

# Reimbursement Rate Changes Presented at Public Rate Hearing on January 14, 2019, to be Effective January 1, 2019

Information posted February 5, 2019

**Note:** *Texas Medicaid managed care organizations (MCOs) must provide all medically necessary, Medicaid-covered services to eligible clients. Administrative procedures such as prior authorization, pre-certification, referrals, and claims/encounter data filing may differ from traditional Medicaid (fee-for-service) and from MCO to MCO. Providers should contact the client's specific MCO for details.*

Effective for dates of service on or after January 1, 2019, reimbursement rate changes and updates for some Annual Healthcare Common Procedure Coding System (HCPCS) procedure codes that were presented at a public rate hearing on January 14, will be implemented.

## Effective for dates of service on or after January 1, 2019

- Annual Healthcare Common Procedure Coding System:
  - [Ambulatory Surgical Center/Hospital Ambulatory Surgical Center](#)
  - [Clinical Diagnostic Laboratory Services](#)
  - [Clinician-Administered Drugs](#)
  - [Diagnostic Radiology](#)
  - [Hearing Aids](#)
  - [Hospital Outpatient Radiology](#)
  - [Non Drugs - Medical Services](#)
  - [Nonclinical Laboratory Services](#)
  - [Other Medical Items or Services](#)
  - [Rural Hospital Outpatient Radiology](#)
  - [Surgery and Assistant Surgery](#)
  - [Texas Health Steps Dental Orthodontia](#)

TMHP will automatically reprocess affected claims, if any are identified; providers are not required to appeal the claims unless they are denied for additional reasons after the claims reprocessing is complete.

For more information, providers may refer to the HHSC Rate Analysis web page at [rad.hhs.texas.gov/rate-packets](http://rad.hhs.texas.gov/rate-packets).

For more information, call the TMHP Contact Center at 1-800-925-9126.

**Ambulatory Surgical Center/Hospital Ambulatory Surgical Center**

TOS*	Procedure Code	Age Range	Current Medicaid Fee	Medicaid Group Number	Medicaid Fee Effective 1/1/2019	Medicaid Reduction % Effective 1/1/2019	Adjusted Medicaid Fee Effective 01/1/2019
F	10005	0-999	Not a Benefit	N/A	\$57.08	-7%	\$53.08
F	10007	0-999	Not a Benefit	N/A	\$175.57	-7%	\$163.28
F	10009	0-999	Not a Benefit	N/A	\$238.63	-7%	\$221.93
F	10011	0-999	Not a Benefit	N/A	\$238.63	-7%	\$221.93
F	11102	0-999	Not a Benefit	N/A	\$59.10	-7%	\$54.96
F	11104	0-999	Not a Benefit	N/A	\$72.68	-7%	\$67.59
F	11106	0-999	Not a Benefit	N/A	\$89.66	-7%	\$83.38
F	33285	0-999	Not a Benefit	9	\$1,162.72	-7%	\$1,081.33
F	33286	0-999	Not a Benefit	N/A	\$238.63	-7%	\$221.93
F	36572	0-999	Not a Benefit	N/A	\$255.38	-7%	\$237.50
F	36573	0-999	Not a Benefit	2	\$399.37	-7%	\$371.41
F	43762	0-999	Not a Benefit	N/A	\$95.32	-7%	\$88.65
F	43763	0-999	Not a Benefit	N/A	\$95.32	-7%	\$88.65
F	50436	0-999	Not a Benefit	4	\$564.17	-7%	\$524.68
F	50437	0-999	Not a Benefit	8	\$938.07	-7%	\$872.41
F	53854	0-999	Not a Benefit	4	\$564.17	-7%	\$524.68

\*Type of Service (TOS): F = Ambulatory Surgical Center

**Clinical Diagnostic Laboratory Services**

TOS *	Procedure Code	Age Range	Clinical Laboratory Current Fee	Clinical Laboratory Medicaid Fee 1/1/2019	Sole Community Current Fee	Sole	Department of	Department of State
						Community Medicaid Fee Effective 1/1/2019	State Health Services Current Fee	Health Services Medicaid Fee Effective 1/1/2019
5	81163	0-999	Not a Benefit	\$393.12	Not a Benefit	\$406.22	Not a Benefit	\$468.00
5	81164	0-999	Not a Benefit	\$490.75	Not a Benefit	\$507.11	Not a Benefit	\$584.23
5	81165	0-999	Not a Benefit	\$237.62	Not a Benefit	\$245.54	Not a Benefit	\$282.88
5	81166	0-999	Not a Benefit	\$253.13	Not a Benefit	\$261.58	Not a Benefit	\$301.35
5	81167	0-999	Not a Benefit	\$237.62	Not a Benefit	\$245.54	Not a Benefit	\$282.88
5	81233	0-999	Not a Benefit	\$147.34	Not a Benefit	\$152.25	Not a Benefit	\$175.40
5	81237	0-999	Not a Benefit	\$147.34	Not a Benefit	\$152.25	Not a Benefit	\$175.40
5	82642	0-999	Not a Benefit	\$27.33	Not a Benefit	\$28.23	Not a Benefit	\$32.53
5	83722	0-999	Not a Benefit	\$29.45	Not a Benefit	\$30.43	Not a Benefit	\$35.06

