

# Capital Blue Cross Separately Adjusted Procedure Codes

Effective August 1, 2021

Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
0362T	00	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	\$14.00	\$14.00	\$14.00	\$14.00
0362T	HM	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	\$14.00	\$14.00	\$14.00	\$14.00
0362T	HN	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	\$14.00	\$14.00	\$14.00	\$14.00
0362T	HO	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	\$14.00	\$14.00	\$14.00	\$14.00
0362T	HP	BEHAVIOR ID SUPPORT ASSMT EA 15 MIN TECH TIME	\$14.00	\$14.00	\$14.00	\$14.00
0373T	00	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TI	\$14.00	\$14.00	\$14.00	\$14.00
0373T	HM	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TI	\$14.00	\$14.00	\$14.00	\$14.00
0373T	HN	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TI	\$14.00	\$14.00	\$14.00	\$14.00
0373T	HO	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TI	\$14.00	\$14.00	\$14.00	\$14.00
0373T	HP	ADAPT BHV TX PRTCL MODIFICAJ EA 15 MIN TECH TI	\$14.00	\$14.00	\$14.00	\$14.00
11442	00	EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 1.1-2.0CM	\$195.35	\$149.99	\$191.60	\$147.10
11442	78	EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 1.1-2.0CM	\$156.28	\$119.99	\$153.28	\$117.68
12031	00	REPAIR INTERMEDIATE S/A/T/E 2.5 CM/<	\$257.11	\$158.29	\$252.16	\$155.24
12031	78	REPAIR INTERMEDIATE S/A/T/E 2.5 CM/<	\$205.69	\$126.63	\$201.73	\$124.20
13121	00	REPAIR, COMPLEX, SCALP, ARMS, AND/OR LEGS; 2.6	\$440.29	\$273.59	\$431.83	\$268.33
13121	78	REPAIR, COMPLEX, SCALP, ARMS, AND/OR LEGS; 2.6	\$352.24	\$218.87	\$345.46	\$214.67
13132	00	REPAIR, COMPLEX, FOREHEAD, CHEEKS, CHIN, MOUT	\$489.68	\$321.58	\$480.27	\$315.39
13132	78	REPAIR, COMPLEX, FOREHEAD, CHEEKS, CHIN, MOUT	\$391.75	\$257.26	\$384.21	\$252.32
13152	00	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIP	\$508.18	\$348.83	\$508.18	\$348.83
13152	78	REPAIR, COMPLEX, EYELIDS, NOSE, EARS AND/OR LIP	\$406.55	\$279.06	\$406.55	\$279.06
14040	00	ADJ TISS TRANS FOREHEAD NCK AX&/FT;10 SQ CM/L	\$779.44	\$648.26	\$764.45	\$635.80
14040	78	ADJ TISS TRANS FOREHEAD NCK AX&/FT;10 SQ CM/L	\$553.40	\$460.27	\$542.76	\$451.42
14041	00	ADJ TISS TRANS FOREHEAD NCK AX&/FT;10.1-30.0 CM	\$935.71	\$780.15	\$935.71	\$780.15
14041	78	ADJ TISS TRANS FOREHEAD NCK AX&/FT;10.1-30.0 CM	\$664.35	\$553.90	\$664.35	\$553.90
14060	00	ADJACENT TISSUE TRANSFER OR REARRANGEMENT,	\$792.92	\$690.92	\$777.67	\$677.64
14060	78	ADJACENT TISSUE TRANSFER OR REARRANGEMENT,	\$562.97	\$490.56	\$552.14	\$481.12
17000	00	DSTRJ ALL PRMLG 1ST LES	\$74.24	\$61.69	\$71.68	\$59.56
17000	78	DSTRJ ALL PRMLG 1ST LES	\$59.39	\$49.35	\$57.34	\$47.65
17110	00	DSTRJ B9 SK TGS/CUTAN VASC 15/>	\$126.27	\$76.85	\$121.91	\$74.20
17110	78	DSTRJ B9 SK TGS/CUTAN VASC 15/>	\$101.01	\$61.48	\$97.53	\$59.36
36415	00	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE	\$3.30	\$3.30	\$3.30	\$3.30
36475	00	ENDOVENUS ABLAT TX INCOMPETENT VEIN EXT RF; 1	\$1,595.27	\$343.81	\$1,542.09	\$332.35
36475	50	ENDOVENUS ABLAT TX INCOMPETENT VEIN EXT RF; 1	\$2,392.90	\$515.72	\$2,313.14	\$498.53
36476	00	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	\$365.27	\$166.84	\$353.09	\$161.27
36476	50	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND+ VEINS	\$547.90	\$250.25	\$529.64	\$241.91
43775	00	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PRO	\$1,336.04	\$1,336.04	\$1,289.97	\$1,289.97
43775	62	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PRO	\$835.03	\$835.03	\$806.23	\$806.23
43775	78	LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PRO	\$1,082.19	\$1,082.19	\$1,044.88	\$1,044.88
45378	00	COLONOSCOPY FLX DX W/COLLJ SPEC WHEN PFRMD	\$378.51	\$218.86	\$365.46	\$211.31
45378	53	COLONOSCOPY FLX DX W/COLLJ SPEC WHEN PFRMD	\$189.65	\$109.63	\$183.11	\$105.85
45380	00	COLONOSCOPY W/BIOPSY SINGLE/MULTIPLE	\$502.34	\$245.08	\$485.60	\$236.91
45384	00	COLSC FLX W/REMOVAL LESION BY HOT BX FORCEPS	\$560.70	\$279.48	\$542.01	\$270.16
45385	00	COLSC FLX W/RMVL OF TUMOR POLYP LESION SNAR	\$527.12	\$311.24	\$509.55	\$300.87
51741	00	COMPLEX UROFLOWMETRY (EG, CALIBRATED ELECT	\$16.56	\$16.56	\$15.99	\$15.99
51741	26	COMPLEX UROFLOWMETRY (EG, CALIBRATED ELECT	\$10.28	\$10.28	\$9.92	\$9.92

