

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
0500F	0500F	INITIAL PRENATAL CARE VISIT	\$239.00	\$251.00	75th percentile	\$12.00	5.0%
0502F	0502F	SUBSEQUENT PRENATAL CARE	\$239.00	\$251.00	75th percentile	\$12.00	5.0%
0503F	0503F	POSTPARTUM CARE VISIT	\$297.00	\$298.00	Blue Cross	\$1.00	0.3%
0521	0521	Medicare FQHC Revenue Code	\$138.01	\$138.01	Encounter rate	\$0.00	0.0%
0900	0900	Medicare FQHC Mental Health	\$138.01	\$138.01	Encounter rate	\$0.00	0.0%
10060	10060	DRAINAGE OF SKIN ABSCESS	\$260.00	\$269.00	75th percentile	\$9.00	3.5%
11200	11200	REMOVAL OF SKIN TAGS	\$232.00	\$239.00	75th percentile	\$7.00	3.0%
11305	11305	SHAVE SKIN LESION	\$214.00	\$212.00	75th percentile	-\$2.00	-0.9%
11404	11404	EXC TR-EXT B9+MARG 3.1-4 CM	\$800.00	\$778.00	75th percentile	-\$22.00	100.0%
11719	11719	TRIM NAIL(S)	\$43.00	\$45.00	75th percentile	\$2.00	4.7%
11730	11730	Removal Of Nail Plate	\$184.00	\$196.00	75th percentile	\$12.00	6.5%
11765	11765	EXCISION OF NAIL FOLD, TOE	\$227.00	\$241.00	75th percentile	\$14.00	6.2%
11976	11976	REMOVAL, IMPLANTABLE CONTRACEPTIVE CAPSULES	\$337.00	\$374.00	75th percentile	\$37.00	11.0%
11981	11981	INSERT DRUG IMPLANT DEVICE	\$337.00	\$374.00	75th percentile	\$37.00	11.0%
11982	11982	REMOVE DRUG IMPLANT DEVICE	\$337.00	\$374.00	75th percentile	\$37.00	11.0%
11983	11983	REMOVE/INSERT DRUG IMPLANT	\$367.00	\$408.00	75th percentile	\$41.00	11.2%
12001	12001	REPAIR SUPERFICIAL WOUND(S)	\$456.00	\$485.00	75th percentile	\$29.00	6.4%
17000	17000	DESTRUCT PREMALG LESION	\$181.00	\$197.00	75th percentile	\$16.00	8.8%
17110	17110	DESTRUCT B9 LESION, 1-14	\$204.00	\$222.00	75th percentile	\$18.00	8.8%
17111	17111	DESTRUCT LESION, 15 OR MORE	\$381.00	\$415.00	75th percentile	\$34.00	8.9%
17250	17250	CHEMICAL CAUTERY, TISSUE	\$170.00	\$185.00	75th percentile	\$15.00	8.8%
20610	20610	DRAIN/INJECT, JOINT/BURSA	\$276.00	\$302.00	75th percentile	\$26.00	9.4%
32	C0032	Outreach	\$20.00	\$20.00	Grant	\$0.00	0.0%
33	C0033	Case Finding	\$20.00	\$20.00	Grant	\$0.00	0.0%
36415	36415	A-ROUTINE VENIPUNCTURE	\$0.00	\$0.00	Current fee	\$0.00	0.0%
36415	36415Q	A ROUTINE VENIPUNCTURE QUEST	\$0.00	\$0.00	Current fee	\$0.00	0.0%
46900	46900	DESTRUCTION, ANAL LESION(S)	\$502.00	\$368.00	75th percentile	-\$134.00	-26.7%
46916	46916	CRYOSURGERY, ANAL LESION(S)	\$502.00	\$368.00	75th percentile	-\$134.00	-26.7%
54050	54050	DESTRUCTION, PENIS LESION(S)	\$386.00	\$329.00	75th percentile	-\$57.00	-14.8%
54056	54056	CRYOSURGERY, PENIS LESION(S)	\$508.00	\$433.00	75th percentile	-\$75.00	-14.8%
54065	54065	DESTRUCTION, PENIS LESION(S)	\$2,196.00	\$1,869.00	75th percentile	-\$327.00	-14.9%
56420	56420	I & D Bartholins Gland Abscess	\$599.00	\$623.00	75th percentile	\$24.00	4.0%
56501	56501	DESTROY, VULVA LESIONS, SIM	\$463.00	\$482.00	75th percentile	\$19.00	4.1%
56515	56515	DESTROY VULVA LESION/S COMPL	\$1,579.00	\$1,643.00	75th percentile	\$64.00	4.1%
56605	56605	BIOPSY OF VULVA/PERINEUM	\$422.00	\$439.00	75th percentile	\$17.00	4.0%
56606	56606	BIOPSY OF VULVA/PERINEUM EACH ADD'L LESION	\$245.00	\$255.00	75th percentile	\$10.00	4.1%
57061	57061	DESTROY VAG LESIONS, SIMPLE	\$1,194.00	\$1,206.00	75th percentile	\$12.00	1.0%
57065	57065	DESTROY VAG LESIONS, COMPLEX	\$2,387.00	\$2,412.00	75th percentile	\$25.00	1.0%
57160	57160	INSERT PESSARY/OTHER DEVICE	\$278.00	\$281.00	75th percentile	\$3.00	1.1%
57421	57421	EXAM/BIOPSY OF VAG W/SCOPE	\$584.00	\$599.00	75th percentile	\$15.00	2.6%
57452	57452	EXAM OF CERVIX W/SCOPE	\$459.00	\$465.00	75th percentile	\$6.00	1.3%
57454	57454	BX/CURETT OF CERVIX W/SCOPE	\$651.00	\$661.00	75th percentile	\$10.00	1.5%
57455	57455	BIOPSY OF CERVIX W/SCOPE	\$601.00	\$610.00	75th percentile	\$9.00	1.5%
57456	57456	ENDOCERV CURETTAGE W/SCOPE	\$532.00	\$539.00	75th percentile	\$7.00	1.3%
57461	57461	CONZ OF CERVIX W/SCOPE, LEEP	\$1,229.00	\$1,246.00	75th percentile	\$17.00	1.4%
57500	57500	BIOPSY OF CERVIX	\$715.00	\$725.00	75th percentile	\$10.00	1.4%
57522	57522	CONIZATION OF CERVIX	\$1,727.00	\$1,752.00	75th percentile	\$25.00	1.4%
58100	58100	BIOPSY OF UTERUS LINING	\$468.00	\$502.00	75th percentile	\$34.00	7.3%
58300	58300	INSERT INTRAUTERINE DEVICE	\$487.00	\$526.00	75th percentile	\$39.00	8.0%
58301	58301	REMOVE INTRAUTERINE DEVICE	\$389.00	\$420.00	75th percentile	\$31.00	8.0%
59025	59025	FETAL NON-STRESS TEST	\$248.00	\$251.00	75th percentile	\$3.00	1.2%
59430	59430	CARE AFTER DELIVERY	\$297.00	\$298.00	Blue Cross	\$1.00	0.3%
69200	69200	CLEAR OUTER EAR CANAL	\$358.00	\$370.00	75th percentile	\$12.00	3.4%
69209	69209	Removal Impacted Cerumen Using Irrigation, Unilat	\$69.00	\$71.00	75th percentile	\$2.00	2.9%
69210	69210	REMOVE IMPACTED EAR WAX	\$143.00	\$148.00	75th percentile	\$5.00	3.5%
70150	70150	X-RAY EXAM OF FACIAL BONES	\$227.00	\$234.00	75th percentile	\$7.00	3.1%
70220	70220	X-RAY EXAM OF SINUSES	\$261.00	\$269.00	75th percentile	\$8.00	3.1%
70260	70260	X-RAY EXAM OF SKULL	\$261.00	\$269.00	75th percentile	\$8.00	3.1%
70330	70330	X-RAY EXAM OF JAW JOINTS	\$276.00	\$284.00	75th percentile	\$8.00	2.9%
71010	71010	CHEST X-RAY - Single View Frontal	\$138.00	\$129.00	75th percentile	-\$9.00	-6.5%
71020	71020	CHEST X-RAY, 2 Views Frontal And Lateral	\$178.00	\$166.00	75th percentile	-\$12.00	-6.7%
71030	71030	CHEST X-RAY - Complete Minimum 4 Views	\$239.00	\$224.00	75th percentile	-\$15.00	-6.3%
71100	71100	X-RAY EXAM OF RIBS	\$175.00	\$163.00	75th percentile	-\$12.00	-6.9%
71101	71101	X-RAY EXAM OF RIBS/CHEST	\$205.00	\$192.00	75th percentile	-\$13.00	-6.3%
72050	72050	X-RAY EXAM OF NECK SPINE	\$217.00	\$218.00	75th percentile	\$1.00	0.5%
72070	72070	X-RAY EXAM OF THORACIC SPINE	\$156.00	\$157.00	75th percentile	\$1.00	0.6%
72072	72072	X-RAY EXAM OF THORACIC SPINE	\$179.00	\$180.00	75th percentile	\$1.00	0.6%
72080	72080	X-RAY EXAM OF TRUNK SPINE	\$169.00	\$169.00	75th percentile	\$0.00	0.0%
72100	72100	X-RAY EXAM OF LOWER SPINE	\$158.00	\$159.00	75th percentile	\$1.00	0.6%
72110	72110	X-RAY EXAM OF LOWER SPINE	\$230.00	\$231.00	75th percentile	\$1.00	0.4%
72170	72170	X-RAY EXAM OF PELVIS	\$159.00	\$159.00	75th percentile	\$0.00	0.0%