**\*Type of Service (TOS): 5 = Laboratory**

**Clinician-Administered Drugs**

TOS*	Procedure Code	Modifier	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
1	J9057		0-999	N/F	\$0.00	0%	\$0.00	\$91.48	0%	\$91.48
1	Q2042		0-999	N/F	\$475,000.00	0%	\$475,000.00	\$447,600.00	0%	\$447,600.00
1	Q2042	U1	0-999	N/F	\$0.00	0%	\$0.00	\$570,000.00	0%	\$570,000.00
1	J0584		0-999	N/F	\$0.00	0%	\$0.00	\$365.16	0%	\$365.16
1	J1746		18-999	N/F	\$0.00	0%	\$0.00	\$60.95	0%	\$60.95
1	J9312		0-999	N/F	\$0.00	0%	\$0.00	\$91.99	0%	\$91.99
1	J3397		0-999	N/F	\$0.00	0%	\$0.00	\$227.15	0%	\$227.15
1	J9044		0-999	N/F	\$0.00	0%	\$0.00	\$45.55	0%	\$45.55
1	J1454		0-999	N/F	\$547.74	0%	\$547.74	\$547.74	0%	\$547.74
1	J7170		0-999	N/F	\$44.28	0%	\$44.28	\$48.46	0%	\$48.46
1	J0185		0-999	N/F	\$4.26	0%	\$4.26	\$2.10	0%	\$2.10
1	J0517		0-999	N/F	\$170.13	0%	\$170.13	\$161.57	0%	\$161.57
1	J0567		0-999	N/F	\$91.80	0%	\$91.80	\$91.80	0%	\$91.80
1	J0599		0-999	N/F	\$9.59	0%	\$9.59	\$9.59	0%	\$9.59
1	J1301		0-999	N/F	\$18.46	0%	\$18.46	\$19.82	0%	\$19.82
1	J1628		0-999	N/F	\$103.62	0%	\$103.62	\$103.62	0%	\$103.62
1	J3304		0-999	N/F	\$19.13	2%	\$18.75	\$16.61	0%	\$16.61
1	J3316		0-999	N/F	\$2,720.00	0%	\$2,720.00	\$3,280.00	0%	\$3,280.00
1	J3398		0-999	N/F	\$2,833.33	0%	\$2,833.33	\$2,833.33	0%	\$2,833.33
1	J7203		0-999	N/F	\$4.30	0%	\$4.30	\$4.30	0%	\$4.30
1	J7318		0-999	N/F	\$994.50	0%	\$994.50	\$349.05	0%	\$349.05
1	J9229		0-999	N/F	\$1,870.00	0%	\$1,870.00	\$2,493.33	0%	\$2,493.33
1	J9311		0-999	N/F	\$46.38	0%	\$46.38	\$47.78	0%	\$47.78
1	C9036		0-999	N/F	\$0.00	0%	\$0.00	\$102.03	0%	\$102.03
1	C9035		0-999	N/F	\$0.00	0%	\$0.00	\$2.97	0%	\$2.97
1	J9153		0-999	N/F	\$211.36	0%	\$211.36	\$217.70	0%	\$217.70
1	J9173		0-999	N/F	\$84.12	0%	\$84.12	\$84.12	0%	\$84.12
1	C9039		0-999	N/F	\$0.00	0%	\$0.00	\$3.38	0%	\$3.38
1	J2062		0-999	N/F	\$0.00	0%	\$0.00	\$153.00	0%	\$153.00
1	J7177		0-999	N/F	\$0.00	0%	\$0.00	\$0.02	0%	\$0.02
1	J2186		0-999	N/F	\$0.00	0%	\$0.00	\$29.72	0%	\$29.72
1	J7329		0-999	N/F	\$0.00	0%	\$0.00	\$6.93	0%	\$6.93