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51741	TC	COMPLEX UROFLOWMETRY (EG, CALIBRATED ELECT	\$6.29	\$6.29	\$6.07	\$6.07
51784	00	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR U	\$77.38	\$77.38	\$74.72	\$74.72
51784	26	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR U	\$45.21	\$45.21	\$43.65	\$43.65
51784	TC	ELECTROMYOGRAPHY STUDIES (EMG) OF ANAL OR U	\$32.18	\$32.18	\$31.07	\$31.07
51798	00	MEASUREMENT OF POST-VOIDING RESIDUAL URINE	\$11.38	\$11.38	\$10.99	\$10.99
52352	00	CYSTOURETHSCOPY W/URETERO&/PYELOSCPY; REM	\$419.85	\$419.85	\$405.37	\$405.37
52352	50	CYSTOURETHSCOPY W/URETERO&/PYELOSCPY; REM	\$629.78	\$629.78	\$608.06	\$608.06
52353	00	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/C	\$464.26	\$464.26	\$448.25	\$448.25
52353	50	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/C	\$696.38	\$696.38	\$672.37	\$672.37
55250	00	VASECTOMY, UNILATERAL OR BILATERAL (SEPARATE	\$414.09	\$266.20	\$399.81	\$257.02
55250	78	VASECTOMY, UNILATERAL OR BILATERAL (SEPARATE	\$331.27	\$212.96	\$319.85	\$205.61
55700	00	BIOPSY, PROSTATE; NEEDLE OR PUNCH, SINGLE OR N	\$284.98	\$154.74	\$275.15	\$149.41
55845	00	PROSTATECTOMY RETROPUBIC RAD; W/BIL LYMPHE	\$1,613.97	\$1,613.97	\$1,558.31	\$1,558.31
55845	62	PROSTATECTOMY RETROPUBIC RAD; W/BIL LYMPHE	\$1,008.73	\$1,008.73	\$973.94	\$973.94
55845	78	PROSTATECTOMY RETROPUBIC RAD; W/BIL LYMPHE	\$1,291.17	\$1,291.17	\$1,246.65	\$1,246.65
59400	00	ROUTINE OB CARE W/ANTPRTM CARE VAG DEL&PP	\$2,850.00	\$2,850.00	\$2,550.00	\$2,550.00
59510	00	ROUTINE OBSTETRIC CARE INCLUDING ANTEPARTUM	\$2,850.00	\$2,850.00	\$2,550.00	\$2,550.00
59610	00	ROUTINE OB CARE ANTPRTM-VAG DEL-PP PREV C/S	\$2,850.00	\$2,850.00	\$2,550.00	\$2,550.00
59618	00	ROUTINE OB CARE-C/S DEL AFT VAG TRY-PREV C/S D	\$2,850.00	\$2,850.00	\$2,550.00	\$2,550.00
70486	00	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; V	\$156.07	\$156.07	\$150.68	\$150.68
70486	26	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; V	\$50.15	\$50.15	\$48.42	\$48.42
70486	TC	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; V	\$105.92	\$105.92	\$102.27	\$102.27
70543	00	MRI ORBIT FACE&NCK C-/C+	\$435.70	\$435.70	\$420.67	\$420.67
70543	26	MRI ORBIT FACE&NCK C-/C+	\$124.62	\$124.62	\$120.32	\$120.32
70543	TC	MRI ORBIT FACE&NCK C-/C+	\$311.09	\$311.09	\$300.36	\$300.36
70551	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BR	\$258.97	\$258.97	\$250.34	\$250.34
70551	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BR	\$89.74	\$89.74	\$86.74	\$86.74
70551	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BR	\$169.24	\$169.24	\$163.59	\$163.59
70553	00	MRI BRAIN; W/O CONTRAST FOLLOWED BY CONTRA	\$528.90	\$528.90	\$514.80	\$514.80
70553	26	MRI BRAIN; W/O CONTRAST FOLLOWED BY CONTRA	\$172.80	\$172.80	\$168.19	\$168.19
70553	TC	MRI BRAIN; W/O CONTRAST FOLLOWED BY CONTRA	\$356.10	\$356.10	\$346.60	\$346.60
72141	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$273.08	\$273.08	\$264.68	\$264.68
72141	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$97.21	\$97.21	\$94.22	\$94.22
72141	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$175.85	\$175.85	\$170.44	\$170.44
72146	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$243.67	\$243.67	\$235.27	\$235.27
72146	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$86.74	\$86.74	\$83.75	\$83.75
72146	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$156.91	\$156.91	\$151.50	\$151.50
72148	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$315.58	\$315.58	\$307.17	\$307.17
72148	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$112.17	\$112.17	\$109.18	\$109.18
72148	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, SP	\$203.42	\$203.42	\$197.99	\$197.99
72156	00	MRI SPINAL CANAL W/O THEN W/CONTRAST CERV	\$426.37	\$426.37	\$412.16	\$412.16
72156	26	MRI SPINAL CANAL W/O THEN W/CONTRAST CERV	\$138.24	\$138.24	\$133.63	\$133.63
72156	TC	MRI SPINAL CANAL W/O THEN W/CONTRAST CERV	\$288.13	\$288.13	\$278.53	\$278.53
72157	00	MRI SPINAL CANAL W/O THEN W/CONTRAST; THORA	\$412.95	\$412.95	\$398.71	\$398.71
72157	26	MRI SPINAL CANAL W/O THEN W/CONTRAST; THORA	\$133.63	\$133.63	\$129.02	\$129.02