72220	72220	X-RAY EXAM OF TAILBONE	\$169.00	\$168.00	75th percentile	-\$1.00	-0.6%

*Note - Flu vaccines effective 7/1/2018

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73000	73000	X-RAY EXAM OF COLLAR BONE	\$132.00	\$135.00	75th percentile	\$3.00	2.3%
73010	73010	X-RAY EXAM OF SHOULDER BLADE	\$150.00	\$155.00	75th percentile	\$5.00	3.3%
73030	73030	X-RAY EXAM OF SHOULDER	\$161.00	\$166.00	75th percentile	\$5.00	3.1%
73060	73060	X-RAY EXAM OF HUMERUS	\$148.00	\$152.00	75th percentile	\$4.00	2.7%
73080	73080	X-RAY EXAM OF ELBOW	\$142.00	\$146.00	75th percentile	\$4.00	2.8%
73090	73090	X-RAY EXAM OF FOREARM	\$126.00	\$130.00	75th percentile	\$4.00	3.2%
73100	73100	X-RAY EXAM OF WRIST	\$118.00	\$121.00	75th percentile	\$3.00	2.5%
73110	73110	X-RAY EXAM OF WRIST	\$136.00	\$139.00	75th percentile	\$3.00	2.2%
73130	73130	X-RAY EXAM OF HAND	\$134.00	\$138.00	75th percentile	\$4.00	3.0%
73140	73140	X-RAY EXAM OF FINGER(S)	\$99.00	\$102.00	75th percentile	\$3.00	3.0%
73502	73502	X-RAY EXAM, HIP, UNILAT, W/PELVIS 2-3 VIEWS	\$170.00	\$170.00	75th percentile	\$0.00	0.0%
73560	73560	X-RAY EXAM OF KNEE, 1 OR 2	\$128.00	\$127.00	75th percentile	-\$1.00	-0.8%
73562	73562	X-RAY EXAM OF KNEE, 3	\$143.00	\$143.00	75th percentile	\$0.00	0.0%
73564	73564	X-RAY EXAM, KNEE, 4 OR MORE	\$170.00	\$170.00	75th percentile	\$0.00	0.0%
73590	73590	X-RAY EXAM OF LOWER LEG	\$126.00	\$126.00	75th percentile	\$0.00	0.0%
73600	73600	X-RAY EXAM OF ANKLE - 2 Views	\$118.00	\$118.00	75th percentile	\$0.00	0.0%
73610	73610	X-RAY EXAM OF ANKLE - Complete, Minimum 3 Views	\$134.00	\$133.00	75th percentile	-\$1.00	-0.7%
73620	73620	X-RAY EXAM OF FOOT	\$117.00	\$116.00	75th percentile	-\$1.00	-0.9%
73630	73630	X-RAY EXAM OF FOOT	\$131.00	\$131.00	75th percentile	\$0.00	0.0%
74000	74000	X-RAY EXAM OF ABDOMEN	\$142.00	\$143.00	75th percentile	\$1.00	0.7%
74020	74020	X-RAY EXAM OF ABDOMEN	\$174.00	\$175.00	75th percentile	\$1.00	0.6%
76705	76705	ECHO EXAM OF ABDOMEN	\$434.00	\$385.00	75th percentile	-\$49.00	-11.3%
76857	76857	US EXAM, PELVIC, LIMITED	\$345.00	\$310.00	75th percentile	-\$35.00	-10.1%
80047	80047	METABOLIC PANEL IONIZED CA	\$76.00	\$87.00	75th percentile	\$11.00	14.5%
80048	80048	BASIC METABOLIC PANEL	\$76.00	\$87.00	75th percentile	\$11.00	14.5%
80053	80053	COMPREHEN METABOLIC PANEL	\$89.00	\$102.00	75th percentile	\$13.00	14.6%
80061	80061	LIPID PANEL	\$102.00	\$116.00	75th percentile	\$14.00	13.7%
80074	80074	ACUTE HEPATITIS PANEL	\$286.00	\$327.00	75th percentile	\$41.00	14.3%
80076	80076	HEPATIC FUNCTION PANEL	\$79.00	\$91.00	75th percentile	\$12.00	15.2%
80156	80156	ASSAY, CARBAMAZEPINE, TOTAL	\$89.00	\$127.00	75th percentile	\$38.00	42.7%
80162	80162	ASSAY OF DIGOXIN	\$83.00	\$97.00	75th percentile	\$14.00	16.9%
80164	80164	ASSAY, DIPROPYLACETIC ACID	\$87.00	\$101.00	75th percentile	\$14.00	16.1%
80177	80177	Levetiracetam	\$37.00	\$100.00	75th percentile	\$63.00	170.3%
80178	80178	ASSAY OF LITHIUM	\$55.00	\$65.00	75th percentile	\$10.00	18.2%
80184	80184	ASSAY OF PHENOBARBITAL	\$74.00	\$86.00	75th percentile	\$12.00	16.2%
80185	80185	ASSAY OF PHENYTOIN, TOTAL	\$83.00	\$97.00	75th percentile	\$14.00	16.9%
80186	80186	ASSAY OF PHENYTOIN, FREE	\$90.00	\$106.00	75th percentile	\$16.00	17.8%
80201	80201	ASSAY OF TOPIRAMATE	\$90.00	\$106.00	75th percentile	\$16.00	17.8%
80305	80305	Drug Test Presump Optical	\$15.83	\$58.00	75th percentile	\$42.17	266.4%
80306	80306	DRUG TEST PRESUMP OPTICAL INSTRUMENT ASSISTED	\$30.00	\$30.00	Blue Cross	\$0.00	0.0%
80307	80307	Drug Test Presump Not Optical	\$64.32	\$312.00	75th percentile	\$247.68	385.1%
81000	81000	URINALYSIS, NONAUTO W/SCOPE	\$31.00	\$32.00	75th percentile	\$1.00	3.2%
81001	81001	URINALYSIS, AUTO W/SCOPE	\$31.00	\$32.00	75th percentile	\$1.00	3.2%
81002	81002	URINALYSIS NONAUTO W/O SCOPE	\$24.00	\$25.00	75th percentile	\$1.00	4.2%
81005	81005	URINALYSIS	\$24.00	\$25.00	75th percentile	\$1.00	4.2%
81025	81025	URINE PREGNANCY TEST	\$45.00	\$47.00	75th percentile	\$2.00	4.4%
81220	81220	CFTR Gene Analysis, Common Variants	\$700.00	\$1,195.00	75th percentile	\$495.00	70.7%
81381	81381	HLA Class I Typing High Resolution 1 Allele/Grp	\$279.00	\$279.00	75th percentile	\$0.00	0.0%
82040	82040	ASSAY OF SERUM ALBUMIN	\$34.00	\$35.00	75th percentile	\$1.00	2.9%
82043	82043	MICROALBUMIN, QUANTITATIVE	\$120.00	\$122.00	75th percentile	\$2.00	1.7%
82075	82075	ASSAY OF BREATH ETHANOL	\$0.00	\$0.00	Current fee	\$0.00	0.0%
82085	82085	ASSAY OF ALDOLASE	\$96.00	\$98.00	75th percentile	\$2.00	2.1%
82105	82105	ALPHA-FETOPROTEIN, SERUM	\$161.00	\$164.00	75th percentile	\$3.00	1.9%
82140	82140	ASSAY OF AMMONIA	\$86.00	\$87.00	75th percentile	\$1.00	1.2%
82150	82150	ASSAY OF AMYLASE	\$41.00	\$40.00	75th percentile	-\$1.00	-2.4%
82172	82172	ASSAY OF APOLIPOPROTEIN	\$79.00	\$77.00	75th percentile	-\$2.00	-2.5%
82247	82247	BILIRUBIN, TOTAL	\$26.00	\$26.00	75th percentile	\$0.00	0.0%
82248	82248	BILIRUBIN, DIRECT	\$26.00	\$26.00	75th percentile	\$0.00	0.0%
82270	82270	OCCULT BLOOD, FECES	\$24.00	\$23.00	75th percentile	-\$1.00	-4.2%
82272	82272	OCCULT BLOOD, FECES, SINGLE	\$22.00	\$21.00	75th percentile	-\$1.00	-4.5%
82274	82274	ASSAY TEST FOR BLOOD, FECAL	\$84.00	\$82.00	75th percentile	-\$2.00	-2.4%
82306	82306	ASSAY OF VITAMIN D	\$175.00	\$180.00	75th percentile	\$5.00	2.9%
82310	82310	ASSAY OF CALCIUM	\$28.00	\$29.00	75th percentile	\$1.00	3.6%
82330	82330	ASSAY OF CALCIUM	\$77.00	\$79.00	75th percentile	\$2.00	2.6%
82340	82340	ASSAY OF CALCIUM IN URINE	\$37.00	\$38.00	75th percentile	\$1.00	2.7%
82378	82378	CARCINOEMBRYONIC ANTIGEN	\$122.00	\$125.00	75th percentile	\$3.00	2.5%
82390	82390	ASSAY OF CERULOPLASMIN	\$75.00	\$77.00	75th percentile	\$2.00	2.7%
82397	82397	CHEMILUMINESCENT ASSAY	\$65.00	\$67.00	75th percentile	\$2.00	3.1%
82465	82465	ASSAY, BLD/SERUM CHOLESTEROL	\$23.00	\$24.00	75th percentile	\$1.00	4.3%
82533	82533	TOTAL CORTISOL	\$216.00	\$219.00	75th percentile	\$3.00	1.4%
82540	82540	ASSAY OF CREATINE	\$83.00	\$84.00	75th percentile	\$1.00	1.2%
82542	82542	COLUMN CHROMATOGRAPHY, QUANT	\$207.00	\$210.00	75th percentile	\$3.00	1.4%

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82550	82550	ASSAY OF CK (CPK)	\$60.00	\$61.00	75th percentile	\$1.00	1.7%