\*Type of Service (TOS): 1 = Medical Services

**Diagnostic Radiology**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
4	76391	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$6.66	\$28.0672	\$186.93	0%	\$186.93
4	76391	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$6.66	\$26.7305	\$178.03	0%	\$178.03
I	76391	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.58	\$28.0672	\$44.35	0%	\$44.35
I	76391	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.58	\$26.7305	\$42.23	0%	\$42.23
T	76391	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$5.08	\$28.0672	\$142.58	0%	\$142.58
T	76391	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$5.08	\$26.7305	\$135.79	0%	\$135.79
4	76978	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$9.18	\$28.0672	\$257.66	0%	\$257.66
4	76978	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$9.18	\$26.7305	\$245.39	0%	\$245.39
I	76978	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.30	\$28.0672	\$64.55	0%	\$64.55
I	76978	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.30	\$26.7305	\$61.48	0%	\$61.48
T	76978	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$6.88	\$28.0672	\$193.10	0%	\$193.10
T	76978	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$6.88	\$26.7305	\$183.91	0%	\$183.91
4	76979	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$6.23	\$28.0672	\$174.86	0%	\$174.86
4	76979	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$6.23	\$26.7305	\$166.53	0%	\$166.53
I	76979	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.21	\$28.0672	\$33.96	0%	\$33.96
I	76979	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.21	\$26.7305	\$32.34	0%	\$32.34
T	76979	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$5.02	\$28.0672	\$140.90	0%	\$140.90
T	76979	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$5.02	\$26.7305	\$134.19	0%	\$134.19
4	76981	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$3.04	\$28.0672	\$85.32	0%	\$85.32
4	76981	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$3.04	\$26.7305	\$81.26	0%	\$81.26
I	76981	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$0.85	\$28.0672	\$23.86	0%	\$23.86
I	76981	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$0.85	\$26.7305	\$22.72	0%	\$22.72
T	76981	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.19	\$28.0672	\$61.47	0%	\$61.47
T	76981	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.19	\$26.7305	\$58.54	0%	\$58.54
4	76982	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.72	\$28.0672	\$76.34	0%	\$76.34
4	76982	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.72	\$26.7305	\$72.71	0%	\$72.71
I	76982	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$0.85	\$28.0672	\$23.86	0%	\$23.86
I	76982	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$0.85	\$26.7305	\$22.72	0%	\$22.72
T	76982	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.87	\$28.0672	\$52.49	0%	\$52.49
T	76982	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.87	\$26.7305	\$49.99	0%	\$49.99
4	76983	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.67	\$28.0672	\$46.87	0%	\$46.87
4	76983	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.67	\$26.7305	\$44.64	0%	\$44.64
I	76983	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$0.72	\$28.0672	\$20.21	0%	\$20.21
I	76983	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$0.72	\$26.7305	\$19.25	0%	\$19.25
T	76983	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$0.95	\$28.0672	\$26.66	0%	\$26.66
T	76983	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$0.95	\$26.7305	\$25.39	0%	\$25.39
4	77046	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$7.02	\$28.0672	\$197.03	0%	\$197.03
4	77046	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$7.02	\$26.7305	\$187.65	0%	\$187.65
I	77046	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.06	\$28.0672	\$57.82	0%	\$57.82
I	77046	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.06	\$26.7305	\$55.06	0%	\$55.06
T	77046	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$4.96	\$28.0672	\$139.21	0%	\$139.21
T	77046	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$4.96	\$26.7305	\$132.58	0%	\$132.58
4	77047	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$7.21	\$28.0672	\$202.36	0%	\$202.36
4	77047	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$7.21	\$26.7305	\$192.73	0%	\$192.73
I	77047	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.28	\$28.0672	\$63.99	0%	\$63.99
I	77047	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.28	\$26.7305	\$60.95	0%	\$60.95
T	77047	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$4.93	\$28.0672	\$138.37	0%	\$138.37
T	77047	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$4.93	\$26.7305	\$131.78	0%	\$131.78
4	77048	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$11.15	\$28.0672	\$312.95	0%	\$312.95
4	77048	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$11.15	\$26.7305	\$298.05	0%	\$298.05
I	77048	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.98	\$28.0672	\$83.64	0%	\$83.64
I	77048	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.98	\$26.7305	\$79.66	0%	\$79.66
T	77048	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$8.17	\$28.0672	\$229.31	0%	\$229.31

**Diagnostic Radiology**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
T	77048	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$8.17	\$26.7305	\$218.39	0%	\$218.39
4	77049	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$11.39	\$28.0672	\$319.69	0%	\$319.69
4	77049	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$11.39	\$26.7305	\$304.46	0%	\$304.46
I	77049	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$3.26	\$28.0672	\$91.50	0%	\$91.50
I	77049	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$3.26	\$26.7305	\$87.14	0%	\$87.14
T	77049	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$8.13	\$28.0672	\$228.19	0%	\$228.19
T	77049	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$8.13	\$26.7305	\$217.32	0%	\$217.32

\*Type of Service (TOS): 4 = Radiology, I = Interpretation Component, T = Technical Component

### Hearing Aids

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid Fee	Percent Reduction	Adjusted Medicaid Fee
R	V5171	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$1,473.46	0%	\$1,473.46
R	V5172	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,334.90	0%	\$2,334.90
R	V5181	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$1,448.04	0%	\$1,448.04
R	V5211	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,546.92	0%	\$2,546.92
R	V5212	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,546.92	0%	\$2,546.92
R	V5213	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,546.92	0%	\$2,546.92
R	V5214	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,563.32	0%	\$2,563.32
R	V5215	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,563.32	0%	\$2,563.32
R	V5221	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$2,496.08	0%	\$2,496.08

**\*Type of Service (TOS): R = Hearing Aid**

### Hospital Outpatient Radiology

TOS*	Procedure Code	Age Range	Current Fee	Medicaid Fee Effective 1/1/2019
4	76391	0-999	Not a Benefit	\$222.54
4	76978	0-999	Not a Benefit	\$201.74
4	76979	0-999	Not a Benefit	\$208.16
4	76981	0-999	Not a Benefit	\$101.58
4	76982	0-999	Not a Benefit	\$90.89
4	76983	0-999	Not a Benefit	\$55.80