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72157	TC	MRI SPINAL CANAL W/O THEN W/CONTRAST; THORACIC	\$279.32	\$279.32	\$269.68	\$269.68
72158	00	MRI SPINAL CANAL W/O THEN W/CONTRAST; LUMBAL	\$425.56	\$425.56	\$411.37	\$411.37
72158	26	MRI SPINAL CANAL W/O THEN W/CONTRAST; LUMBAL	\$138.24	\$138.24	\$133.63	\$133.63
72158	TC	MRI SPINAL CANAL W/O THEN W/CONTRAST; LUMBAL	\$287.32	\$287.32	\$277.74	\$277.74
72195	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS	\$297.75	\$297.75	\$287.48	\$287.48
72195	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS	\$85.52	\$85.52	\$82.57	\$82.57
72195	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, PELVIS	\$212.23	\$212.23	\$204.92	\$204.92
72197	00	MRI PELVIS; W/O & W/CONTRST & FURTHER SEQUE	\$452.08	\$452.08	\$437.01	\$437.01
72197	26	MRI PELVIS; W/O & W/CONTRST & FURTHER SEQUE	\$131.89	\$131.89	\$127.50	\$127.50
72197	TC	MRI PELVIS; W/O & W/CONTRST & FURTHER SEQUE	\$320.18	\$320.18	\$309.51	\$309.51
73220	00	MRI UP EXTREM OTH THAN JT W/ & W/O CONTRAST	\$534.56	\$534.56	\$516.13	\$516.13
73220	26	MRI UP EXTREM OTH THAN JT W/ & W/O CONTRAST	\$125.00	\$125.00	\$120.69	\$120.69
73220	50	MRI UP EXTREM OTH THAN JT W/ & W/O CONTRAST	\$1,069.13	\$1,069.13	\$1,032.26	\$1,032.26
73220	TC	MRI UP EXTREM OTH THAN JT W/ & W/O CONTRAST	\$409.55	\$409.55	\$395.43	\$395.43
73221	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$332.91	\$332.91	\$324.03	\$324.03
73221	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$103.62	\$103.62	\$100.86	\$100.86
73221	50	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$665.82	\$665.82	\$648.06	\$648.06
73221	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$229.29	\$229.29	\$223.18	\$223.18
73222	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$408.02	\$408.02	\$393.95	\$393.95
73222	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$95.36	\$95.36	\$92.08	\$92.08
73222	50	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$816.04	\$816.04	\$787.90	\$787.90
73222	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$312.65	\$312.65	\$301.87	\$301.87
73223	00	MRI ANY JT UP EXTREM W/O & W/CONTRAST MATE	\$504.74	\$504.74	\$487.33	\$487.33
73223	26	MRI ANY JT UP EXTREM W/O & W/CONTRAST MATE	\$125.00	\$125.00	\$120.69	\$120.69
73223	50	MRI ANY JT UP EXTREM W/O & W/CONTRAST MATE	\$1,009.48	\$1,009.48	\$974.67	\$974.67
73223	TC	MRI ANY JT UP EXTREM W/O & W/CONTRAST MATE	\$379.74	\$379.74	\$366.64	\$366.64
73630	00	RADEX FOOT COMPL MINIMUM 3 VIEWS	\$40.96	\$40.96	\$39.70	\$39.70
73630	26	RADEX FOOT COMPL MINIMUM 3 VIEWS	\$11.06	\$11.06	\$10.72	\$10.72
73630	50	RADEX FOOT COMPL MINIMUM 3 VIEWS	\$81.93	\$81.93	\$79.41	\$79.41
73630	TC	RADEX FOOT COMPL MINIMUM 3 VIEWS	\$29.90	\$29.90	\$28.98	\$28.98
73718	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER	\$297.96	\$297.96	\$288.03	\$288.03
73718	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER	\$81.25	\$81.25	\$78.54	\$78.54
73718	50	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER	\$595.92	\$595.92	\$576.06	\$576.06
73718	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, LOWER	\$216.71	\$216.71	\$209.48	\$209.48
73720	00	MRI LW EXTREM NOT JNT NO CONTRST & FURTHER S	\$451.54	\$451.54	\$436.48	\$436.48
73720	26	MRI LW EXTREM NOT JNT NO CONTRST & FURTHER S	\$128.92	\$128.92	\$124.62	\$124.62
73720	50	MRI LW EXTREM NOT JNT NO CONTRST & FURTHER S	\$903.07	\$903.07	\$872.97	\$872.97
73720	TC	MRI LW EXTREM NOT JNT NO CONTRST & FURTHER S	\$322.62	\$322.62	\$311.87	\$311.87
73721	00	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$331.36	\$331.36	\$322.53	\$322.53
73721	26	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$102.07	\$102.07	\$99.35	\$99.35
73721	50	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$662.73	\$662.73	\$645.06	\$645.06
73721	TC	MAGNETIC RESONANCE (EG, PROTON) IMAGING, ANKLE	\$229.29	\$229.29	\$223.18	\$223.18
74178	00	CT ABD & PELVIS W/O CONTRST 1+ BODY REGNS	\$411.41	\$411.41	\$397.22	\$397.22
74178	26	CT ABD & PELVIS W/O CONTRST 1+ BODY REGNS	\$116.79	\$116.79	\$112.76	\$112.76
74178	TC	CT ABD & PELVIS W/O CONTRST 1+ BODY REGNS	\$294.61	\$294.61	\$284.45	\$284.45