82552	82552	ASSAY OF CPK IN BLOOD	\$166.00	\$168.00	75th percentile	\$2.00	1.2%
82570	82570	ASSAY OF URINE CREATININE	\$74.00	\$75.00	75th percentile	\$1.00	1.4%
82575	82575	CREATININE CLEARANCE TEST	\$133.00	\$135.00	75th percentile	\$2.00	1.5%
82607	82607	VITAMIN B-12	\$184.00	\$187.00	75th percentile	\$3.00	1.6%
82627	82627	DEHYDROEPIANDROSTERONE	\$180.00	\$184.00	75th percentile	\$4.00	2.2%
82652	82652	ASSAY OF DIHYDROXYVITAMIN D	\$187.00	\$192.00	75th percentile	\$5.00	2.7%
82670	82670	ASSAY OF ESTRADIOL	\$141.00	\$144.00	75th percentile	\$3.00	2.1%
82677	82677	ASSAY OF ESTRIOL	\$129.00	\$132.00	75th percentile	\$3.00	2.3%
82728	82728	ASSAY OF FERRITIN	\$111.00	\$113.00	75th percentile	\$2.00	1.8%
82746	82746	BLOOD FOLIC ACID SERUM	\$123.00	\$126.00	75th percentile	\$3.00	2.4%
82784	82784	ASSAY OF GAMMAGLOBULIN IGM	\$81.00	\$83.00	75th percentile	\$2.00	2.5%
82785	82785	ASSAY OF GAMMAGLOBULIN IGE	\$104.00	\$106.00	75th percentile	\$2.00	1.9%
82787	82787	IGG 1, 2, 3 OR 4, EACH	\$0.00	\$233.00	75th percentile	\$233.00	100.0%
82947	82947	ASSAY, GLUCOSE, BLOOD QUANT	\$33.00	\$34.00	75th percentile	\$1.00	3.0%
82950	82950	GLUCOSE TEST	\$43.00	\$44.00	75th percentile	\$1.00	2.3%
82951	82951	GLUCOSE TOLERANCE TEST (GTT)	\$91.00	\$93.00	75th percentile	\$2.00	2.2%
82952	82952	GTT-ADDED SAMPLES	\$28.00	\$28.00	75th percentile	\$0.00	0.0%
82955	82955	ASSAY OF G6PD ENZYME	\$91.00	\$93.00	75th percentile	\$2.00	2.2%
82962	82962	GLUCOSE BLOOD TEST	\$25.00	\$26.00	75th percentile	\$1.00	4.0%
82977	82977	ASSAY OF GGT	\$28.00	\$28.00	75th percentile	\$0.00	0.0%
83001	83001	GONADOTROPIN (FSH)	\$127.00	\$129.00	75th percentile	\$2.00	1.6%
83002	83002	GONADOTROPIN (LH)	\$127.00	\$129.00	75th percentile	\$2.00	1.6%
83010	83010	ASSAY OF HAPTOGLOBIN, QUANT	\$110.00	\$110.00	75th percentile	\$0.00	0.0%
83021	83021	HEMOGLOBIN CHROMATOGRAPHY	\$134.00	\$133.00	75th percentile	-\$1.00	-0.7%
83036	83036	GLYCOSYLATED HEMOGLOBIN TEST	\$80.00	\$80.00	75th percentile	\$0.00	0.0%
83037	83037	GLYCOSYLATED HB, HOME DEVICE	\$71.00	\$71.00	75th percentile	\$0.00	0.0%
83516	83516	IMMUNOASSAY, NONANTIBODY	\$122.00	\$130.00	75th percentile	\$8.00	6.6%
83519	83519	IMMUNOASSAY, NONANTIBODY	\$184.00	\$195.00	75th percentile	\$11.00	6.0%
83525	83525	ASSAY OF INSULIN	\$155.00	\$165.00	75th percentile	\$10.00	6.5%
83540	83540	ASSAY OF IRON	\$45.00	\$48.00	75th percentile	\$3.00	6.7%
83550	83550	IRON BINDING TEST	\$69.00	\$74.00	75th percentile	\$5.00	7.2%
83615	83615	LACTATE (LD) (LDH) ENZYME	\$45.00	\$48.00	75th percentile	\$3.00	6.7%
83655	83655	ASSAY OF LEAD	\$102.00	\$108.00	75th percentile	\$6.00	5.9%
83690	83690	ASSAY OF LIPASE	\$90.00	\$95.00	75th percentile	\$5.00	5.6%
83735	83735	ASSAY OF MAGNESIUM	\$55.00	\$56.00	75th percentile	\$1.00	1.8%
83880	83880	NATRIURETIC PEPTIDE	\$205.00	\$209.00	75th percentile	\$4.00	2.0%
83883	83883	ASSAY, NEPHELOMETRY NOT SPEC	\$126.00	\$129.00	75th percentile	\$3.00	2.4%
83970	83970	ASSAY OF PARATHORMONE	\$231.00	\$235.00	75th percentile	\$4.00	1.7%
83986	83986	PH Body Fluids	\$25.00	\$26.00	75th percentile	\$1.00	4.0%
84075	84075	ASSAY ALKALINE PHOSPHATASE	\$25.00	\$26.00	75th percentile	\$1.00	4.0%
84080	84080	ASSAY ALKALINE PHOSPHATASES	\$109.00	\$111.00	75th percentile	\$2.00	1.8%
84100	84100	ASSAY OF PHOSPHORUS	\$20.00	\$21.00	75th percentile	\$1.00	5.0%
84132	84132	ASSAY OF SERUM POTASSIUM	\$23.00	\$23.00	75th percentile	\$0.00	0.0%
84144	84144	ASSAY OF PROGESTERONE	\$127.00	\$129.00	75th percentile	\$2.00	1.6%
84146	84146	ASSAY OF PROLACTIN	\$127.00	\$129.00	75th percentile	\$2.00	1.6%
84153	84153	ASSAY OF PSA, TOTAL	\$122.00	\$124.00	75th percentile	\$2.00	1.6%
84154	84154	ASSAY OF PSA, FREE	\$102.00	\$103.00	75th percentile	\$1.00	1.0%
84155	84155	ASSAY OF PROTEIN, SERUM	\$28.00	\$28.00	75th percentile	\$0.00	0.0%
84156	84156	ASSAY OF PROTEIN, URINE	\$36.00	\$36.00	75th percentile	\$0.00	0.0%
84165	84165	PROTEIN E-PHORESIS, SERUM	\$91.00	\$93.00	75th percentile	\$2.00	2.2%
84166	84166	PROTEIN E-PHORESIS/URINE/CSF	\$97.00	\$98.00	75th percentile	\$1.00	1.0%
84295	84295	ASSAY OF SERUM SODIUM	\$25.00	\$26.00	75th percentile	\$1.00	4.0%
84402	84402	ASSAY OF TESTOSTERONE	\$203.00	\$223.00	75th percentile	\$20.00	9.9%
84403	84403	ASSAY OF TOTAL TESTOSTERONE	\$163.00	\$179.00	75th percentile	\$16.00	9.8%
84436	84436	ASSAY OF TOTAL THYROXINE	\$58.00	\$64.00	75th percentile	\$6.00	10.3%
84439	84439	ASSAY OF FREE THYROXINE	\$58.00	\$111.00	75th percentile	\$53.00	91.4%
84443	84443	ASSAY THYROID STIM HORMONE	\$145.00	\$159.00	75th percentile	\$14.00	9.7%
84479	84479	ASSAY OF THYROID (T3 OR T4)	\$65.00	\$72.00	75th percentile	\$7.00	10.8%
84480	84480	ASSAY, TRIIODOTHYRONINE (T3)	\$145.00	\$159.00	75th percentile	\$14.00	9.7%
84481	84481	FREE ASSAY (FT-3)	\$192.00	\$211.00	75th percentile	\$19.00	9.9%
84550	84550	ASSAY OF BLOOD/URIC ACID	\$30.00	\$31.00	75th percentile	\$1.00	3.3%
84681	84681	ASSAY OF C-PEPTIDE	\$158.00	\$163.00	75th percentile	\$5.00	3.2%
84702	84702	CHORIONIC GONADOTROPIN TEST	\$105.00	\$109.00	75th percentile	\$4.00	3.8%
84703	84703	CHORIONIC GONADOTROPIN ASSAY	\$64.00	\$66.00	75th percentile	\$2.00	3.1%
85014	85014	HEMATOCRIT	\$27.00	\$28.00	75th percentile	\$1.00	3.7%
85018	85018	HEMOGLOBIN	\$27.00	\$28.00	75th percentile	\$1.00	3.7%
85025	85025	COMPLETE CBC W/AUTO DIFF WBC	\$56.00	\$58.00	75th percentile	\$2.00	3.6%
85041	85041	AUTOMATED RBC COUNT	\$36.00	\$37.00	75th percentile	\$1.00	2.8%
85045	85045	AUTOMATED RETICULOCYTE COUNT	\$45.00	\$47.00	75th percentile	\$2.00	4.4%
85049	85049	AUTOMATED PLATELET COUNT	\$36.00	\$37.00	75th percentile	\$1.00	2.8%
85379	85379	FIBRIN DEGRADATION, QUANT	\$110.00	\$131.00	75th percentile	\$21.00	19.1%

*Note - Flu vaccines effective 7/1/2018

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
85610	85610	PROTHROMBIN TIME	\$38.00	\$45.00	75th percentile	\$7.00	18.4%
85613	85613	RUSSELL VIPER VENOM, DILUTED	\$97.00	\$116.00	75th percentile	\$19.00	19.6%
85652	85652	RBC SED RATE, AUTOMATED	\$38.00	\$45.00	75th percentile	\$7.00	18.4%
85660	85660	RBC SICKLE CELL TEST	\$49.00	\$58.00	75th percentile	\$9.00	18.4%
