

Effective October 17, 2007, for dates of service on or after January 1, 2007, the rates for physician-administered drugs/biologicals, durable medical equipment, prosthetics, orthotics, and supplies are as shown in the following table:

<b>TOS</b>	<b>Procedure Code</b>	<b>Current Fee</b>	<b>Proposed Fee</b>
1	J0348	\$0.00	\$1.91
1	J0364	\$0.00	\$2.99
1	J0594	\$0.00	\$8.89
1	J0894	\$0.00	\$26.48
1	J1324	\$0.00	\$21.00
1	J1562	\$0.00	\$10.20
1	J1740	\$0.00	\$138.71
1	J2248	\$0.00	\$1.71
1	J2315*	\$0.00	\$1.90
1	J3243	\$0.00	\$0.91
1	J3473	\$0.00	\$0.40
1	J7345	\$0.00	\$36.10
1	J7346	\$0.00	\$735.38
1	J9261	\$0.00	\$83.33
1	S0180	\$0.00	\$585.11
9	A4461	\$0.00	\$3.29
9	A4600	\$0.00	\$112.32
9	A4601	\$0.00	\$2.34
9	A8000	\$0.00	\$153.35
9	A8001	\$0.00	\$153.35
9	A8002	\$0.00	\$385.41
9	A8003	\$0.00	\$385.41
9	A8004	\$0.00	\$125.84
9	L1001	\$0.00	\$800.00
9	L3806	\$0.00	\$348.98
9	L3808	\$0.00	\$216.81
9	L3915	\$0.00	\$408.38
9	L5993	\$0.00	\$2,500.00
9	L5994	\$0.00	\$3,138.98
9	L6611	\$0.00	\$384.24
9	L6624	\$0.00	\$3,185.32
9	L6639	\$0.00	\$1,289.97
9	L6703	\$0.00	\$276.63
9	L6704	\$0.00	\$648.73

<b>TOS</b>	<b>Procedure Code</b>	<b>Current Fee</b>	<b>Proposed Fee</b>
9	L6706	\$0.00	\$336.56
9	L6707	\$0.00	\$1,197.57
9	L6708	\$0.00	\$804.87
9	L6709	\$0.00	\$1,180.90
9	L7007	\$0.00	\$3,837.72
9	T4543	\$0.00	\$0.58
J	E0676	\$0.00	\$384.20
J	E2373	\$0.00	\$1,209.93
J	E2374	\$998.38	\$534.02
J	E2375	\$0.00	\$856.56
J	E2376	\$0.00	\$1,342.24
J	E2377	\$0.00	\$485.71
J	E2381	\$0.00	\$76.18
J	E2382	\$0.00	\$20.77
J	E2383	\$0.00	\$151.88
J	E2384	\$0.00	\$80.91
J	E2385	\$0.00	\$49.50
J	E2386	\$0.00	\$150.51
J	E2387	\$0.00	\$64.93
J	E2388	\$0.00	\$50.39
J	E2389	\$0.00	\$27.36
J	E2390	\$0.00	\$42.79
J	E2391	\$0.00	\$20.50
J	E2392	\$0.00	\$53.88
J	E2393	\$0.00	\$5.61
J	E2394	\$0.00	\$76.75
J	E2395	\$0.00	\$54.55
L	E0676	\$0.00	\$38.42
L	E0936	\$0.00	\$27.50
<b>*Not covered by the CSHCN Services Program</b>			

Claims submitted with dates of services on or after January 1, 2007, and any of the procedure codes listed above will be reprocessed, and payments will be adjusted accordingly. No action on the part of the provider is necessary.

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.