.
2125	Professional attendance of at least 5 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2100 plus \$48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2100 plus \$3.45 per patient.
2137	Professional attendance not in consulting rooms of less than 20 minutes in duration (whether or not continuous) by a medical practitioner providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is not an admitted patient; and (c) is not a care recipient in a residential care service; and (d) is located both: (i) within a telehealth eligible area; and (ii) at the time of the attendance-at least 15 kms by road from the specialist or physician mentioned in paragraph (a); for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2126 plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus \$2.10 per patient.
2138	Professional attendance of less than 20 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2126 plus \$48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2126 plus \$3.45 per patient.
2147	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. *Derived fee: The fee for item 2143 plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus \$2.10 per patient.



ITEM NO.	DESCRIPTION
2179	Professional attendance of at least 20 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2143 plus \$48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2143 plus \$3.45 per patient.
2199	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. *Derived fee: The fee for item 2195 plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus \$2.10 per patient.
2220	Professional attendance of at least 40 minutes in duration (whether or not continuous) by a general practitioner, specialist or consultant physician providing clinical support to a patient who: (a) is participating in a video conferencing consultation with a specialist or consultant physician; and (b) is a care recipient in a residential care service; and (c) is not a resident of a self-contained unit; for an attendance on one or more patients at one place on one occasion-each patient. *Derived fee: The fee for item 2195 plus \$48.60 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2195 plus \$3.45 per patient.
2631	Professional attendance at a place other than consulting rooms of more than 5 minutes, but not more than 25 minutes in duration by a medical practitioner who practises in general practice (other than a general practitioner), that completes the minimum requirements for a cycle of care of a patient with established diabetes mellitus. *Derived fee: An amount equal to \$16.00, plus \$17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$16.00 plus \$0.70 per patient
2633	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. *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
2635	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. *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.



ITEM NO.	DESCRIPTION
2723	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 30 minutes, but less than 40 minutes. *Derived fee: The fee for item 2721, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2721 plus \$2.10 per patient.
2727	Professional attendance at a place other than consulting rooms by a general practitioner, for providing focussed psychological strategies for assessed mental disorders by a general practitioner registered with the Chief Executive Medicare as meeting the credentialling requirements for provision of this service, and lasting at least 40 minutes. *Derived fee: The fee for item 2725, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 2725 plus \$2.10 per patient.
2820	Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or consultant physician's specialty of pain medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 2801 lasting more than 10 minutes; or (ii) provided with item 2806 or 2814; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 2801, 2806 or 2814. Benefit: 85% of the derived fee
3015	Professional attendance on a patient by a specialist or consultant physician practising in the specialist's or consultant physician's specialty of palliative medicine if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 3005 lasting more than 10 minutes; or (ii) provided with item 3010 or 3014; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist or physician; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 3005, 3010 or 3014. Benefit: 85% of the derived fee.
5003	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies) that requires a short patient history and, if necessary, limited examination and management-an attendance on one or more patients on one occasion-each patient. *Derived fee: The fee for item 5000, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5000 plus \$2.10 per patient.



ITEM NO.	DESCRIPTION
5023	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting less than 20 minutes and including any of the following that are clinically relevant: (a) taking a patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient *Derived fee: The fee for item 5020, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5020 plus \$2.10 per patient.
5043	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting at least 20 minutes and including any of the following that are clinically relevant: (a) taking a detailed patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient. *Derived fee: The fee for item 5040, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5040 plus \$2.10 per patient.
5063	Professional attendance by a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting at least 40 minutes and including any of the following that are clinically relevant: (a) taking an extensive patient history; (b) performing a clinical examination; (c) arranging any necessary investigation; (d) implementing a management plan; (e) providing appropriate preventive health care; for one or more health-related issues, with appropriate documentation-an attendance on one or more patients on one occasion-each patient. *Derived fee: The fee for item 5060, plus \$27.00 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - the fee for item 5060 plus \$2.10 per patient.
5220	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting not more than 5 minutes-an attendance on one or more patients on one occasion-each patient. *Derived fee: An amount equal to \$18.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$18.50 plus \$.70 per patient
5223	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 5 minutes, but not more than 25 minutes-an attendance on one or more patients on one occasion-each patient. *Derived fee: An amount equal to \$26.00, plus \$17.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$26.00 plus \$.70 per patient.