85730	85730	THROMBOPLASTIN TIME, PARTIAL	\$53.00	\$64.00	75th percentile	\$11.00	20.8%
86003	86003	ALLERGEN SPECIFIC IGE	\$35.00	\$31.00	75th percentile	-\$4.00	-11.4%
86038	86038	ANTINUCLEAR ANTIBODIES	\$112.00	\$98.00	75th percentile	-\$14.00	-12.5%
86060	86060	ANTISTREPTOLYSIN O, TITER	\$77.00	\$67.00	75th percentile	-\$10.00	-13.0%
86140	86140	C-REACTIVE PROTEIN	\$68.00	\$74.00	75th percentile	\$6.00	8.8%
86160	86160	COMPLEMENT, ANTIGEN	\$139.00	\$153.00	75th percentile	\$14.00	10.1%
86162	86162	COMPLEMENT, TOTAL (CH50)	\$210.00	\$231.00	75th percentile	\$21.00	10.0%
86200	86200	CCP ANTIBODY	\$142.00	\$156.00	75th percentile	\$14.00	9.9%
86225	86225	DNA ANTIBODY	\$146.00	\$160.00	75th percentile	\$14.00	9.6%
86235	86235	NUCLEAR ANTIGEN ANTIBODY	\$129.00	\$141.00	75th percentile	\$12.00	9.3%
86255	86255	FLUORESCENT ANTIBODY, SCREEN	\$119.00	\$130.00	75th percentile	\$11.00	9.2%
86304	86304	IMMUNOASSAY, TUMOR, CA 125	\$151.00	\$148.00	75th percentile	-\$3.00	-2.0%
86308	86308	HETEROPHILE ANTIBODIES	\$54.00	\$53.00	75th percentile	-\$1.00	-1.9%
86317	86317	IMMUNOASSAY,INFECTIOUS AGENT	\$72.00	\$71.00	75th percentile	-\$1.00	-1.4%
86334	86334	IMMUNOFIX E-PHORESIS, SERUM	\$163.00	\$159.00	75th percentile	-\$4.00	-2.5%
86335	86335	IMMUNIFIX E-PHORSIS/URINE/CSF	\$163.00	\$159.00	75th percentile	-\$4.00	-2.5%
86336	86336	INHIBIN A	\$151.00	\$148.00	75th percentile	-\$3.00	-2.0%
86360	86360	T CELL, ABSOLUTE COUNT/RATIO	\$181.00	\$177.00	75th percentile	-\$4.00	-2.2%
86376	86376	MICROSOMAL ANTIBODY	\$122.00	\$130.00	75th percentile	\$8.00	6.6%
86431	86431	RHEUMATOID FACTOR, QUANT	\$61.00	\$65.00	75th percentile	\$4.00	6.6%
86480	86480	TB TEST, CELL IMMUN MEASURE	\$101.00	\$107.00	75th percentile	\$6.00	5.9%
86580	86580	TB INTRADERMAL TEST	\$43.00	\$45.00	75th percentile	\$2.00	4.7%
86592	86592	BLOOD SEROLOGY, QUALITATIVE	\$43.00	\$45.00	75th percentile	\$2.00	4.7%
86618	86618	LYME DISEASE ANTIBODY	\$171.00	\$165.00	75th percentile	-\$6.00	-3.5%
86644	86644	CMV ANTIBODY	\$157.00	\$152.00	75th percentile	-\$5.00	-3.2%
86664	86664	EPSTEIN-BARR ANTIBODY	\$157.00	\$152.00	75th percentile	-\$5.00	-3.2%
86665	86665	EPSTEIN-BARR ANTIBODY	\$178.00	\$172.00	75th percentile	-\$6.00	-3.4%
86671	86671	FUNGUS ANTIBODY	\$223.00	\$223.00	Vendor Cost	\$0.00	0.0%
86692	86692	HEPATITIS, DELTA AGENT	\$181.00	\$175.00	75th percentile	-\$6.00	-3.3%
86695	86695	HERPES SIMPLEX TEST	\$151.00	\$145.00	75th percentile	-\$6.00	-4.0%
86696	86696	HERPES SIMPLEX TYPE 2	\$151.00	\$145.00	75th percentile	-\$6.00	-4.0%
86703	86703F	HIV-1/HIV-2, SINGLE ASSAY	\$0.00	\$0.00	Current fee	\$0.00	0.0%
86703	86703-92	HIV-1/HIV-2, SINGLE ASSAY	\$0.00	\$0.00	Current fee	\$0.00	0.0%
86703	86703	HIV-1/HIV-2, SINGLE ASSAY	\$137.00	\$132.00	75th percentile	-\$5.00	-3.6%
86704	86704	HEP B CORE ANTIBODY, TOTAL	\$120.00	\$116.00	75th percentile	-\$4.00	-3.3%
86706	86706	HEP B SURFACE ANTIBODY	\$106.00	\$102.00	75th percentile	-\$4.00	-3.8%
86708	86708	HEP A ANTIBODY, TOTAL	\$127.00	\$122.00	75th percentile	-\$5.00	-3.9%
86735	86735	MUMPS ANTIBODY	\$137.00	\$132.00	75th percentile	-\$5.00	-3.6%
86753	86753	PROTOZOA ANTIBODY NOS	\$0.00	\$165.00	75th percentile	\$165.00	100.0%
86762	86762	RUBELLA ANTIBODY	\$82.00	\$79.00	75th percentile	-\$3.00	-3.7%
86765	86765	RUBEOLA ANTIBODY	\$144.00	\$139.00	75th percentile	-\$5.00	-3.5%
86777	86777	TOXOPLASMA ANTIBODY	\$113.00	\$109.00	75th percentile	-\$4.00	-3.5%
86787	86787	VARICELLA-ZOSTER ANTIBODY	\$140.00	\$135.00	75th percentile	-\$5.00	-3.6%
86800	86800	THYROGLOBULIN ANTIBODY	\$147.00	\$142.00	75th percentile	-\$5.00	-3.4%
86803	86803	HEPATITIS C AB TEST	\$168.00	\$162.00	75th percentile	-\$6.00	-3.6%
86850	86850	RBC ANTIBODY SCREEN	\$78.00	\$78.00	75th percentile	\$0.00	0.0%
86900	86900	BLOOD TYPING, ABO	\$41.00	\$41.00	75th percentile	\$0.00	0.0%
86901	86901	BLOOD TYPING, RH (D)	\$41.00	\$41.00	75th percentile	\$0.00	0.0%
87015	87015	SPECIMEN CONCENTRATION	\$77.00	\$79.00	75th percentile	\$2.00	2.6%
87045	87045	FECES CULTURE, BACTERIA	\$103.00	\$105.00	75th percentile	\$2.00	1.9%
87046	87046	STOOL CULTR, BACTERIA, EACH	\$103.00	\$105.00	75th percentile	\$2.00	1.9%
87070	87070	CULTURE, BACTERIA, OTHER	\$99.00	\$102.00	75th percentile	\$3.00	3.0%
87075	87075	CULTR BACTERIA, EXCEPT BLOOD	\$110.00	\$113.00	75th percentile	\$3.00	2.7%
87081	87081	CULTURE SCREEN ONLY	\$66.00	\$68.00	75th percentile	\$2.00	3.0%
87086	87086	URINE CULTURE/COLONY COUNT	\$92.00	\$94.00	75th percentile	\$2.00	2.2%
87101	87101	SKIN FUNGI CULTURE	\$92.00	\$94.00	75th percentile	\$2.00	2.2%
87110	87110	CHLAMYDIA CULTURE	\$139.00	\$143.00	75th percentile	\$4.00	2.9%
87116	87116	MYCOBACTERIA CULTURE	\$110.00	\$113.00	75th percentile	\$3.00	2.7%
87140	87140	CULTURE TYPE IMMUNOFLUORESC	\$77.00	\$79.00	75th percentile	\$2.00	2.6%
87172	87172	PINWORM EXAM	\$70.00	\$72.00	75th percentile	\$2.00	2.9%
87177	87177	OVA AND PARASITES SMEARS	\$126.00	\$129.00	75th percentile	\$3.00	2.4%
87205	87205	SMEAR, GRAM STAIN	\$70.00	\$72.00	75th percentile	\$2.00	2.9%
87206	87206	SMEAR, FLUORESCENT/ACID STAI	\$84.00	\$86.00	75th percentile	\$2.00	2.4%
87209	87209	SMEAR, COMPLEX STAIN	\$84.00	\$86.00	75th percentile	\$2.00	2.4%
87210	87210	SMEAR, WET MOUNT, SALINE/INK	\$61.00	\$62.00	75th percentile	\$1.00	1.6%
87220	87220	TISSUE EXAM FOR FUNGI	\$70.00	\$72.00	75th percentile	\$2.00	2.9%
87255	87255	GENET VIRUS ISOLATE, HSV	\$234.00	\$238.00	75th percentile	\$4.00	1.7%
87324	87324	CLOSTRIDIUM AG, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%

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Lake County Health Department and Community Health Center
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Effective Date of December 1, 2017

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87329	87329	GIARDIA AG, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%
87337	87337	ENTAMOEB HIST GROUP, AG, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%
87338	87338	HPYLORI, STOOL, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%
87340	87340	HEPATITIS B SURFACE AG, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%