\*Type of Service (TOS): 4 = Radiology



Non Drugs - Medical Services

TOS*	Procedure Code	Modifier**	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
1	92273		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$3.78	\$28.0672	\$106.09	0%	\$106.09
1	92273		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$3.78	\$26.7305	\$101.04	0%	\$101.04
I	92273		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.06	\$28.0672	\$29.75	0%	\$29.75
I	92273		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.06	\$26.7305	\$28.33	0%	\$28.33
T	92273		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.72	\$28.0672	\$76.34	0%	\$76.34
T	92273		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.72	\$26.7305	\$72.71	0%	\$72.71
1	92274		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$2.56	\$28.0672	\$71.85	0%	\$71.85
1	92274		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$2.56	\$26.7305	\$68.43	0%	\$68.43
I	92274		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$0.94	\$28.0672	\$26.38	0%	\$26.38
I	92274		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$0.94	\$26.7305	\$25.13	0%	\$25.13
T	92274		0-20	N/F	Not a Benefit	0%	Not a Benefit	\$1.62	\$28.0672	\$45.47	0%	\$45.47
T	92274		21-999	N/F	Not a Benefit	0%	Not a Benefit	\$1.62	\$26.7305	\$43.30	0%	\$43.30
1	96112		0-20	N	Not a Benefit	0%	Not a Benefit	\$3.83	\$28.0672	\$107.50	0%	\$107.50
1	96112		0-20	F	Not a Benefit	0%	Not a Benefit	\$3.61	\$28.0672	\$101.32	0%	\$101.32
1	96112		21-999	N	Not a Benefit	0%	Not a Benefit	\$3.83	\$26.7305	\$102.38	0%	\$102.38
1	96112		21-999	F	Not a Benefit	0%	Not a Benefit	\$3.61	\$26.7305	\$96.50	0%	\$96.50
1	96113		0-20	N	Not a Benefit	0%	Not a Benefit	\$1.71	\$28.0672	\$47.99	0%	\$47.99
1	96113		0-20	F	Not a Benefit	0%	Not a Benefit	\$1.65	\$28.0672	\$46.31	0%	\$46.31
1	96113		21-999	N	Not a Benefit	0%	Not a Benefit	\$1.71	\$26.7305	\$45.71	0%	\$45.71
1	96113		21-999	F	Not a Benefit	0%	Not a Benefit	\$1.65	\$26.7305	\$44.11	0%	\$44.11
1	96121		0-20	N	Not a Benefit	0%	Not a Benefit	\$2.32	\$28.0672	\$65.12	0%	\$65.12
1	96121		0-20	F	Not a Benefit	0%	Not a Benefit	\$2.21	\$28.0672	\$62.03	0%	\$62.03
1	96121		21-999	N	Not a Benefit	0%	Not a Benefit	\$2.32	\$26.7305	\$62.01	0%	\$62.01
1	96121		21-999	F	Not a Benefit	0%	Not a Benefit	\$2.21	\$26.7305	\$59.07	0%	\$59.07
1	96121	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$32.56	0%	\$32.56
1	96121	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$31.01	0%	\$31.01
1	96121	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$31.01	0%	\$31.01
1	96121	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$29.54	0%	\$29.54
1	96130		0-20	N	Not a Benefit	0%	Not a Benefit	\$3.30	\$28.0672	\$92.62	0%	\$92.62
1	96130		0-20	F	Not a Benefit	0%	Not a Benefit	\$3.10	\$28.0672	\$87.01	0%	\$87.01
1	96130		21-999	N	Not a Benefit	0%	Not a Benefit	\$3.30	\$26.7305	\$88.21	0%	\$88.21
1	96130		21-999	F	Not a Benefit	0%	Not a Benefit			\$84.52	0%	\$84.52
1	96130	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$46.31	0%	\$46.31
1	96130	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$43.50	0%	\$43.50
1	96130	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$44.11	0%	\$44.11
1	96130	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$42.26	0%	\$42.26
1	96131		0-20	N	Not a Benefit	0%	Not a Benefit			\$84.52	0%	\$84.52
1	96131		0-20	F	Not a Benefit	0%	Not a Benefit			\$84.52	0%	\$84.52
1	96131		21-999	N	Not a Benefit	0%	Not a Benefit			\$84.52	0%	\$84.52
1	96131		21-999	F	Not a Benefit	0%	Not a Benefit			\$84.52	0%	\$84.52
1	96131	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$42.26	0%	\$42.26
1	96131	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$42.26	0%	\$42.26
1	96131	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$42.26	0%	\$42.26
1	96131	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$42.26	0%	\$42.26
1	96132		0-20	N	Not a Benefit	0%	Not a Benefit	\$3.71	\$28.0672	\$104.13	0%	\$104.13
1	96132		0-20	F	Not a Benefit	0%	Not a Benefit	\$3.04	\$28.0672	\$85.32	0%	\$85.32
1	96132		21-999	N	Not a Benefit	0%	Not a Benefit	\$3.71	\$26.7305	\$99.17	0%	\$99.17
1	96132		21-999	F	Not a Benefit	0%	Not a Benefit	\$3.04	\$26.7305	\$81.26	0%	\$81.26
1	96132	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$52.06	0%	\$52.06
1	96132	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$42.66	0%	\$42.66
1	96132	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$49.59	0%	\$49.59
1	96132	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$40.63	0%	\$40.63
1	96133		0-20	N	Not a Benefit	0%	Not a Benefit	\$2.83	\$28.0672	\$79.43	0%	\$79.43
1	96133		0-20	F	Not a Benefit	0%	Not a Benefit	\$2.33	\$28.0672	\$65.40	0%	\$65.40
1	96133		21-999	N	Not a Benefit	0%	Not a Benefit	\$2.83	\$26.7305	\$75.65	0%	\$75.65
1	96133		21-999	F	Not a Benefit	0%	Not a Benefit	\$2.33	\$26.7305	\$62.28	0%	\$62.28
1	96133	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$39.72	0%	\$39.72
1	96133	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$32.70	0%	\$32.70
1	96133	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$37.82	0%	\$37.82
1	96133	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$31.14	0%	\$31.14