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74183	00	MRI ABD W/O & W/CONTRAST & FURTHER SEQUENC	\$452.89	\$452.89	\$437.80	\$437.80
74183	26	MRI ABD W/O & W/CONTRAST & FURTHER SEQUENC	\$131.89	\$131.89	\$127.50	\$127.50
74183	TC	MRI ABD W/O & W/CONTRAST & FURTHER SEQUENC	\$321.00	\$321.00	\$310.30	\$310.30
76641	00	US BREAST UNI REAL TIME WITH IMAGE COMPLETE	\$120.43	\$120.43	\$116.28	\$116.28
76641	26	US BREAST UNI REAL TIME WITH IMAGE COMPLETE	\$42.36	\$42.36	\$40.90	\$40.90
76641	50	US BREAST UNI REAL TIME WITH IMAGE COMPLETE	\$180.65	\$180.65	\$174.42	\$174.42
76641	TC	US BREAST UNI REAL TIME WITH IMAGE COMPLETE	\$78.07	\$78.07	\$75.38	\$75.38
76642	00	US BREAST UNI REAL TIME WITH IMAGE LIMITED	\$102.12	\$102.12	\$98.72	\$98.72
76642	26	US BREAST UNI REAL TIME WITH IMAGE LIMITED	\$40.84	\$40.84	\$39.47	\$39.47
76642	50	US BREAST UNI REAL TIME WITH IMAGE LIMITED	\$153.18	\$153.18	\$148.07	\$148.07
76642	TC	US BREAST UNI REAL TIME WITH IMAGE LIMITED	\$61.28	\$61.28	\$59.24	\$59.24
76816	00	US PG UTRUS REAL TM F/U TRANSABD APPRCH-FETU	\$127.41	\$127.41	\$123.02	\$123.02
76816	26	US PG UTRUS REAL TM F/U TRANSABD APPRCH-FETU	\$49.35	\$49.35	\$47.64	\$47.64
76816	TC	US PG UTRUS REAL TM F/U TRANSABD APPRCH-FETU	\$78.07	\$78.07	\$75.38	\$75.38
76817	00	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH	\$107.93	\$107.93	\$104.20	\$104.20
76817	26	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH	\$43.59	\$43.59	\$42.09	\$42.09
76817	TC	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH	\$64.35	\$64.35	\$62.13	\$62.13
76942	00	US GUID NDLE PLCMT IMAGING SUPERVIS&INTEPR	\$70.43	\$70.43	\$68.17	\$68.17
76942	26	US GUID NDLE PLCMT IMAGING SUPERVIS&INTEPR	\$39.98	\$39.98	\$38.70	\$38.70
76942	TC	US GUID NDLE PLCMT IMAGING SUPERVIS&INTEPR	\$30.45	\$30.45	\$29.48	\$29.48
77014	00	COMPUTED TOMOGRAPHY GUIDANCE FOR PLACEMI	\$137.61	\$137.61	\$132.87	\$132.87
77014	26	COMPUTED TOMOGRAPHY GUIDANCE FOR PLACEMI	\$52.48	\$52.48	\$50.67	\$50.67
77014	TC	COMPUTED TOMOGRAPHY GUIDANCE FOR PLACEMI	\$85.13	\$85.13	\$82.20	\$82.20
77080	00	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONI	\$44.09	\$44.09	\$42.57	\$42.57
77080	26	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONI	\$11.52	\$11.52	\$11.12	\$11.12
77080	TC	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONI	\$32.57	\$32.57	\$31.45	\$31.45
88300	00	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATIO	\$15.53	\$15.53	\$15.53	\$15.53
88300	26	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATIO	\$4.73	\$4.73	\$4.73	\$4.73
88300	TC	LEVEL I - SURGICAL PATHOLOGY, GROSS EXAMINATIO	\$10.80	\$10.80	\$10.80	\$10.80
88302	00	LEVEL II - SURGICAL PATHOLOGY GROSS & MIC EXAM	\$30.62	\$30.62	\$30.62	\$30.62
88302	26	LEVEL II - SURGICAL PATHOLOGY GROSS & MIC EXAM	\$7.28	\$7.28	\$7.28	\$7.28
88302	TC	LEVEL II - SURGICAL PATHOLOGY GROSS & MIC EXAM	\$23.34	\$23.34	\$23.34	\$23.34
88304	00	LEVEL III - SURGICAL PATH GROSS & MICRO EXAM	\$49.68	\$49.68	\$48.09	\$48.09
88304	26	LEVEL III - SURGICAL PATH GROSS & MICRO EXAM	\$14.59	\$14.59	\$14.12	\$14.12
88304	TC	LEVEL III - SURGICAL PATH GROSS & MICRO EXAM	\$35.10	\$35.10	\$33.98	\$33.98
88305	00	LEVEL IV - SURGICAL PATHOLOGY GROSS & MICRO EX	\$85.85	\$85.85	\$83.10	\$83.10
88305	26	LEVEL IV - SURGICAL PATHOLOGY GROSS & MICRO EX	\$48.21	\$48.21	\$46.67	\$46.67
88305	TC	LEVEL IV - SURGICAL PATHOLOGY GROSS & MICRO EX	\$37.62	\$37.62	\$36.42	\$36.42
88307	00	LEVEL V- SURG PATH GROSS/MICRO EXAM	\$275.45	\$275.45	\$275.45	\$275.45
88307	26	LEVEL V- SURG PATH GROSS/MICRO EXAM	\$87.34	\$87.34	\$87.34	\$87.34
88307	TC	LEVEL V- SURG PATH GROSS/MICRO EXAM	\$188.11	\$188.11	\$188.11	\$188.11
88309	00	LEVEL VI - SURGICAL PATHOLOGY GROSS & MICRO EX	\$419.36	\$419.36	\$419.36	\$419.36
88309	26	LEVEL VI - SURGICAL PATHOLOGY GROSS & MICRO EX	\$153.93	\$153.93	\$153.93	\$153.93
88309	TC	LEVEL VI - SURGICAL PATHOLOGY GROSS & MICRO EX	\$265.43	\$265.43	\$265.43	\$265.43
88311	00	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN	\$21.83	\$21.83	\$21.83	\$21.83