87389	87389	HIV-1 Antigen With HIV 1&2 Antibodies, Single Res	\$100.00	\$95.00	75th percentile	-\$5.00	-5.0%
87427	87427	SHIGA-LIKE TOXIN AG, EIA	\$56.00	\$61.00	75th percentile	\$5.00	8.9%
87491	87491	CHYLM D TRACH, DNA, AMP PROBE	\$126.00	\$137.00	75th percentile	\$11.00	8.7%
87517	87517	HEPATITIS B, DNA, QUANT	\$213.00	\$231.00	75th percentile	\$18.00	8.5%
87522	87522	HEPATITIS C, RNA, QUANT	\$196.00	\$212.00	75th percentile	\$16.00	8.2%
87529	87529	HSV, DNA, AMP PROBE	\$157.00	\$171.00	75th percentile	\$14.00	8.9%
87536	87536	HIV-1, DNA, QUANT	\$245.00	\$265.00	75th percentile	\$20.00	8.2%
87591	87591	N.GONORRHOEA, DNA, AMP PROB	\$140.00	\$152.00	75th percentile	\$12.00	8.6%
87624	87624	Iadna Human Papillomavirus (HPV) High Risk	\$140.00	\$152.00	75th percentile	\$12.00	8.6%
87625	87625	Iadna Human Papillomavirus(HPV) Types 16 & 18 Only	\$140.00	\$152.00	75th percentile	\$12.00	8.6%
87661	87661	TRICHOMONAS VAGIN, AMPLIFIED PROBE	\$156.03	\$135.00	75th percentile	-\$21.03	-13.5%
87798	87798	DETECT AGENT NOS, DNA, AMP	\$140.00	\$152.00	75th percentile	\$12.00	8.6%
87804	87804	INFLUENZA ASSAY W/OPTIC	\$61.00	\$66.00	75th percentile	\$5.00	8.2%
87880	87880	STREP A ASSAY W/OPTIC	\$61.00	\$66.00	75th percentile	\$5.00	8.2%
87900	87900	PHENOTYPE, INFECT AGENT DRUG	\$492.00	\$492.00	75th percentile	\$0.00	0.0%
87901	87901	GENOTYPE, DNA, HIV REVERSE T	\$777.00	\$842.00	75th percentile	\$65.00	8.4%
87902	87902	GENOTYPE, DNA, HEPATITIS C	\$777.00	\$842.00	75th percentile	\$65.00	8.4%
88142	88142	CYTOPATH, C/V, THIN LAYER	\$90.00	\$92.00	75th percentile	\$2.00	2.2%
88164	88164	CYTOPATH TBS, C/V, MANUAL	\$90.00	\$92.00	75th percentile	\$2.00	2.2%
88175	88175	CYTOPATH C/V AUTO FLUID REDO	\$104.00	\$105.00	75th percentile	\$1.00	1.0%
88300	88300	SURGICAL PATH, GROSS	\$189.00	\$151.00	75th percentile	-\$38.00	-20.1%
88305	88305	TISSUE EXAM BY PATHOLOGIST	\$579.00	\$462.00	75th percentile	-\$117.00	-20.2%
88307	88307	TISSUE EXAM BY PATHOLOGIST	\$945.00	\$755.00	75th percentile	-\$190.00	-20.1%
89055	89055	LEUKOCYTE ASSESSMENT, FECAL	\$41.00	\$57.00	75th percentile	\$16.00	39.0%
90384	90384	RH IG, FULL-DOSE, IM	\$270.00	\$281.00	75th percentile	\$11.00	4.1%
90460	90460	IMMUNE ADMIN 1 INJ, < 18 YRS	\$58.00	\$60.00	75th percentile	\$2.00	3.4%
90461	90461	IMMUNE ADMIN ADDL INJ, < 18 YRS	\$35.00	\$36.00	75th percentile	\$1.00	2.9%
90471	90471	IMMUNIZATION ADMIN	\$58.00	\$60.00	75th percentile	\$2.00	3.4%
90472	90472	IMMUNIZATION ADMIN, EACH ADD	\$35.00	\$36.00	75th percentile	\$1.00	2.9%
90620	9P620	Meningococcal B, OMV	\$203.00	\$203.00	Blue Cross	\$0.00	0.0%
90620	90620	Meningococcal B, OMV	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90621	90621	Meningococcal B, Recombinant	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90621	9P621	Meningococcal B, Recombinant	\$155.00	\$155.00	75th percentile	\$0.00	0.0%
90632	90632	HEP A VACCINE, ADULT IM	\$0.00	\$0.00	Current fee	\$0.00	0.0%
90633	9P633	HEP A VACC, PED/ADOL, 2 DOSE	\$71.00	\$73.00	75th percentile	\$2.00	2.8%
90633	90633	HEP A VACC, PED/ADOL, 2 DOSE	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90647	9P647	HIB VACCINE, PRP-OMP, IM	\$60.00	\$62.00	75th percentile	\$2.00	3.3%
90647	90647	HIB VACCINE, PRP-OMP, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90648	90648	HIB VACCINE, PRP-T, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90648	9P648	HIB VACCINE, PRP-T, IM	\$56.00	\$58.00	75th percentile	\$2.00	3.6%
90651	90651	HPV9	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90651	9P651	HPV9	\$214.00	\$214.00	Blue Cross	\$0.00	0.0%
90651	906A1	HPV9	\$23.00	\$23.00	VCP price	\$0.00	0.0%
*90657	*90657	Influenza 6-35 Months IIV3	\$23.00	\$23.00	VCP price	\$0.00	0.0%
*90658	*90658	FLU VACCINE, 3 YRS & >	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90662	90662	Influenza 65yrs And Older Prefilled Syringe	\$50.00	\$50.00	Blue Cross	\$0.00	0.0%
90670	9A670	Pneumococcal Conj 13 Valent IM	\$308.00	\$239.00	75th percentile	-\$69.00	-22.4%
90670	9P670	Pneumococcal Conj 13 Valent IM	\$308.00	\$239.00	75th percentile	-\$69.00	-22.4%
90670	90670	Pneumococcal Conj 13 Valent IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90672	90672	Influenza 2-49yrs - 0.2ml Prefill Intranasal LAIV4	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90675	90675	RABIES VACCINE, IM	\$0.00	\$0.00	Current fee	\$0.00	0.0%
90680	90680	ROTOVIRUS VACC 3 DOSE, ORAL	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90681	90681	ROTOVIRUS VACC 2 DOSE ORAL	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90681	9P681	ROTOVIRUS VACC 2 DOSE ORAL	\$159.00	\$163.00	75th percentile	\$4.00	2.5%
90682	90682	Riv4 Vacc Recombinant DNA IM	\$50.00	\$50.00	Current fee	\$0.00	0.0%
*90685	*9P685	Influenza 6-35 Mo(0.25ml Single Dose Prefill)	\$48.00	\$60.00	75th percentile	\$12.00	25.0%
*90685	*90685	Influenza 6-35 Mo(0.25ml Single Dose Prefill) IIV4	\$23.00	\$23.00	VCP price	\$0.00	0.0%
*90686	*9P686	Influenza 3yrs And Older(0.5ml Single Dose Prefil)	\$33.00	\$44.00	75th percentile	\$11.00	33.3%
*90686	*90686	Influenza 3yrs And Older(0.5ml Single Dose Prefil) IIV4	\$23.00	\$23.00	VCP price	\$0.00	0.0%
*90687	*90687	Influenza 6-35 Months Split Virus Quadrivalent	\$23.00	\$23.00	VCP price	\$0.00	0.0%
*90688	*9A688	Influenza 3yrs And Older Split Virus Quadrivalent	\$30.00	\$45.00	75th percentile	\$15.00	50.0%
90696	9P696	DTAP-IPV VACC 4-6 YR IM	\$119.00	\$62.00	Blue Cross	-\$57.00	-47.9%
90696	90696	DTAP-IPV VACC 4-6 YR IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90698	90698	DTAP-HIB-IP VACCINE, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90698	9P698	DTAP-HIB-IP VACCINE, IM	\$159.00	\$163.00	75th percentile	\$4.00	2.5%
90700	90700	DTAP VACCINE, < 7 YRS, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90700	9P700	DTAP VACCINE, < 7 YRS, IM	\$53.00	\$54.00	75th percentile	\$1.00	1.9%

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90702	90702	DT VACCINE < 7, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90707	9P707	MMR VACCINE, SC	\$106.00	\$109.00	75th percentile	\$3.00	2.8%
90707	9070A	Adult MMR VACCINE, SC	\$106.00	\$109.00	75th percentile	\$3.00	2.8%