Non Drugs - Medical Services

TOS*	Procedure Code	Modifier**	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
1	96136		0-20	N	Not a Benefit	0%	Not a Benefit			\$38.59	0%	\$38.59
1	96136		0-20	F	Not a Benefit	0%	Not a Benefit			\$31.16	0%	\$31.16
1	96136		21-999	N	Not a Benefit	0%	Not a Benefit			\$36.76	0%	\$36.76
1	96136		21-999	F	Not a Benefit	0%	Not a Benefit			\$29.67	0%	\$29.67
1	96136	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$19.30	0%	\$19.30
1	96136	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$15.58	0%	\$15.58
1	96136	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$18.38	0%	\$18.38
1	96136	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$14.84	0%	\$14.84
1	96137		0-20	N	Not a Benefit	0%	Not a Benefit			\$38.59	0%	\$38.59
1	96137		0-20	F	Not a Benefit	0%	Not a Benefit			\$31.16	0%	\$31.16
1	96137		21-999	N	Not a Benefit	0%	Not a Benefit			\$36.76	0%	\$36.76
1	96137		21-999	F	Not a Benefit	0%	Not a Benefit			\$29.67	0%	\$29.67
1	96137	UB	0-20	N	Not a Benefit	0%	Not a Benefit			\$19.30	0%	\$19.30
1	96137	UB	0-20	F	Not a Benefit	0%	Not a Benefit			\$15.58	0%	\$15.58
1	96137	UB	21-999	N	Not a Benefit	0%	Not a Benefit			\$18.38	0%	\$18.38
1	96137	UB	21-999	F	Not a Benefit	0%	Not a Benefit			\$14.84	0%	\$14.84
1	G2011		0-20	N	Not a Benefit	0%	Not a Benefit	\$0.47	\$28.0672	\$13.19	0%	\$13.19
1	G2011		0-20	F	Not a Benefit	0%	Not a Benefit	\$0.47	\$28.0672	\$13.19	0%	\$13.19
1	G2011		21-999	N	Not a Benefit	0%	Not a Benefit	\$0.47	\$26.7305	\$12.56	0%	\$12.56
1	G2011		21-999	F	Not a Benefit	0%	Not a Benefit	\$0.47	\$26.7305	\$12.56	0%	\$12.56

\*Type of Service (TOS): 1 = Medical Services, I = Professional Component, T = Technical Component

\*\*Modifier: UB = Identifies a service provided by a pre-doctoral psychology intern or post-doctoral psychology fellow

**Nonclinical Laboratory Services**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
5	95836	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$3.14	\$28.0672	\$88.13	0%	\$88.13
5	95836	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$3.14	\$26.7305	\$83.93	0%	\$83.93
5	95976	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.16	\$28.0672	\$32.56	0%	\$32.56
5	95976	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.14	\$28.0672	\$32.00	0%	\$32.00
5	95976	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.16	\$26.7305	\$31.01	0%	\$31.01
5	95976	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.14	\$26.7305	\$30.47	0%	\$30.47
5	95977	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.54	\$28.0672	\$43.22	0%	\$43.22
5	95977	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.52	\$28.0672	\$42.66	0%	\$42.66
5	95977	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.54	\$26.7305	\$41.16	0%	\$41.16
5	95977	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.52	\$26.7305	\$40.63	0%	\$40.63
5	95983	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.46	\$28.0672	\$40.98	0%	\$40.98
5	95983	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.44	\$28.0672	\$40.42	0%	\$40.42
5	95983	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.46	\$26.7305	\$39.03	0%	\$39.03
5	95983	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.44	\$26.7305	\$38.49	0%	\$38.49
5	95984	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.27	\$28.0672	\$35.65	0%	\$35.65
5	95984	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.26	\$28.0672	\$35.36	0%	\$35.36
5	95984	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.27	\$26.7305	\$33.95	0%	\$33.95
5	95984	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.26	\$26.7305	\$33.68	0%	\$33.68

\*Type of Service (TOS): 5 = Laboratory Services

**Other Medical Items or Services**

<b>TOS*</b>	<b>Procedure Code</b>	<b>Age Range</b>	<b>Non-Facility (N)/ Facility (F)</b>	<b>Current Medicaid Fee</b>	<b>Percent Reduction</b>	<b>Current Adjusted Medicaid Fee</b>	<b>Medicaid Fee Effective 1/1/2019</b>	<b>Percent Reduction</b>	<b>Adjusted Medicaid Fee Effective 1/1/2019</b>
9	C9407	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$401.47	0%	\$401.47
9	E0447	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$36.00	0%	\$36.00
L	E0467	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$1,059.64	0%	\$1,059.64

**\*Type of Service (TOS): 9 = Other Medical Items or Services, L = DME Rental-Monthly**

### Rural Hospital Outpatient Radiology

<b>TOS*</b>	<b>Procedure Code</b>	<b>Age Range</b>	<b>Current Fee</b>	<b>Medicaid Fee Effective 1/1/2019</b>
4	76391	0-999	Not a Benefit	\$148.02
4	76978	0-999	Not a Benefit	\$129.52
4	76979	0-999	Not a Benefit	\$310.88
4	76981	0-999	Not a Benefit	\$72.23
4	76982	0-999	Not a Benefit	\$72.23
4	76983	0-999	Not a Benefit	\$59.23