ITEM NO.	DESCRIPTION
5227	Professional attendance by a medical practitioner who is not a general practitioner (other than attendance at consulting rooms, a hospital or a residential aged care facility or a service to which another item in the table applies), lasting more than 25 minutes, but not more than 45 minutes-an attendance on one or more patients on one occasion-each patient. *Derived fee: An amount equal to \$45.50, plus \$15.50 divided by the number of patients seen, up to a maximum of six patients. For seven or more patients - an amount equal to \$45.50 plus \$.70 per patient.
5228	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. *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.
6016	Professional attendance on a patient by a specialist practising in the specialist's specialty of neurosurgery if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6007 lasting more than 10 minutes; or (ii) provided with item 6009, 6011, 6013 or 6015; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19(2) of the Act applies. *Derived fee: 50% of the fee for item 6007, 6009, 6011, 6013 or 6015. Benefit: 85% of the derived fee.
6026	Professional attendance on a patient by an addiction medicine specialist in the practice of the addiction medicine specialist's specialty, if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6018 or 6019 and lasting more than 10 minutes; or (ii) provided with item 6023 or 6024; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the addiction medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies. *Derived fee: 50% of the fee for item 6018, 6019, 6023, or 6024 Benefit: 85% of the derived fee.
6060	Professional attendance on a patient by a sexual health medicine specialist in the practice of the sexual health medicine specialist's specialty if: (a) the attendance is by video conference; and (b) the attendance is for a service: (i) provided with item 6051 or 6052 and lasting more than 10 minutes; or (ii) provided with item 6057 or 6058; and (c) the patient is not an admitted patient; and (d) the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 km by road from the sexual health medicine specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies. *Derived fee: 50% of the fee for item 6051, 6052, 6057 or 6058 Benefit: 85% of the derived fee.



ITEM NO.	DESCRIPTION
15003	Radiotherapy, superficial (including treatment with x-rays, radium rays or other radioactive substances), not being a service to which another item in this Group applies - each attendance at which fractionated treatment is given - 2 or more fields up to a maximum of 5 additional fields. *Derived fee: The fee for item 15000 plus for each field in excess of 1, an amount of \$17.75
17609	Professional attendance on a patient by a specialist practising in his or her specialty of anaesthesia if: (a)the attendance is by video conference; and (b)item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655 applies to the attendance; and (c)the patient is not an admitted patient; and (d)the patient: (i) is located both: (A) within a telehealth eligible area; and (B) at the time of the attendance-at least 15 kms by road from the specialist; or (ii) is a care recipient in a residential care service; or (iii) is a patient of: (A) an Aboriginal Medical Service; or (B) an Aboriginal Community Controlled Health Service; for which a direction made under subsection 19 (2) of the Act applies. *Derived fee: 50% of the fee for item 17610, 17615, 17620, 17625, 17640, 17645, 17650, or 17655. Benefit: 85% of the derived fee.
18219	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, if continuous attendance by the medical practitioner extends beyond the first hour (Anaes.) *Derived fee: The fee for item 18216 plus \$19.80 for each additional 15 minutes or part thereof beyond the first hour of attendance by the medical practitioner.
18277	Intrathecal, combined spinal-epidural or epidural infusion of a therapeutic substance, initial injection or commencement of, where continuous attendance by a medical practitioner extends beyond the first hour, for a patient in labour, where the service is provided in the after hours period, being the period from 8pm to 8am on any weekday, or any time on a Saturday, a Sunday or a public holiday. *Derived fee: The fee for item 18226 plus \$29.75 for each additional 15 minutes or part there of beyond the first hour of attendance by the medical practitioner.
25025	Anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8pm to 8am on any weekday, or at any time on a Saturday, Sunday or a public holiday (0 basic units). *Derived fee: An additional amount of 50% of fee for the anaesthetic service. That is: (a) an anaesthesia item/s range 20100 - 21997 or 22900, plus (b) an item range 23010 - 24136, plus (c) if applicable, an item range 25000-25014, plus (d) where performed, any assoc. therapeutic or diagnostic service range 22002-22051.
25030	Assistance in the management of anaesthesia, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8pm to 8am on any weekday, or on a Saturday, Sunday or public holiday (0 basic units). *Derived fee: 50% of the fee for assistance at anaesthesia. That is: (a) an assistant anaesthesia item in the range 25200 - 25205, plus (b) an item range 23010-24136, plus (c) where applicable, an item range 25000-25014, plus (d) where performed, any associated therapeutic or diagnostic service 22002 -22051.