90707	90707	MMR VACCINE, SC	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90710	9P710	MMRV VACCINE, SC	\$282.00	\$290.00	75th percentile	\$8.00	2.8%
90710	90710	MMRV VACCINE, SC	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90713	9P713	POLIOVIRUS, IPV, SC/IM	\$60.00	\$62.00	75th percentile	\$2.00	3.3%
90713	90713	POLIOVIRUS, IPV, SC/IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90714	90714	TD VACCINE NO PRSRV >= 7 IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90714	9071A	Adult TD VACCINE NO PRSRV >= 7 IM	\$39.00	\$54.00	75th percentile	\$15.00	38.5%
90715	907A5	Adult TDAP VACCINE >7 IM	\$48.00	\$49.00	75th percentile	\$1.00	2.1%
90715	9P715	TDAP VACCINE >7 IM	\$49.00	\$49.00	75th percentile	\$0.00	0.0%
90715	90715	TDAP VACCINE >7 IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90716	90716	CHICKEN POX VACCINE, SC	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90716	9P716	CHICKEN POX VACCINE, SC	\$155.00	\$160.00	75th percentile	\$5.00	3.2%
90723	9P723	DTAP-HEP B-IPV VACCINE, IM	\$155.00	\$160.00	75th percentile	\$5.00	3.2%
90723	90723	DTAP-HEP B-IPV VACCINE, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90732	907A2	PNEUMOCOCCAL VACCINE	\$100.00	\$109.00	Blue Cross	\$9.00	9.0%
90732	90732	PNEUMOCOCCAL VACCINE	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90734	90734	MENINGOCOCCAL VACCINE, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90734	9P734	MENINGOCOCCAL VACCINE, IM	\$201.00	\$207.00	75th percentile	\$6.00	3.0%
90734	9073A	Adult MENINGOCOCCAL VACCINE, IM	\$201.00	\$207.00	75th percentile	\$6.00	3.0%
90744	90744	HEPB VACC PED/ADOL 3 DOSE IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90744	9P744	HEPB VACC PED/ADOL 3 DOSE IM	\$73.00	\$75.00	75th percentile	\$2.00	2.7%
90746	90746	HEP B VACCINE, ADULT, IM	\$0.00	\$0.00	Current fee	\$0.00	0.0%
90748	90748	HEP B/HIB VACCINE, IM	\$23.00	\$23.00	VCP price	\$0.00	0.0%
90775	90775	THER/PROPH/DIAG INJ ADD-ON	\$0.00	\$0.00	Current fee	\$0.00	0.0%
90785	90785	Interactive Complexity	\$29.00	\$30.00	75th percentile	\$1.00	3.4%
90791	90791	Psychiatric Diagnostic Evaluation	\$276.00	\$294.00	75th percentile	\$18.00	6.5%
90791E	90791E	Psychiatric Diagnostic Eval No Med Srv,Est	\$276.00	\$294.00	75th percentile	\$18.00	6.5%
90792	90792	Psychiatric Diagnostic Eval With Medical Services	\$291.00	\$309.00	75th percentile	\$18.00	6.2%
90792E	90792E	Psychiatric Diag Eval With Med Srv, Est	\$291.00	\$309.00	75th percentile	\$18.00	6.2%
90792N	90792N	Psychiatric Diag Eval With Med Srv, New	\$291.00	\$309.00	75th percentile	\$18.00	6.2%
90832	90832	Psychotherapy, 30 Min. W/Pt And/or Family Member	\$111.00	\$114.00	75th percentile	\$3.00	2.7%
90832E	90832E	Psychotherapy, 30 Min W/pt And/or Fam, Est	\$111.00	\$114.00	75th percentile	\$3.00	2.7%
90833	90833	Psychotherapy 30 Min W/pt And/or Family With E & M	\$94.00	\$95.16	Blue Cross	\$1.16	1.2%
90834	90834	Psychotherapy 45 Min. W/pt And/or Family Member	\$153.00	\$157.00	75th percentile	\$4.00	2.6%
90834E	90834E	Psychotherapy 45 Min, W/pt And/or Fam, Est	\$153.00	\$157.00	75th percentile	\$4.00	2.6%
90836	90836	Psychotherapy 45 Min. W/Pt And/or Family And E & M	\$134.00	\$137.00	75th percentile	\$3.00	2.2%
90837	90837	Psychotherapy 60 Min W/Pt And/or Family Member	\$227.00	\$234.00	75th percentile	\$7.00	3.1%
90837E	90837E	Psychotherapy 60 Min, W/pt And/or Fam, Est	\$227.00	\$234.00	75th percentile	\$7.00	3.1%
90839	90839	Psychotherapy For Crisis, First 60 Minutes	\$190.00	\$235.00	75th percentile	\$45.00	23.7%
90840	90840	Psychotherapy For Crisis, Ea. Additional 30 Min.	\$91.00	\$112.00	75th percentile	\$21.00	23.1%
90846	90846	FAMILY PSYTX W/O PATIENT	\$178.00	\$178.00	75th percentile	\$0.00	0.0%
90847	90847	FAMILY PSYTX W/PATIENT	\$189.00	\$189.00	75th percentile	\$0.00	0.0%
90853	90853	GROUP PSYCHOTHERAPY	\$116.00	\$116.00	75th percentile	\$0.00	0.0%
92227	92227	REMOTE IMAG FOR DETECT OF RETINAL DS	\$43.00	\$50.00	75th percentile	\$7.00	16.3%
92228	92228	REMOTE IMAG FOR MON AND MAN OF ACTIVE RET DS	\$92.00	\$106.00	75th percentile	\$14.00	15.2%
93000	93000	ELECTROCARDIOGRAM, COMPLETE	\$89.00	\$90.00	75th percentile	\$1.00	1.1%
93005	93005	ELECTROCARDIOGRAM, TRACING	\$58.00	\$59.00	75th percentile	\$1.00	1.7%
93271	93271	ECG/MONITORING AND ANALYSIS	\$284.00	\$285.00	75th percentile	\$1.00	0.4%
93272	93272	ECG/REVIEW, INTERPRET ONLY	\$153.00	\$155.00	75th percentile	\$2.00	1.3%
93307	93307	ECHO EXAM OF HEART	\$661.00	\$753.00	75th percentile	\$92.00	13.9%
94010	94010	Spirometry, Graphic Rec, Total Tmd, Flow Rate Meas	\$157.00	\$190.00	75th percentile	\$33.00	21.0%
94150	94150	VITAL CAPACITY TEST (Peak Flow)	\$95.00	\$116.00	75th percentile	\$21.00	22.1%
94250	94250	EXPIRED GAS COLLECTION	\$0.00	\$0.00	Current fee	\$0.00	0.0%
94640	94640	AIRWAY INHALATION TREATMENT	\$65.00	\$78.00	75th percentile	\$13.00	20.0%
94760	94760	MEASURE BLOOD OXYGEN LEVEL	\$46.00	\$56.00	75th percentile	\$10.00	21.7%
94761	94761	MEASURE BLOOD OXYGEN LEVEL	\$77.00	\$93.00	75th percentile	\$16.00	20.8%
96110	96110	DEVELOPMENTAL TEST, LIM	\$68.00	\$70.00	75th percentile	\$2.00	2.9%
96127	96127	Brief Emotional/behavioral Assessment	\$17.00	\$18.00	75th percentile	\$1.00	5.9%
96150	96150	ASSESS HLTH/BEHAVE, INIT	\$79.00	\$81.00	75th percentile	\$2.00	2.5%
96151	96151	ASSESS HLTH/BEHAVE, SUBSEQ	\$40.00	\$41.00	75th percentile	\$1.00	2.5%
96152	96152	INTERVENE HLTH/BEHAVE, INDIV	\$40.00	\$41.00	75th percentile	\$1.00	2.5%
96160	96160	Health Risk Assessment Patient Focused	\$41.00	\$16.00	75th percentile	-\$25.00	-61.0%
96372	96372	Admin Of Therapeutic/prophylactic Injection	\$68.00	\$71.00	75th percentile	\$3.00	4.4%
97802	97802	MEDICAL NUTRITION, INDIV, IN	\$0.00	\$0.00	Current fee	\$0.00	0.0%
97803	97803	MED NUTRITION, INDIV, SUBSEQ	\$0.00	\$0.00	Current fee	\$0.00	0.0%
99000	99000	A-SPECIMEN HANDLING	\$0.00	\$0.00	Current fee	\$0.00	0.0%
99024	99024	POSTOP FOLLOW-UP VISIT	\$0.00	\$90.00	Current fee	\$90.00	100.0%
99070	1161	Terazol 7 Cream	\$50.00	\$50.00	Current fee	\$0.00	0.0%
99070	1171	Metrogel	\$38.00	\$38.00	Current fee	\$0.00	0.0%