## Capital Blue Cross Separately Adjusted Procedure Codes

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Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
88311	26	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN	\$13.11	\$13.11	\$13.11	\$13.11
88311	TC	DECALCIFICATION PROCEDURE (LIST SEPARATELY IN	\$8.71	\$8.71	\$8.71	\$8.71
88312	00	SPECIAL STAIN GROUP 1 MICROORGANISMS I&R	\$104.73	\$104.73	\$104.73	\$104.73
88312	26	SPECIAL STAIN GROUP 1 MICROORGANISMS I&R	\$28.09	\$28.09	\$28.09	\$28.09
88312	TC	SPECIAL STAIN GROUP 1 MICROORGANISMS I&R	\$76.63	\$76.63	\$76.63	\$76.63
88313	00	SPCL STN 2 I&R EXCPT MICROORG/ENZYME/IMCYT&	\$75.12	\$75.12	\$75.12	\$75.12
88313	26	SPCL STN 2 I&R EXCPT MICROORG/ENZYME/IMCYT&	\$12.76	\$12.76	\$12.76	\$12.76
88313	TC	SPCL STN 2 I&R EXCPT MICROORG/ENZYME/IMCYT&	\$62.36	\$62.36	\$62.36	\$62.36
88314	00	SPECIAL STAIN I&R HISTOCHEMICAL W/FROZEN TISS	\$96.16	\$96.16	\$96.16	\$96.16
88314	26	SPECIAL STAIN I&R HISTOCHEMICAL W/FROZEN TISS	\$23.35	\$23.35	\$23.35	\$23.35
88314	TC	SPECIAL STAIN I&R HISTOCHEMICAL W/FROZEN TISS	\$72.80	\$72.80	\$72.80	\$72.80
88319	00	SPECIAL STAIN I&R GROUP III ENZYME CONSITUENTS	\$110.97	\$110.97	\$110.97	\$110.97
88319	26	SPECIAL STAIN I&R GROUP III ENZYME CONSITUENTS	\$28.42	\$28.42	\$28.42	\$28.42
88319	TC	SPECIAL STAIN I&R GROUP III ENZYME CONSITUENTS	\$82.55	\$82.55	\$82.55	\$82.55
88321	00	CONSULTATION AND REPORT ON REFERRED SLIDES F	\$102.81	\$88.88	\$102.81	\$88.88
88323	00	CONSULTATION AND REPORT ON REFERRED MATERI	\$117.86	\$117.86	\$117.86	\$117.86
88323	26	CONSULTATION AND REPORT ON REFERRED MATERI	\$92.07	\$92.07	\$92.07	\$92.07
88323	TC	CONSULTATION AND REPORT ON REFERRED MATERI	\$25.78	\$25.78	\$25.78	\$25.78
88325	00	CONSULTATION, COMPREHENSIVE, WITH REVIEW OF	\$179.54	\$152.37	\$179.54	\$152.37
88329	00	PATHOLOGY CONSULTATION DURING SURGERY;	\$54.21	\$38.18	\$54.21	\$38.18
88331	00	PATHOLOGY CONSULTATION DURING SURGERY; FIRS	\$99.64	\$99.64	\$99.64	\$99.64
88331	26	PATHOLOGY CONSULTATION DURING SURGERY; FIRS	\$65.85	\$65.85	\$65.85	\$65.85
88331	TC	PATHOLOGY CONSULTATION DURING SURGERY; FIRS	\$33.79	\$33.79	\$33.79	\$33.79
88332	00	PATH CONSLTJ SURG EA BLK FROZEN SCTJ	\$55.03	\$55.03	\$55.03	\$55.03
88332	26	PATH CONSLTJ SURG EA BLK FROZEN SCTJ	\$32.73	\$32.73	\$32.73	\$32.73
88332	TC	PATH CONSLTJ SURG EA BLK FROZEN SCTJ	\$22.30	\$22.30	\$22.30	\$22.30
88333	00	PATHOLOGY CONSULTATION DURING SURGERY; CYT	\$91.65	\$91.65	\$91.65	\$91.65
88333	26	PATHOLOGY CONSULTATION DURING SURGERY; CYT	\$65.87	\$65.87	\$65.87	\$65.87
88333	TC	PATHOLOGY CONSULTATION DURING SURGERY; CYT	\$25.78	\$25.78	\$25.78	\$25.78
88334	00	PATH CONSLTJ SURG CYTOL XM EA ADDL	\$57.44	\$57.44	\$57.44	\$57.44
88334	26	PATH CONSLTJ SURG CYTOL XM EA ADDL	\$40.04	\$40.04	\$40.04	\$40.04
88334	TC	PATH CONSLTJ SURG CYTOL XM EA ADDL	\$17.42	\$17.42	\$17.42	\$17.42
88341	00	IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY SLIDE	\$92.23	\$92.23	\$92.23	\$92.23
88341	26	IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY SLIDE	\$29.88	\$29.88	\$29.88	\$29.88
88341	TC	IMHISTOCHEM/CYTCHM EA ADDL ANTIBODY SLIDE	\$62.35	\$62.35	\$62.35	\$62.35
88342	00	IMHISTOCHEM/CYTCHM INIT ANTIBODY STAIN PROC	\$105.10	\$105.10	\$105.10	\$105.10
88342	26	IMHISTOCHEM/CYTCHM INIT ANTIBODY STAIN PROC	\$37.17	\$37.17	\$37.17	\$37.17
88342	TC	IMHISTOCHEM/CYTCHM INIT ANTIBODY STAIN PROC	\$67.93	\$67.93	\$67.93	\$67.93
88344	00	IMHISTOCHEM/CYTCHM EA MULTIPLEX ANTIBODY S	\$171.09	\$171.09	\$171.09	\$171.09
88344	26	IMHISTOCHEM/CYTCHM EA MULTIPLEX ANTIBODY S	\$40.47	\$40.47	\$40.47	\$40.47
88344	TC	IMHISTOCHEM/CYTCHM EA MULTIPLEX ANTIBODY S	\$130.62	\$130.62	\$130.62	\$130.62
88346	00	IMMUNOFLUORESCENCE PER SPEC 1ST SINGL ANTB	\$125.74	\$125.74	\$125.74	\$125.74
88346	26	IMMUNOFLUORESCENCE PER SPEC 1ST SINGL ANTB	\$37.97	\$37.97	\$37.97	\$37.97
88346	TC	IMMUNOFLUORESCENCE PER SPEC 1ST SINGL ANTB	\$87.78	\$87.78	\$87.78	\$87.78
88348	00	ELECTRON MICROSCOPY; DIAGNOSTIC	\$383.95	\$383.95	\$383.95	\$383.95

