

Idaho Disability Determinations Service Fee Schedule

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Adopted Pursuant to Administrative Order No. 560 - effective March 1, 2007		Proposed Fee
CPT	Description	
10000	No Show (per CPT up to \$70)	\$35.00
10001	Second No Show	\$35.00
10002	Third No Show	\$35.00
10003	No Show - Psychological Test	\$35.00
10500	Hearings/Disability for Clmt. Travel	-
20000	Interpretation for EEG	\$50.00
20001	Interpretation for ENG	\$50.00
30000	Doppler Reading	\$50.00
40000	Interp./Supervis. cardiographic tests (EKG Treadmill, thallium, etc.)	\$50.00
50000	ONLY Height & Weight w/o Shoes	\$25.00
60001	Provider Travel to Claimant's Location (per hr./not to exceed 2 hrs.)	\$40.00
70250	X-Ray: Two Views Skull	\$80.00
71010	X-Ray: Chest Single View	\$60.00
71020	X-Ray Chest, PA & Lateral	\$80.00
72040	X-Ray, Two Views C-Spine	\$75.00
72070	X-Ray: Two Views Thoracic	\$80.00
72080	X-Ray: Two Views L Spine	\$85.00
72100	X-Ray: Two Views L-S Spine	\$85.00
72131	CT Lumbar Spine	\$65.00
72170	X-Ray: Two Views Pelvis	\$65.00
72200	X-Ray: Two Views SI Joint	\$65.00
73000	X-Ray: Two Views Clavicle - Right	\$70.00
73001	X-Ray: Two Views Clavicle - Left	\$70.00
73010	X-Ray: Two Views Scapula - Right	\$70.00
73011	X-Ray: Two Views Scapula - Left	\$70.00
73030	X-Ray: Shoulder NTE 2 Views-Right	\$70.00
73031	X-Ray: Shoulder NTE 2 Views-Left	\$70.00
73060	X-Ray: Two Views Humerus -Right	\$70.00
73061	X-Ray: Two Views Humerus - Left	\$70.00
73070	X-Ray: Two Views of Elbow - Right	\$60.00
73071	X-Ray: Two Views of Elbow - Left	\$60.00
73090	X-Ray: Two Views of Forearm - Right	\$70.00
73091	X-Ray: Two Views of Forearm - Left	\$70.00
73100	X-Ray: Two Views Wrist - Right	\$60.00
73101	X-Ray: Two Views Wrist - Left	\$60.00
73120	X-Ray: Two Views Hand - Right	\$60.00
73121	X-Ray: Two Views Hand - Left	\$60.00
73510	X-Ray: Two Views Hip - Right	\$75.00
73511	X-Ray: Two Views Hip - Left	\$75.00
73520	X-Ray: Both Hips	\$90.00
73550	X-Ray: Two Views Femur - Right	\$70.00
73551	X-Ray: Two Views Femur - Left	\$70.00
73560	X-Ray: Two Views Knee - Right	\$65.00
73561	X-Ray: Two Views Knee - Left	\$65.00

73590	X-Ray: Two Views Tibia - Right	\$65.00
73591	X-Ray: Two Views Tibia - Left	\$65.00
73600	X-Ray: Two Views Ankle - Right	\$60.00
73601	X-Ray: Two Views Ankle - Left	\$60.00
73620	X-Ray: Two Views Foot - Right	\$60.00
73621	X-Ray: Two Views Foot - Left	\$60.00
73650	X-Ray: Two Views of Calcaneus - Right	\$60.00
73651	X-Ray: Two Views of Calcaneus - Left	\$60.00
76020	Bone Age Studies	\$65.00
76497	Reading - CE Department Only	\$50.00
76498	Radiology Reading	\$50.00
78483	Thallium Perfusion Scan (or other Cardiac Nuclear Scan)	\$880.60
36415	Venipuncture (blood draw only)	\$15.90
80053	Comprehensive Metabolic Panel	\$36.57
80061	Lipid Panel	\$71.36
80072	Arthritis Panel (85651, 86430 and 86038)	\$77.28
80074	Hepatitis Panel	\$125.00
80076	Liver Function Panel	\$28.55
80092	Thyroid Panel (84479, 83519 and 84443)	\$119.41
80100	Drug Screen	\$49.95
80156	Draw Blood: Tegretol	\$49.95
80157	Draw Blood: Lamotegine	\$45.48
80164	Draw Blood: Valproic Acid	\$46.38
80168	Draw Blood: Zorontin	\$56.19
80184	Draw Blood: Phenobarbital	\$39.24
80185	Draw Blood: Dilantin	\$45.48
80188	Draw Blood: Mysoline	\$57.08
80299	Blood Draw: Other	\$44.64
81000	Urinalysis	\$14.26
82024	Adrenocorticotrophic Hormone (ACTH)	\$118.34
82040	Albumin	\$20.12
82140	Ammonia Level	\$44.48
82247	Total Serum Bilirubin	\$20.12
82331	Calcium Level	\$21.18
82565	Creatinine; Blood Serum	\$21.18
82575	24 Hour Urinalysis	\$38.12
82710	24 Hour Quantitative Fat Analysis	\$51.63
82803	Resting ABG's	\$59.57
83036	Hemoglobin Glycated	\$39.18
83690	Lipase (enzyme study)	\$20.12
84155	24 Hour Urinalysis - total protein	\$14.82
84439	Thyroxine	\$37.06
84443	Thyroid Stimulating Hormone	\$51.63
84550	Serum Uric Acid	\$18.00
85014	HCT	\$10.70
85025	CBC	\$35.68
85610	ProTime	\$17.84
88000	Lab Reading - CE Dept. Only	\$30.00
90000	Form Filled Out by MD Judge's Req.	\$25.00
90001	Children's Mental Status Exam (90801)	\$200.00