**\*Type of Service (TOS): 4 = Radiology**

**Surgery and Assistant Surgery**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
2	10004	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.49	\$28.0672	\$41.82	0%	\$41.82
2	10004	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.25	\$28.0672	\$35.08	0%	\$35.08
2	10004	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.49	\$26.7305	\$39.83	0%	\$39.83
2	10004	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.25	\$26.7305	\$33.41	0%	\$33.41
2	10005	0-20	N	Not a Benefit	0%	Not a Benefit	\$3.59	\$28.0672	\$100.76	0%	\$100.76
2	10005	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.10	\$28.0672	\$58.94	0%	\$58.94
2	10005	21-999	N	Not a Benefit	0%	Not a Benefit	\$3.59	\$26.7305	\$95.96	0%	\$95.96
2	10005	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.10	\$26.7305	\$56.13	0%	\$56.13
2	10006	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.71	\$28.0672	\$47.99	0%	\$47.99
2	10006	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.43	\$28.0672	\$40.14	0%	\$40.14
2	10006	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.71	\$26.7305	\$45.71	0%	\$45.71
2	10006	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.43	\$26.7305	\$38.22	0%	\$38.22
2	10007	0-20	N	Not a Benefit	0%	Not a Benefit	\$8.09	\$28.0672	\$227.06	0%	\$227.06
2	10007	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.70	\$28.0672	\$75.78	0%	\$75.78
2	10007	21-999	N	Not a Benefit	0%	Not a Benefit	\$8.09	\$26.7305	\$216.25	0%	\$216.25
2	10007	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.70	\$26.7305	\$72.17	0%	\$72.17
2	10008	0-20	N	Not a Benefit	0%	Not a Benefit	\$4.56	\$28.0672	\$127.99	0%	\$127.99
2	10008	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.76	\$28.0672	\$49.40	0%	\$49.40
2	10008	21-999	N	Not a Benefit	0%	Not a Benefit	\$4.56	\$26.7305	\$121.89	0%	\$121.89
2	10008	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.76	\$26.7305	\$47.05	0%	\$47.05
2	10009	0-20	N	Not a Benefit	0%	Not a Benefit	\$13.24	\$28.0672	\$371.61	0%	\$371.61
2	10009	0-20	F	Not a Benefit	0%	Not a Benefit	\$3.27	\$28.0672	\$91.78	0%	\$91.78
2	10009	21-999	N	Not a Benefit	0%	Not a Benefit	\$13.24	\$26.7305	\$353.91	0%	\$353.91
2	10009	21-999	F	Not a Benefit	0%	Not a Benefit	\$3.27	\$26.7305	\$87.41	0%	\$87.41
2	10010	0-20	N	Not a Benefit	0%	Not a Benefit	\$7.98	\$28.0672	\$223.98	0%	\$223.98
2	10010	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.39	\$28.0672	\$67.08	0%	\$67.08
2	10010	21-999	N	Not a Benefit	0%	Not a Benefit	\$7.98	\$26.7305	\$213.31	0%	\$213.31
2	10010	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.39	\$26.7305	\$63.89	0%	\$63.89
2	10011	0-20	N	Not a Benefit	0%	Not a Benefit			\$112.75	0%	\$112.75
2	10011	0-20	F	Not a Benefit	0%	Not a Benefit			\$52.48	0%	\$52.48
2	10011	21-999	N	Not a Benefit	0%	Not a Benefit			\$107.38	0%	\$107.38
2	10011	21-999	F	Not a Benefit	0%	Not a Benefit			\$49.98	0%	\$49.98
2	10012	0-20	N	Not a Benefit	0%	Not a Benefit			\$112.75	0%	\$112.75
2	10012	0-20	F	Not a Benefit	0%	Not a Benefit			\$52.48	0%	\$52.48
2	10012	21-999	N	Not a Benefit	0%	Not a Benefit			\$107.38	0%	\$107.38
2	10012	21-999	F	Not a Benefit	0%	Not a Benefit			\$49.98	0%	\$49.98
2	11102	0-20	N	Not a Benefit	0%	Not a Benefit	\$2.80	\$28.0672	\$78.59	0%	\$78.59
2	11102	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.14	\$28.0672	\$32.00	0%	\$32.00
2	11102	21-999	N	Not a Benefit	0%	Not a Benefit	\$2.80	\$26.7305	\$74.85	0%	\$74.85
2	11102	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.14	\$26.7305	\$30.47	0%	\$30.47
2	11103	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.51	\$28.0672	\$42.38	0%	\$42.38
2	11103	0-20	F	Not a Benefit	0%	Not a Benefit	\$0.66	\$28.0672	\$18.52	0%	\$18.52
2	11103	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.51	\$26.7305	\$40.36	0%	\$40.36
2	11103	21-999	F	Not a Benefit	0%	Not a Benefit	\$0.66	\$26.7305	\$17.64	0%	\$17.64
2	11104	0-20	N	Not a Benefit	0%	Not a Benefit	\$3.52	\$28.0672	\$98.80	0%	\$98.80