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Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
88348	26	ELECTRON MICROSCOPY; DIAGNOSTIC	\$80.53	\$80.53	\$80.53	\$80.53
88348	TC	ELECTRON MICROSCOPY; DIAGNOSTIC	\$303.43	\$303.43	\$303.43	\$303.43
88350	00	IMMUNOFLUORESCENCE PER SPEC ADD SINGL ANTB	\$92.31	\$92.31	\$92.31	\$92.31
88350	26	IMMUNOFLUORESCENCE PER SPEC ADD SINGL ANTB	\$30.65	\$30.65	\$30.65	\$30.65
88350	TC	IMMUNOFLUORESCENCE PER SPEC ADD SINGL ANTB	\$61.66	\$61.66	\$61.66	\$61.66
88355	00	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	\$139.49	\$139.49	\$139.49	\$139.49
88355	26	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	\$87.24	\$87.24	\$87.24	\$87.24
88355	TC	MORPHOMETRIC ANALYSIS; SKELETAL MUSCLE	\$52.25	\$52.25	\$52.25	\$52.25
88356	00	MORPHOMETRIC ANALYSIS; NERVE	\$238.61	\$238.61	\$238.61	\$238.61
88356	26	MORPHOMETRIC ANALYSIS; NERVE	\$135.82	\$135.82	\$135.82	\$135.82
88356	TC	MORPHOMETRIC ANALYSIS; NERVE	\$102.79	\$102.79	\$102.79	\$102.79
88358	00	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PLOID	\$133.56	\$133.56	\$133.56	\$133.56
88358	26	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PLOID	\$52.75	\$52.75	\$52.75	\$52.75
88358	TC	MORPHOMETRIC ANALYSIS; TUMOR (EG, DNA PLOID	\$80.81	\$80.81	\$80.81	\$80.81
88360	00	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTIBODY N	\$124.96	\$124.96	\$124.96	\$124.96
88360	26	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTIBODY N	\$44.50	\$44.50	\$44.50	\$44.50
88360	TC	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTIBODY N	\$80.46	\$80.46	\$80.46	\$80.46
88361	00	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTBDY CM	\$126.94	\$126.94	\$126.94	\$126.94
88361	26	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTBDY CM	\$47.16	\$47.16	\$47.16	\$47.16
88361	TC	M/PHMTRC ALYS TUMOR IMHCHEM EA ANTBDY CM	\$79.77	\$79.77	\$79.77	\$79.77
88362	00	NERVE TEASING PREPARATIONS	\$229.45	\$229.45	\$229.45	\$229.45
88362	26	NERVE TEASING PREPARATIONS	\$119.03	\$119.03	\$119.03	\$119.03
88362	TC	NERVE TEASING PREPARATIONS	\$110.43	\$110.43	\$110.43	\$110.43
88363	00	EXAM & SELECT ARCHIVE TISSUE MOLECULAR ANALY	\$24.22	\$20.73	\$24.22	\$20.73
88364	00	IN SITU HYBRIDIZATION EA ADDL PROBE STAIN	\$137.14	\$137.14	\$137.14	\$137.14
88364	26	IN SITU HYBRIDIZATION EA ADDL PROBE STAIN	\$36.48	\$36.48	\$36.48	\$36.48
88364	TC	IN SITU HYBRIDIZATION EA ADDL PROBE STAIN	\$100.67	\$100.67	\$100.67	\$100.67
88365	00	IN SITU HYBRIDIZATION 1ST PROBE STAIN	\$179.74	\$179.74	\$179.74	\$179.74
88365	26	IN SITU HYBRIDIZATION 1ST PROBE STAIN	\$46.31	\$46.31	\$46.31	\$46.31
88365	TC	IN SITU HYBRIDIZATION 1ST PROBE STAIN	\$133.42	\$133.42	\$133.42	\$133.42
88366	00	IN SITU HYBRIDIZATION EA MULTIPLEX PROBE STAIN	\$274.62	\$274.62	\$274.62	\$274.62
88366	26	IN SITU HYBRIDIZATION EA MULTIPLEX PROBE STAIN	\$65.61	\$65.61	\$65.61	\$65.61
88366	TC	IN SITU HYBRIDIZATION EA MULTIPLEX PROBE STAIN	\$209.00	\$209.00	\$209.00	\$209.00
88367	00	M/PHMTRC ALYS ISH CPTR-ASST TECH 1ST PROBE ST	\$112.84	\$112.84	\$112.84	\$112.84
88367	26	M/PHMTRC ALYS ISH CPTR-ASST TECH 1ST PROBE ST	\$36.20	\$36.20	\$36.20	\$36.20
88367	TC	M/PHMTRC ALYS ISH CPTR-ASST TECH 1ST PROBE ST	\$76.63	\$76.63	\$76.63	\$76.63
88368	00	M/PHMTRC ALYS IN SITU HYBRIDIZATION EA PROBE	\$131.30	\$131.30	\$131.30	\$131.30
88368	26	M/PHMTRC ALYS IN SITU HYBRIDIZATION EA PROBE	\$43.87	\$43.87	\$43.87	\$43.87
88368	TC	M/PHMTRC ALYS IN SITU HYBRIDIZATION EA PROBE	\$87.44	\$87.44	\$87.44	\$87.44
88369	00	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL PER SPEC	\$114.15	\$114.15	\$114.15	\$114.15
88369	26	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL PER SPEC	\$34.39	\$34.39	\$34.39	\$34.39
88369	TC	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL PER SPEC	\$79.77	\$79.77	\$79.77	\$79.77
88371	26	PROTEIN ANALYSIS OF TISSUE BY WESTERN BLOT, W	\$20.72	\$20.72	\$20.72	\$20.72
88372	26	PROT ANALY W BLOT W/INTRPT/REPR; IMMUN PRO	\$19.34	\$19.34	\$19.34	\$19.34
88373	00	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR PER SPEC	\$73.81	\$73.81	\$73.81	\$73.81

## Capital Blue Cross Separately Adjusted Procedure Codes

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Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
88373	26	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR PER SPEC	\$28.19	\$28.19	\$28.19	\$28.19
88373	TC	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR PER SPEC	\$45.63	\$45.63	\$45.63	\$45.63
88374	00	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR EACH MU	\$338.31	\$338.31	\$338.31	\$338.31
88374	26	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR EACH MU	\$46.77	\$46.77	\$46.77	\$46.77
88374	TC	M/PHMTRC ALYS ISH QUANT/SEMIQ CPTR EACH MU	\$291.54	\$291.54	\$291.54	\$291.54
88375	00	OPTICAL ENDOMICROSCOPIC IMAGE INTERP & REPO	\$51.63	\$51.63	\$51.63	\$51.63
88377	00	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL EACH MU	\$400.73	\$400.73	\$400.73	\$400.73
88377	26	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL EACH MU	\$68.43	\$68.43	\$68.43	\$68.43
88377	TC	M/PHMTRC ALYS ISH QUANT/SEMIQ MNL EACH MU	\$332.30	\$332.30	\$332.30	\$332.30
88380	00	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$135.75	\$135.75	\$135.75	\$135.75
88380	26	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$58.41	\$58.41	\$58.41	\$58.41
88380	TC	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$77.34	\$77.34	\$77.34	\$77.34
88381	00	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$177.87	\$177.87	\$177.87	\$177.87
88381	26	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$26.33	\$26.33	\$26.33	\$26.33
88381	TC	MICRODISSECTION (IE, SAMPLE PREPARATION OF M	\$151.53	\$151.53	\$151.53	\$151.53
88387	00	MACRO EXAM DISSECT&PREP TISS NONMICRO STD E	\$36.30	\$36.30	\$36.30	\$36.30
88387	26	MACRO EXAM DISSECT&PREP TISS NONMICRO STD E	\$29.32	\$29.32	\$29.32	\$29.32
88387	TC	MACRO EXAM DISSECT&PREP TISS NONMICRO STD E	\$6.97	\$6.97	\$6.97	\$6.97
88388	00	MACR EXM DISS&PRP NONMICR IMPRNT/CONSLT/F	\$37.30	\$37.30	\$37.30	\$37.30
88388	26	MACR EXM DISS&PRP NONMICR IMPRNT/CONSLT/F	\$25.09	\$25.09	\$25.09	\$25.09
88388	TC	MACR EXM DISS&PRP NONMICR IMPRNT/CONSLT/F	\$12.20	\$12.20	\$12.20	\$12.20
90460	00	IM ADM THRU 18YR ANY RTE 1ST/ONLY COMPT VAC	\$18.88	\$18.88	\$18.23	\$18.23
90471	00	IMADM PRQ ID SUBQ/IM NJXS 1 VACC	\$18.88	\$18.88	\$18.23	\$18.23
90473	00	IMMUNIZATION ADMINISTRATION BY INTRANASAL C	\$18.88	\$18.88	\$18.23	\$18.23
90832	00	PSYCHOTHERAPY W/PATIENT 30 MINUTES	\$78.49	\$70.91	\$78.49	\$70.91
90833	00	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 30 MIN	\$80.38	\$73.56	\$80.38	\$73.56
90834	00	PSYCHOTHERAPY W/PATIENT 45 MINUTES	\$104.40	\$94.55	\$104.40	\$94.55
90836	00	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 45 MIN	\$101.88	\$93.16	\$101.88	\$93.16
90837	00	PSYCHOTHERAPY W/PATIENT 60 MINUTES	\$156.21	\$141.43	\$156.21	\$141.43
90838	00	PSYCHOTHERAPY W/PATIENT W/E&M SRVCS 60 MIN	\$133.71	\$122.35	\$133.71	\$122.35
90839	00	PSYCHOTHERAPY FOR CRISIS INITIAL 60 MINUTES	\$162.98	\$147.83	\$157.16	\$142.55
90840	00	PSYCHOTHERAPY FOR CRISIS EACH ADDL 30 MINUTE	\$80.90	\$73.44	\$78.11	\$70.91
90853	00	GROUP PSYCHOTHERAPY (OTHER THAN OF A MULTIP	\$31.06	\$28.03	\$31.06	\$28.03
90870	00	ELECTROCONVULSIVE THERAPY (INCLUDES NECESSA	\$181.48	\$115.37	\$177.99	\$113.15
92133	00	COMPUTERIZED OPHTHALMIC IMAGING OPTIC NERV	\$42.26	\$42.26	\$40.80	\$40.80
92133	26	COMPUTERIZED OPHTHALMIC IMAGING OPTIC NERV	\$25.78	\$25.78	\$24.89	\$24.89
92133	TC	COMPUTERIZED OPHTHALMIC IMAGING OPTIC NERV	\$16.48	\$16.48	\$15.92	\$15.92
92134	00	COMPUTERIZED OPHTHALMIC IMAGING RETINA	\$46.32	\$46.32	\$44.72	\$44.72
92134	26	COMPUTERIZED OPHTHALMIC IMAGING RETINA	\$29.44	\$29.44	\$28.43	\$28.43
92134	TC	COMPUTERIZED OPHTHALMIC IMAGING RETINA	\$16.88	\$16.88	\$16.30	\$16.30
92250	00	FUNDUS PHOTOGRAPHY WITH INTERPRETATION AN	\$50.89	\$50.89	\$49.13	\$49.13
92250	26	FUNDUS PHOTOGRAPHY WITH INTERPRETATION AN	\$25.00	\$25.00	\$24.14	\$24.14
92250	TC	FUNDUS PHOTOGRAPHY WITH INTERPRETATION AN	\$25.90	\$25.90	\$25.01	\$25.01
93000	00	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAS	\$19.96	\$19.96	\$19.29	\$19.29
93005	00	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAS	\$9.74	\$9.74	\$9.42	\$9.42