ITEM NO.	DESCRIPTION
25050	Perfusion, if the patient requires immediate treatment without which there would be significant threat to life or body part and if more than 50% of the service time occurs between 8pm to 8am on any weekday, or on a Saturday, Sunday or public holiday (0 basic units). *Derived fee: An additional amount of 50% of the fee for the perfusion service. That is: (a) item 22060, plus (b) an item range 23010 - 24136, plus (c) where applicable, an item range 25000 - 25014, plus (d) (d) where performed, any associated therapeutic or diagnostic service in the range 22002-22051 or 22065-22075.
25200	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). *Derived fee: An amount of \$103.00 (5 basic units) plus an item in the range 23010 - 24136 plus, where applicable - an item in the range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 – 22051.
25205	ASSISTANCE IN THE ADMINISTRATION OF ELECTIVE ANAESTHESIA where: (i) the patient has complex airway problems; or (ii) the patient is a neonate or a complex paediatric case; or (iii) there is anticipated to be massive blood loss (greater than 50% of blood volume) during the procedure; or (iv) the patient is critically ill, with multiple organ failure; or (v) where the anaesthesia time exceeds 6 hours and the assistance is provided to the exclusion of all other patients (5 basic units). *Derived fee: An amount of \$103.00 (5 basic units) plus an item in the range 23010 - 24136 plus, where applicable - an item in the range 25000 - 25020 plus, where performed, any associated therapeutic or diagnostic service/s in the range 22001 – 22051.
30001	OPERATIVE PROCEDURE, not being a service to which any other item in this Group applies, being a service to which an item in this Group would have applied had the procedure not been discontinued on medical grounds. *Derived fee: 50% of the fee which would have applied had the procedure not been discontinued.
31340	Muscle, bone or cartilage, excision of one or more of, if clinically indicated, and if: (a) the specimen excised is sent for histological confirmation; and (b)a malignant tumour of skin covered by item 31000, 31001, 31002, 31003, 31004, 31005, 31356, 31358, 31359, 31361, 31363, 31365, 31367, 31369, 31371,31372, 31373, 31374, 31375 or 31376 is excised (Anaes.) *Derived fee: 75% of the fee for excision of malignant tumour.
44376	Amputation stump, reamputation of, to provide adequate skin and muscle cover (Assist.). *Derived fee: 75% of the original amputation fee.
51303	Assistance at any operation identified by the word "Assist." for which the fee exceeds \$580.95 or at a series of operations identified by the word "Assist." for which the aggregate fee exceeds \$580.95. *Derived fee: one fifth of the established fee for the operation or combination of operations.



ITEM NO.	DESCRIPTION
51309	Assistance at a series or combination of operations that include (Assist.) and assistance at a birth involving Caesarean section. *Derived fee: one fifth of the established fee for the operation or combination of operations (the fee for item 16520 being the Schedule fee for the Caesarean section component in the calculation of the established fee).
51312	Assistance at any interventional obstetric procedure covered by items 16606, 16609, 16612, 16615 and 16627. *Derived fee: one fifth of the established fee for the procedure or combination of procedures.
51803	Assistance by an approved dental practitioner in the practice of oral and maxillofacial surgery at any operation specified in an item that includes '(Assist.)' for which the fee exceeds \$580.95 or at a series or combination of operations specified in items that include '(Assist)' if the aggregate fee exceeds \$580.95. *Derived fee: one fifth of the established fee for the operation or combination of operations.



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