**Surgery and Assistant Surgery**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
2	11104	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.43	\$28.0672	\$40.14	0%	\$40.14
2	11104	21-999	N	Not a Benefit	0%	Not a Benefit	\$3.52	\$26.7305	\$94.09	0%	\$94.09
2	11104	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.43	\$26.7305	\$38.22	0%	\$38.22
2	11105	0-20	N	Not a Benefit	0%	Not a Benefit	\$1.73	\$28.0672	\$48.56	0%	\$48.56
2	11105	0-20	F	Not a Benefit	0%	Not a Benefit	\$0.78	\$28.0672	\$21.89	0%	\$21.89
2	11105	21-999	N	Not a Benefit	0%	Not a Benefit	\$1.73	\$26.7305	\$46.24	0%	\$46.24
2	11105	21-999	F	Not a Benefit	0%	Not a Benefit	\$0.78	\$26.7305	\$20.85	0%	\$20.85
2	11106	0-20	N	Not a Benefit	0%	Not a Benefit	\$4.26	\$28.0672	\$119.57	0%	\$119.57
2	11106	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.74	\$28.0672	\$48.84	0%	\$48.84
2	11106	21-999	N	Not a Benefit	0%	Not a Benefit	\$4.26	\$26.7305	\$113.87	0%	\$113.87
2	11106	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.74	\$26.7305	\$46.51	0%	\$46.51
2	11107	0-20	N	Not a Benefit	0%	Not a Benefit	\$2.04	\$28.0672	\$57.26	0%	\$57.26
2	11107	0-20	F	Not a Benefit	0%	Not a Benefit	\$0.93	\$28.0672	\$26.10	0%	\$26.10
2	11107	21-999	N	Not a Benefit	0%	Not a Benefit	\$2.04	\$26.7305	\$54.53	0%	\$54.53
2	11107	21-999	F	Not a Benefit	0%	Not a Benefit	\$0.93	\$26.7305	\$24.86	0%	\$24.86
2	20932	0-20	F	Not a Benefit	0%	Not a Benefit	\$20.54	\$28.0672	\$576.50	0%	\$576.50
2	20932	21-999	F	Not a Benefit	0%	Not a Benefit	\$20.54	\$26.7305	\$549.04	0%	\$549.04
8	20932	0-20	F	Not a Benefit	0%	Not a Benefit			\$92.24	0%	\$92.24
8	20932	21-999	F	Not a Benefit	0%	Not a Benefit			\$87.85	0%	\$87.85
2	20933	0-20	F	Not a Benefit	0%	Not a Benefit	\$18.84	\$28.0672	\$528.79	0%	\$528.79
2	20933	21-999	F	Not a Benefit	0%	Not a Benefit	\$18.84	\$26.7305	\$503.60	0%	\$503.60
8	20933	0-20	F	Not a Benefit	0%	Not a Benefit			\$84.61	0%	\$84.61
8	20933	21-999	F	Not a Benefit	0%	Not a Benefit			\$80.58	0%	\$80.58
2	20934	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$20.53	\$28.0672	\$576.22	0%	\$576.22
2	20934	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$20.53	\$26.7305	\$548.78	0%	\$548.78
2	27369	0-20	N	Not a Benefit	0%	Not a Benefit	\$4.06	\$28.0672	\$113.95	0%	\$113.95
2	27369	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.17	\$28.0672	\$32.84	0%	\$32.84
2	27369	21-999	N	Not a Benefit	0%	Not a Benefit	\$4.06	\$26.7305	\$108.53	0%	\$108.53
2	27369	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.17	\$26.7305	\$31.27	0%	\$31.27
2	33285	0-20	N	Not a Benefit	0%	Not a Benefit	\$146.07	\$28.0672	\$4,099.78	0%	\$4,099.78
2	33285	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.59	\$28.0672	\$72.69	0%	\$72.69
2	33285	21-999	N	Not a Benefit	0%	Not a Benefit	\$146.07	\$26.7305	\$3,904.52	0%	\$3,904.52
2	33285	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.59	\$26.7305	\$69.23	0%	\$69.23
2	33286	0-20	N	Not a Benefit	0%	Not a Benefit	\$3.80	\$28.0672	\$106.66	0%	\$106.66
2	33286	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.54	\$28.0672	\$71.29	0%	\$71.29
2	33286	21-999	N	Not a Benefit	0%	Not a Benefit	\$3.80	\$26.7305	\$101.58	0%	\$101.58
2	33286	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.54	\$26.7305	\$67.90	0%	\$67.90
2	33440	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$98.10	\$28.0672	\$2,753.39	0%	\$2,753.39
2	33440	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$98.10	\$26.7305	\$2,622.26	0%	\$2,622.26
8	33440	0-20	F	Not a Benefit	0%	Not a Benefit			\$440.54	0%	\$440.54
8	33440	21-999	F	Not a Benefit	0%	Not a Benefit			\$419.56	0%	\$419.56
2	33866	0-20	F	Not a Benefit	0%	Not a Benefit	\$29.85	\$28.0672	\$837.81	0%	\$837.81
2	33866	21-999	F	Not a Benefit	0%	Not a Benefit	\$29.85	\$26.7305	\$797.91	0%	\$797.91
2	36572	0-20	N	Not a Benefit	0%	Not a Benefit	\$11.90	\$28.0672	\$334.00	0%	\$334.00
2	36572	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.65	\$28.0672	\$74.38	0%	\$74.38