## Capital Blue Cross Separately Adjusted Procedure Codes

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Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
93010	00	ELECTROCARDIOGRAM, ROUTINE ECG WITH AT LEAS	\$10.21	\$10.21	\$9.87	\$9.87
93015	00	CV STRS TST XERS&/OR RX CONT ECG W/SI&R	\$83.24	\$83.24	\$80.47	\$80.47
93018	00	CV STRESS TEST W/TREADMILL; INTERPT & REPT ON	\$17.27	\$17.27	\$16.68	\$16.68
93224	00	XTRNL ECG & 48 HR RECORD SCAN STOR W/R&I	\$99.09	\$99.09	\$95.67	\$95.67
93925	00	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR A	\$283.45	\$283.45	\$273.67	\$273.67
93925	26	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR A	\$45.70	\$45.70	\$44.13	\$44.13
93925	TC	DUPLEX SCAN OF LOWER EXTREMITY ARTERIES OR A	\$237.74	\$237.74	\$229.54	\$229.54
93970	00	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$244.37	\$244.37	\$236.85	\$236.85
93970	26	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$45.21	\$45.21	\$43.82	\$43.82
93970	TC	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$199.16	\$199.16	\$193.03	\$193.03
93971	00	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$146.72	\$146.72	\$142.03	\$142.03
93971	26	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$27.94	\$27.94	\$27.04	\$27.04
93971	TC	DUPLEX SCAN OF EXTREMITY VEINS INCLUDING RESP	\$118.79	\$118.79	\$114.99	\$114.99
93975	00	DUPLEX SCAN IN-OUTFLO ABD/PELV ORGAN; CMPL S	\$347.78	\$347.78	\$337.08	\$337.08
93975	26	DUPLEX SCAN IN-OUTFLO ABD/PELV ORGAN; CMPL S	\$75.18	\$75.18	\$72.87	\$72.87
93975	TC	DUPLEX SCAN IN-OUTFLO ABD/PELV ORGAN; CMPL S	\$272.58	\$272.58	\$264.20	\$264.20
95117	00	PROF SVCS ALLG IMMNTX X W/PRV ALLGIC XTRCS NJ	\$11.77	\$11.77	\$11.37	\$11.37
95810	00	POLYSOM 6/>YRS SLEEP 4/> ADDL PARAM ATTND	\$681.87	\$681.87	\$658.36	\$658.36
95810	26	POLYSOM 6/>YRS SLEEP 4/> ADDL PARAM ATTND	\$142.01	\$142.01	\$137.11	\$137.11
95810	TC	POLYSOM 6/>YRS SLEEP 4/> ADDL PARAM ATTND	\$539.86	\$539.86	\$521.25	\$521.25
95811	00	POLYSOM 6/>YRS SLEEP W/CPAP 4/> ADDL PARAM A	\$712.34	\$712.34	\$687.78	\$687.78
95811	26	POLYSOM 6/>YRS SLEEP W/CPAP 4/> ADDL PARAM A	\$147.38	\$147.38	\$142.30	\$142.30
95811	TC	POLYSOM 6/>YRS SLEEP W/CPAP 4/> ADDL PARAM A	\$564.97	\$564.97	\$545.48	\$545.48
96365	00	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST >1 HO	\$81.78	\$81.78	\$79.05	\$79.05
96366	00	IV INFUSION THERAPY PROPHYLAXIS/DX EA HOUR	\$24.42	\$24.42	\$23.58	\$23.58
96367	00	IV INFUSION THER PROPH ADDL SEQUENTIAL TO 1 H	\$35.84	\$35.84	\$34.65	\$34.65
96372	00	THERAPEUTIC PROPHYLACTIC/DX INJECTION SUBQ/I	\$18.88	\$18.88	\$18.23	\$18.23
96374	00	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRU	\$43.60	\$43.60	\$42.10	\$42.10
96375	00	THER PROPH/DX NJX EA SEQL IV PUSH SBST/DRUG	\$18.32	\$18.32	\$17.68	\$17.68
96409	00	CHEMOTHERAPY ADMINISTRATION; INTRAVENOUS,	\$120.35	\$120.35	\$116.20	\$116.20
96411	00	CHEMOTX ADMN IV PUSH TQ EA SBST/DRUG	\$65.69	\$65.69	\$63.43	\$63.43
96413	00	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS I	\$161.14	\$161.14	\$155.76	\$155.76
96415	00	CHEMOTHERAPY ADMN IV INFUSION TQ EA HR	\$35.03	\$35.03	\$33.86	\$33.86
96416	00	CHEMOTX ADMN TQ INIT PROLNG CHEMOTX NFUS P	\$155.59	\$155.59	\$150.23	\$150.23
96417	00	CHEMOTX ADMN IV NFS TQ EA SEQL NFS TO 1 HR	\$78.54	\$78.54	\$75.92	\$75.92
97151	00	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97151	HO	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97151	HP	BEHAVIOR ID ASSESSMENT BY PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97153	00	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 N	\$14.00	\$14.00	\$14.00	\$14.00
97153	HM	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 N	\$14.00	\$14.00	\$14.00	\$14.00
97153	HN	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 N	\$14.00	\$14.00	\$14.00	\$14.00
97153	HO	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 N	\$14.00	\$14.00	\$14.00	\$14.00
97153	HP	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 N	\$14.00	\$14.00	\$14.00	\$14.00
97154	00	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97154	HM	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15	\$5.64	\$5.64	\$5.64	\$5.64