*Note - Flu vaccines effective 7/1/2018

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
99070	1291	Doxycycline	\$1.00	\$1.00	Current fee	\$0.00	0.0%
99070	1299	Aldara	\$1.00	\$1.00	Current fee	\$0.00	0.0%
99070	1750	Plan B	\$26.00	\$26.00	Current fee	\$0.00	0.0%
99070	1174	Diflucan	\$1.00	\$1.00	Current fee	\$0.00	0.0%
99070	1263	Zithromax	\$1.00	\$1.00	Current fee	\$0.00	0.0%
99078	99078	GROUP HEALTH EDUCATION	\$0.00	\$0.00	Current fee	\$0.00	0.0%
99080	99080	Paper Processing Fee	\$25.00	\$25.00	Blue Cross	\$0.00	0.0%
99173	99173	VISUAL ACUITY SCREEN	\$34.00	\$31.00	75th percentile	-\$3.00	-8.8%
99188	99188	Fluoride Varnish	\$0.00	\$0.00	Current fee	\$0.00	0.0%
99201	99201	OFFICE/OUTPATIENT VISIT, NEW	\$147.00	\$155.00	75th percentile	\$8.00	5.4%
99201F	99201F	OFFICE/OUTPATIENT VISIT, NEW	\$147.00	\$155.00	75th percentile	\$8.00	5.4%
99202	99202	OFFICE/OUTPATIENT VISIT, NEW	\$183.00	\$193.00	75th percentile	\$10.00	5.5%
99202F	99202F	OFFICE/OUTPATIENT VISIT, NEW	\$183.00	\$193.00	75th percentile	\$10.00	5.5%
99203	99203	OFFICE/OUTPATIENT VISIT, NEW	\$239.00	\$251.00	75th percentile	\$12.00	5.0%
99203F	99203F	OFFICE/OUTPATIENT VISIT, NEW	\$239.00	\$251.00	75th percentile	\$12.00	5.0%
99204	99204	OFFICE/OUTPATIENT VISIT, NEW	\$341.00	\$359.00	75th percentile	\$18.00	5.3%
99205	99205	OFFICE/OUTPATIENT VISIT, NEW	\$461.00	\$485.00	75th percentile	\$24.00	5.2%
99211	99211	OFFICE/OUTPATIENT VISIT, EST	\$88.00	\$90.00	75th percentile	\$2.00	2.3%
99211	99211T	OFFICE/OUTPATIENT VISIT, EST	\$88.00	\$90.00	75th percentile	\$2.00	2.3%
99211F	99211F	OFFICE/OUTPATIENT VISIT, EST	\$88.00	\$90.00	75th percentile	\$2.00	2.3%
99212	99212	OFFICE/OUTPATIENT VISIT, EST	\$125.00	\$128.00	75th percentile	\$3.00	2.4%
99212F	99212F	OFFICE/OUTPATIENT VISIT, EST	\$125.00	\$128.00	75th percentile	\$3.00	2.4%
99213	99213	OFFICE/OUTPATIENT VISIT, EST	\$160.00	\$164.00	75th percentile	\$4.00	2.5%
99213F	99213F	OFFICE/OUTPATIENT VISIT, EST	\$160.00	\$164.00	75th percentile	\$4.00	2.5%
99214	99214	OFFICE/OUTPATIENT VISIT, EST	\$231.00	\$237.00	75th percentile	\$6.00	2.6%
99214F	99214F	OFFICE/OUTPATIENT VISIT, EST	\$231.00	\$237.00	75th percentile	\$6.00	2.6%
99215	99215	OFFICE/OUTPATIENT VISIT, EST	\$370.00	\$379.00	75th percentile	\$9.00	2.4%
99241	99241	OFFICE CONSULTATION	\$205.00	\$209.00	75th percentile	\$4.00	2.0%
99242	99242	OFFICE CONSULTATION	\$262.00	\$266.00	75th percentile	\$4.00	1.5%
99243	99243	OFFICE CONSULTATION	\$334.00	\$340.00	75th percentile	\$6.00	1.8%
99244	99244	OFFICE CONSULTATION	\$436.00	\$444.00	75th percentile	\$8.00	1.8%
99381	99381	INIT PM E/M, NEW PAT, INF	\$195.00	\$204.00	75th percentile	\$9.00	4.6%
99382	99382	INIT PM E/M, NEW PAT 1-4 YRS	\$210.00	\$220.00	75th percentile	\$10.00	4.8%
99383	99383	PREV VISIT, NEW, AGE 5-11	\$225.00	\$236.00	75th percentile	\$11.00	4.9%
99384	99384	PREV VISIT, NEW, AGE 12-17	\$240.00	\$252.00	75th percentile	\$12.00	5.0%
99384F	99384F	PREV VISIT, NEW, AGE 12-17	\$240.00	\$252.00	75th percentile	\$12.00	5.0%
99385	99385	PREV VISIT, NEW, AGE 18-39	\$325.00	\$341.00	75th percentile	\$16.00	4.9%
99385F	99385F	PREV VISIT, NEW, AGE 18-39	\$325.00	\$341.00	75th percentile	\$16.00	4.9%
99386	99386	PREV VISIT, NEW, AGE 40-64	\$355.00	\$372.00	75th percentile	\$17.00	4.8%
99386F	99386F	PREV VISIT, NEW, AGE 40-64	\$355.00	\$372.00	75th percentile	\$17.00	4.8%
99387	99387	INIT PM E/M, NEW PAT 65+ YRS	\$401.00	\$419.00	75th percentile	\$18.00	4.5%
99391	99391	PER PM REEVAL, EST PAT, INF	\$160.00	\$168.00	75th percentile	\$8.00	5.0%
99392	99392	PREV VISIT, EST, AGE 1-4	\$170.00	\$178.00	75th percentile	\$8.00	4.7%
99393	99393F	PREV VISIT, EST, AGE 5-11	\$185.00	\$194.00	75th percentile	\$9.00	4.9%
99393	99393	PREV VISIT, EST, AGE 5-11	\$185.00	\$194.00	75th percentile	\$9.00	4.9%
99394	99394F	PREV VISIT, EST, AGE 12-17	\$200.00	\$210.00	75th percentile	\$10.00	5.0%
99394	99394	PREV VISIT, EST, AGE 12-17	\$200.00	\$210.00	75th percentile	\$10.00	5.0%
99395	99395F	PREV VISIT, EST, AGE 18-39	\$270.00	\$283.00	75th percentile	\$13.00	4.8%
99395	99395	PREV VISIT, EST, AGE 18-39	\$270.00	\$283.00	75th percentile	\$13.00	4.8%
99396	99396	PREV VISIT, EST, AGE 40-64	\$295.00	\$309.00	75th percentile	\$14.00	4.7%
99396F	99396F	PREV VISIT, EST, AGE 40-64	\$295.00	\$309.00	75th percentile	\$14.00	4.7%
99397	99397	PER PM REEVAL EST PAT 65+ YR	\$335.00	\$351.00	75th percentile	\$16.00	4.8%
99404	BC1	Billable Counseling Indepth 1hr.	\$305.00	\$341.00	75th percentile	\$36.00	11.8%
99407	99407	BEHAV CHNG SMOKING > 10 MIN	\$0.00	\$0.00	Current fee	\$0.00	0.0%
99408	99408	AUDIT/DAST, 15-30 MIN	\$120.00	\$126.00	75th percentile	\$6.00	5.0%
99999	99999	LEFT W/O BEING SEEN	\$0.00	\$0.00	Current fee	\$0.00	0.0%
A4206	A4206	1 CC sterile syringe&needle	\$0.00	\$0.00	Current fee	\$0.00	0.0%
A4267	A4267	Male condom	\$0.00	\$0.00	Current fee	\$0.00	0.0%
A4550	A4550	Surgical trays	\$68.00	\$250.00	Blue Cross	\$182.00	267.6%
A4562	A4562	Pessary, non rubber,any type	\$100.00	\$110.00	75th percentile	\$10.00	10.0%
A6266	A6266	Impreg gauze no h20/sal/yard	\$3.03	\$3.00	75th percentile	-\$0.03	-1.0%
BC3	BC3	Billable Counseling	\$0.00	\$0.00	Current fee	\$0.00	0.0%
CBE	Breast	Clinical Breast Exam	\$0.00	\$0.00	Current fee	\$0.00	0.0%
CVO	CVO	Counselor Visit Only	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D0120	D0120	Periodic oral evaluation	\$59.00	\$61.00	75th percentile	\$2.00	3.4%
D0140	D0140	Limited oral evaluation-problem focused	\$98.00	\$102.00	75th percentile	\$4.00	4.1%
D0150	D0150	Comprehensive oral evaluation-new or established P	\$103.00	\$107.00	75th percentile	\$4.00	3.9%
D0170	D0170	Re-evaluation Limited Problem Focused	\$69.00	\$71.00	75th percentile	\$2.00	2.9%
D0190	D0190	Screening Of A Patient	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D0210	D0210	Intraoral-complete series (including bitewings)	\$159.00	\$165.00	75th percentile	\$6.00	3.8%
D0220	D0220	Intraoral-periapical first film	\$32.00	\$33.00	75th percentile	\$1.00	3.1%
D0230	D0230	Intraoral-periapical each additional film	\$29.00	\$30.00	75th percentile	\$1.00	3.4%

*Note - Flu vaccines effective 7/1/2018