**Surgery and Assistant Surgery**

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid RVU	Medicaid Conversion Factor	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee Effective 1/1/2019
2	36572	21-999	N	Not a Benefit	0%	Not a Benefit	\$11.90	\$26.7305	\$318.09	0%	\$318.09
2	36572	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.65	\$26.7305	\$70.84	0%	\$70.84
2	36573	0-20	N	Not a Benefit	0%	Not a Benefit	\$11.20	\$28.0672	\$314.35	0%	\$314.35
2	36573	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.45	\$28.0672	\$68.76	0%	\$68.76
2	36573	21-999	N	Not a Benefit	0%	Not a Benefit	\$11.20	\$26.7305	\$299.38	0%	\$299.38
2	36573	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.45	\$26.7305	\$65.49	0%	\$65.49
2	38531	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$12.60	\$28.0672	\$353.65	0%	\$353.65
2	38531	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$12.60	\$26.7305	\$336.80	0%	\$336.80
2	43762	0-20	N	Not a Benefit	0%	Not a Benefit	\$6.31	\$28.0672	\$177.10	0%	\$177.10
2	43762	0-20	F	Not a Benefit	0%	Not a Benefit	\$1.09	\$28.0672	\$30.59	0%	\$30.59
2	43762	21-999	N	Not a Benefit	0%	Not a Benefit	\$6.31	\$26.7305	\$168.67	0%	\$168.67
2	43762	21-999	F	Not a Benefit	0%	Not a Benefit	\$1.09	\$26.7305	\$29.14	0%	\$29.14
2	43763	0-20	N	Not a Benefit	0%	Not a Benefit	\$9.37	\$28.0672	\$262.99	0%	\$262.99
2	43763	0-20	F	Not a Benefit	0%	Not a Benefit	\$2.41	\$28.0672	\$67.64	0%	\$67.64
2	43763	21-999	N	Not a Benefit	0%	Not a Benefit	\$9.37	\$26.7305	\$250.46	0%	\$250.46
2	43763	21-999	F	Not a Benefit	0%	Not a Benefit	\$2.41	\$26.7305	\$64.42	0%	\$64.42
2	50436	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$4.37	\$28.0672	\$122.65	0%	\$122.65
2	50436	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$4.37	\$26.7305	\$116.81	0%	\$116.81
2	50437	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$7.29	\$28.0672	\$204.61	0%	\$204.61
2	50437	21-999	N/F	Not a Benefit	0%	Not a Benefit	\$7.29	\$26.7305	\$194.87	0%	\$194.87
2	53854	0-20	N	Not a Benefit	0%	Not a Benefit	\$52.05	\$28.0672	\$1,460.90	0%	\$1,460.90
2	53854	0-20	F	Not a Benefit	0%	Not a Benefit	\$10.89	\$28.0672	\$305.65	0%	\$305.65
2	53854	21-999	N	Not a Benefit	0%	Not a Benefit	\$52.05	\$26.7305	\$1,391.32	0%	\$1,391.32
2	53854	21-999	F	Not a Benefit	0%	Not a Benefit	\$10.89	\$26.7305	\$291.10	0%	\$291.10
2	C9751	0-20	N	Not a Benefit	0%	Not a Benefit			\$806.37	0%	\$806.37
2	C9751	0-20	F	Not a Benefit	0%	Not a Benefit			\$198.72	0%	\$198.72
2	C9751	21-999	N	Not a Benefit	0%	Not a Benefit			\$767.97	0%	\$767.97
2	C9751	21-999	F	Not a Benefit	0%	Not a Benefit			\$189.25	0%	\$189.25
2	C9752	0-20	N	Not a Benefit	0%	Not a Benefit			\$330.07	0%	\$330.07
2	C9752	0-20	F	Not a Benefit	0%	Not a Benefit			\$177.95	0%	\$177.95
2	C9752	21-999	N	Not a Benefit	0%	Not a Benefit			\$314.35	0%	\$314.35
2	C9752	21-999	F	Not a Benefit	0%	Not a Benefit			\$169.47	0%	\$169.47
2	C9753	0-20	N	Not a Benefit	0%	Not a Benefit			\$136.13	0%	\$136.13
2	C9753	0-20	F	Not a Benefit	0%	Not a Benefit			\$47.99	0%	\$47.99
2	C9753	21-999	N	Not a Benefit	0%	Not a Benefit			\$129.64	0%	\$129.64
2	C9753	21-999	F	Not a Benefit	0%	Not a Benefit			\$45.71	0%	\$45.71
2	C9754	0-20	F	Not a Benefit	0%	Not a Benefit			\$540.29	0%	\$540.29
2	C9754	21-999	F	Not a Benefit	0%	Not a Benefit			\$514.56	0%	\$514.56
2	C9755	0-20	N/F	Not a Benefit	0%	Not a Benefit			\$540.29	0%	\$540.29
2	C9755	21-999	N/F	Not a Benefit	0%	Not a Benefit			\$514.56	0%	\$514.56

\*Type of Service (TOS): 2 = Surgery, 8 = Assistant Surgery



Texas Health Steps Dental Orthodontia

TOS*	Procedure Code	Age Range	Non-Facility (N)/ Facility (F)	Current Medicaid Fee	Percent Reduction	Current Adjusted Medicaid Fee	Medicaid Fee Effective 1/1/2019	Percent Reduction	Adjusted Medicaid Fee
W	D1516	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$232.75	0%	\$232.75
W	D1517	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$232.75	0%	\$232.75
W	D1526	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$104.13	0%	\$104.13
W	D1527	0-999	N/F	Not a Benefit	0%	Not a Benefit	\$104.13	0%	\$104.13
W	D9944	0-20	N/F	Not a Benefit	0%	Not a Benefit	\$113.47	0%	\$113.47

**\*Type of Service (TOS): W = Texas Health Steps Dental Orthodontia**