90002	OHA Records Review (per hour/3 hour maximum)	\$60.00
90082	TOMM (1 hour)	\$95.00
90086	Beck Depression Scale (20 minutes)	\$32.00
90087	MMPI-Personality Assessment (1 hour)	\$95.00
90089	WRAT-Aptitude Test (30 minutes)	\$47.50
90090	TRAILS A/B-Organicity Test (30 minutes)	\$47.50
90091	WECHS Memory Test (2 hours)	\$190.00
90092	M-Fast, Miller Forensic Assessment (20 minutes)	\$32.00
90093	TONI - Non Verbal IQ Comp. Testing (1.5 hours)	\$137.50
90094	Woodcock Johnson (2 hours)	\$190.00
90095	Vineland Test (1.5 hours)	\$137.50
90621	Orthopedic Exam and Report (99244)	\$190.00
90622	Ophthalmological Exam & Report (99243)	\$150.00
90623	Pediatric Exam and Report (99244)	\$190.00
90624	Cardiology Exam and Report (99245)	\$250.00
90625	Otological Exam and Report (99243)	\$150.00
90626	Internist Exam and Report (99245)	\$225.00
90628	Neurological Exam and Report (99245)	\$225.00
90629	General Physical Exam & Report (99244)	\$190.00
90631	Rheumatology Exam and Report (99245)	\$225.00
90632	Dermatology Exam and Report (99244)	\$190.00
90633	Optometric Exam and Report	\$130.00
90800	Mini MSE and Report	\$55.00
90801	Mental Status Exam and Report	\$200.00
90802	Additional Time for MSE (per half hour)	\$50.00
90803	Additional Time for Testing (per half hour)	\$47.50
90826	Bayley Scale (2 hours)	\$190.00
90827	WAIS-III (2 hours)	\$190.00
90828	WISC-IV (2 hours)	\$190.00
90829	Stanford-Binet (2 hours)	\$190.00
90830	WPPSI-R (2 hours)	\$190.00
90831	Peabody Picture Vocabulary Test (1 hour)	\$95.00
92083	Visual Fields	\$100.00
92499	Snellen Eye Test	\$25.00
92506	Speech/Language Eval. & Report (2 hours)	\$190.00
92543	Caloric Test	\$40.71
92557	Comprehensive Audiometry	\$77.29
92585	Auditory Evoked Potentials	\$161.66
92542	Electronystagmography w. Report. Positional ENG	\$88.50
93000	Resting EKG w. Original Tracings	\$49.70
93015	Treadmill EKG w. Tracings, Interp.	\$199.50
93018	Bicycle Ergonometry - Stress Test	\$29.40
93224	EKG - 24 Hour Holter Monitoring	\$171.00
93307	ECHO (Complete)	\$398.00
93308	ECHO (Limited) to include Eject.Fr.	\$198.10
93922	Arterial Doppler Study	\$216.30
93924	Exercise Arterial Doppler	\$392.00
93965	Extremity Venous Studies	\$230.30
93971	Limited Venous Doppler	\$304.50
94060	Pulmonary Function Studies	\$101.50
94720	DLCO-Diffusing Capacity of Lungs	\$93.10
94760	Noninvasive Pulse Oximetry	\$2.40

94621	Exercise Arterial Blood Gas Study	\$265.30
95819	Routine EEG	\$296.10
95851	ROM	\$35.00
95860	EMG, One Extremity	\$170.00
95861	EMG, Two Extremities	\$210.00
95863	EMG, Three Extremities	\$250.00
95864	EMG, Four Extremities	\$325.00
95883	Halstead-Reitan	\$190.00
95930	Visually Evoked Potential Resp. Study	\$184.10
96101	Victoria Symptom Validity Test (VSVT) (40 minutes)	\$64.00
96117	Neuropsychological Testing Battery (Halstead, WAIS-III, WMS-III)	\$570.00
96118	Structured Inventory of Malingering Symptom (SIMS) (75 minutes)	\$118.75
99201	Office/outpatient Visit, New	\$63.00
99999	Accounting Adjustment	-

Revised 11/2/09 lc