## Capital Blue Cross Separately Adjusted Procedure Codes

Effective August 1, 2021

Procedure Code	Mod	Procedure Code Description	CAIC/CAAC NonFacility	CAIC/CAAC Facility	KHP NonFacility	KHP Facility
97154	HN	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97154	HO	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97154	HP	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97155	00	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 M	\$24.30	\$24.30	\$24.30	\$24.30
97155	HM	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 M	\$24.30	\$24.30	\$24.30	\$24.30
97155	HN	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 M	\$24.30	\$24.30	\$24.30	\$24.30
97155	HO	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 M	\$24.30	\$24.30	\$24.30	\$24.30
97155	HP	ADAPT BHV TX PRTCL MODIFICAJ PHYS/QHP EA 15 M	\$24.30	\$24.30	\$24.30	\$24.30
97156	00	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97156	HM	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97156	HN	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97156	HO	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97156	HP	FAMILY ADAPT BHV TX GDN PHYS/QHP EA 15 MIN	\$24.30	\$24.30	\$24.30	\$24.30
97157	00	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 1	\$24.30	\$24.30	\$24.30	\$24.30
97157	HM	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 1	\$24.30	\$24.30	\$24.30	\$24.30
97157	HN	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 1	\$24.30	\$24.30	\$24.30	\$24.30
97157	HO	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 1	\$24.30	\$24.30	\$24.30	\$24.30
97157	HP	MULTIPLE FAM GROUP BHV TX GDN PHYS/QHP EA 1	\$24.30	\$24.30	\$24.30	\$24.30
97158	00	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97158	HM	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97158	HN	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97158	HO	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15	\$5.64	\$5.64	\$5.64	\$5.64
97158	HP	GRP ADAPT BHV PRTCL MODIFCAJ PHYS/QHP EA 15	\$5.64	\$5.64	\$5.64	\$5.64
99211	00	OFFICE/OUTPATIENT ESTABLISHED MINIMAL PROBLE	\$25.98	\$10.68	\$25.09	\$10.32
99212	00	OFFICE/OUTPATIENT ESTABLISHED SF MDM 10-19 M	\$50.64	\$29.43	\$48.86	\$28.40
99213	00	OFFICE/OUTPATIENT ESTABLISHED LOW MDM 20-29	\$83.93	\$58.48	\$80.98	\$56.43
99214	00	OFFICE/OUTPATIENT ESTABLISHED MOD MDM 30-39	\$121.96	\$89.96	\$117.68	\$86.80
99215	00	OFFICE/OUTPATIENT ESTABLISHED HIGH MDM 40-54	\$164.06	\$127.04	\$158.30	\$122.58
99224	00	SBSQ OBSERVATION CARE/DAY 15 MINUTES	\$40.44	\$40.44	\$40.44	\$40.44
99226	00	SBSQ OBSERVATION CARE/DAY 35 MINUTES	\$106.50	\$106.50	\$106.50	\$106.50
99235	00	OBSERVATION/INPATIENT HOSPITAL CARE 50 MINUT	\$189.12	\$189.12	\$182.37	\$182.37
99241	00	OFFICE CONSULTATION NEW/ESTAB PATIENT 15 MIN	\$54.69	\$38.22	\$52.81	\$36.90
99242	00	OFFICE CONSULTATION NEW/ESTAB PATIENT 30 MIN	\$103.67	\$80.53	\$100.09	\$77.75
99243	00	OFFICE CONSULTATION NEW/ESTAB PATIENT 40 MIN	\$142.01	\$112.58	\$137.11	\$108.70
99244	00	OFFICE CONSULTATION NEW/ESTAB PATIENT 60 MIN	\$213.36	\$181.19	\$206.00	\$174.94
99245	00	OFFICE CONSULTATION NEW/ESTAB PATIENT 80 MIN	\$260.11	\$224.02	\$251.14	\$216.29
99251	00	INITL INPATIENT CONSULT NEW/ESTAB PT 20 MIN	\$56.03	\$56.03	\$54.03	\$54.03
99252	00	INITL INPATIENT CONSULT NEW/ESTAB PT 40 MIN	\$87.61	\$87.61	\$84.59	\$84.59
99253	00	INITL INPATIENT CONSULT NEW/ESTAB PT 55 MIN	\$130.56	\$130.56	\$125.90	\$125.90
99254	00	INITL INPATIENT CONSULT NEW/ESTAB PT 80 MIN	\$190.04	\$190.04	\$183.25	\$183.25
99255	00	INITIAL INPATIENT CONSULT NEW/ESTAB PT 110 MIN	\$236.80	\$236.80	\$228.64	\$228.64
99304	00	INITIAL NURSING FACILITY CARE/DAY 25 MINUTES	\$91.85	\$91.85	\$91.85	\$91.85
99305	00	INITIAL NURSING FACILITY CARE/DAY 35 MINUTES	\$134.04	\$134.04	\$131.46	\$131.46
99306	00	INITIAL NURSING FACILITY CARE/DAY 45 MINUTES	\$169.72	\$169.72	\$169.72	\$169.72
99308	00	SBSQ NURSING FACIL CARE/DAY MINOR COMPLJ 15	\$71.39	\$71.39	\$70.01	\$70.01

## Capital Blue Cross Separately Adjusted Procedure Codes

**Effective August 1, 2021**

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