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
D0270	D0270	Bitewing Single Film	\$33.00	\$34.00	75th percentile	\$1.00	3.0%
D0272	D0272	Bitewings-two films	\$52.00	\$54.00	75th percentile	\$2.00	3.8%
D0274	D0274	Bitewings-four films	\$74.00	\$76.00	75th percentile	\$2.00	2.7%
D0330	D0330	Panoramic film	\$143.00	\$148.00	75th percentile	\$5.00	3.5%
D0470	D0470	Diagnostic casts	\$108.00	\$109.00	75th percentile	\$1.00	0.9%
D0601	D0601	Caries Risk Assessment, Low	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D0602	D0602	Caries Risk Assessment, Moderate	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D0603	D0603	Caries Risk Assessment, High	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D0999	D0999	Medicaid Dental Encounter Rate	\$106.00	\$106.00	Encounter rate	\$0.00	0.0%
D1110	D1110	Prophylaxis-adult	\$107.00	\$110.00	75th percentile	\$3.00	2.8%
D1120	D1120	Prophylaxis-child	\$74.00	\$76.00	75th percentile	\$2.00	2.7%
D1206	D1206	Top Fluoride Varnish;TX Appl Mod	\$62.00	\$62.00	75th percentile	\$0.00	0.0%
D1208	D1208	Topical Application Of Fluoride	\$41.00	\$41.00	75th percentile	\$0.00	0.0%
D1310	D1310	Nutrition Counseling For Control Of Dental Disease	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D1320	D1320	Tobacco Couns For Control/ Prev Of Oral Disease	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D1330	D1330	Oral Hygiene Instructions	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D1351	D1351	Sealant-per tooth	\$67.00	\$69.00	75th percentile	\$2.00	3.0%
D1510	D1510	Space maintainer-fixed-unilateral	\$374.00	\$380.00	75th percentile	\$6.00	1.6%
D1515	D1515	Space maintainer-fixed-bilateral	\$524.00	\$533.00	75th percentile	\$9.00	1.7%
D1520	D1520	Space maintainer-removable-unilateral	\$412.00	\$418.00	75th percentile	\$6.00	1.5%
D1525	D1525	Space maintainer-removable-bilateral	\$637.00	\$647.00	75th percentile	\$10.00	1.6%
D1550	D1550	Recementation of space maintainer	\$81.00	\$82.00	75th percentile	\$1.00	1.2%
D1555	D1555	Removal Of Fixed Space Maintainer	\$78.00	\$79.00	75th percentile	\$1.00	1.3%
D2140	D2140	Amalgam-one surface, primary or permanent	\$173.00	\$176.00	75th percentile	\$3.00	1.7%
D2150	D2150	Amalgam-two surfaces, primary or permanent	\$223.00	\$228.00	75th percentile	\$5.00	2.2%
D2160	D2160	Amalgam-three surfaces, primary or permanent	\$270.00	\$275.00	75th percentile	\$5.00	1.9%
D2161	D2161	Amalgam-four or more surfaces, primary or permanen	\$329.00	\$335.00	75th percentile	\$6.00	1.8%
D2330	D2330	Resin-based composite - one surface, anterior	\$180.00	\$184.00	75th percentile	\$4.00	2.2%
D2331	D2331	Resin-based composite - two surfaces, anterior	\$173.00	\$235.00	75th percentile	\$62.00	35.8%
D2332	D2332	Resin-based composite - three surfaces, anterior	\$281.00	\$288.00	75th percentile	\$7.00	2.5%
D2335	D2335	Resin-based composite - four or more surfaces or I	\$332.00	\$341.00	75th percentile	\$9.00	2.7%
D2391	D2391	Resin Based Composite One Surface	\$211.00	\$216.00	75th percentile	\$5.00	2.4%
D2392	D2392	Resin-based composite - two surfaces, posterior	\$276.00	\$283.00	75th percentile	\$7.00	2.5%
D2393	D2393	Resin Based Composite 3 Surface	\$343.00	\$351.00	75th percentile	\$8.00	2.3%
D2394	D2394	Resin Based Composite 4 Surface	\$420.00	\$430.00	75th percentile	\$10.00	2.4%
D2740	D2740	Crown - Porcelain/Ceramic	\$1,364.00	\$1,405.00	75th percentile	\$41.00	3.0%
D2750	D2750	Crown-porcelain Fused To High Noble Metal	\$1,346.00	\$1,386.00	75th percentile	\$40.00	3.0%
D2751	D2751	Crown-porcelain Fused To Predominately Base Metal	\$1,253.00	\$1,291.00	75th percentile	\$38.00	3.0%
D2752	D2752	Crown-porcelain Fused To Noble Metal	\$1,284.00	\$1,322.00	75th percentile	\$38.00	3.0%
D2790	D2790	Full Cast Crown High Noble Metal	\$1,299.00	\$1,338.00	75th percentile	\$39.00	3.0%
D2791	D2791	Crown Full Cast Base Metal	\$1,231.00	\$1,268.00	75th percentile	\$37.00	3.0%
D2792	D2792	Crown-full Cast Noble Metal	\$1,253.00	\$1,291.00	75th percentile	\$38.00	3.0%
D2920	D2920	Recement crown	\$124.00	\$128.00	75th percentile	\$4.00	3.2%
D2930	D2930	Prefabricated stainless steel crown-primary tooth	\$338.00	\$348.00	75th percentile	\$10.00	3.0%
D2931	D2931	Prefabricated stainless steel-crown-permanent toot	\$383.00	\$394.00	75th percentile	\$11.00	2.9%
D2932	D2932	Prefabricated resin crown	\$408.00	\$420.00	75th percentile	\$12.00	2.9%
D2940	D2940	Sedative filling	\$129.00	\$133.00	75th percentile	\$4.00	3.1%
D2950	D2950	Core buildup, including any pins	\$323.00	\$333.00	75th percentile	\$10.00	3.1%
D2951	D2951	Pin retention-per tooth, in addition to restoratio	\$73.00	\$75.00	75th percentile	\$2.00	2.7%
D2954	D2954	Prefabricated post and core in addition to crown	\$408.00	\$420.00	75th percentile	\$12.00	2.9%
D2955	D2955	Post Removal	\$315.00	\$324.00	75th percentile	\$9.00	2.9%
D3110	D3110	Pulp cap-direct (excluding final restoration)	\$119.00	\$122.00	75th percentile	\$3.00	2.5%
D3120	D3120	Pulp Cap Indirect Excluding Final Rest.	\$95.00	\$98.00	75th percentile	\$3.00	3.2%
D3220	D3220	Therapeutic pulpotomy-(excluding final restoration	\$244.00	\$250.00	75th percentile	\$6.00	2.5%
D3221	D3221	Pulpal debridement, primary and permanent teeth	\$267.00	\$274.00	75th percentile	\$7.00	2.6%
D3310	D3310	Anterior (excluding final restoration)	\$883.00	\$901.00	75th percentile	\$18.00	2.0%
D3320	D3320	Bicuspid (excluding final restoration)	\$1,082.00	\$1,104.00	75th percentile	\$22.00	2.0%
D3330	D3330	Molar (excluding final restoration)	\$1,341.00	\$1,369.00	75th percentile	\$28.00	2.1%
D3346	D3346	Retreatment of previous root canal therapyanterior	\$1,177.00	\$1,201.00	75th percentile	\$24.00	2.0%
D3347	D3347	Retreatment Of RTC Bicuspid	\$1,385.00	\$1,413.00	75th percentile	\$28.00	2.0%
D3410	D3410	Apicoectomy/periradicular Surgery - Anterior	\$1,055.00	\$1,139.00	75th percentile	\$84.00	8.0%
D3999	D3999	Unspecified Endodontic Procedure	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D4211	D4211	Gingectomy	\$351.00	\$364.00	75th percentile	\$13.00	3.7%
D4320	D4320	Provisional Splinting Intracoronal	\$484.00	\$508.00	75th percentile	\$24.00	5.0%
D4341	D4341	Periodontal scaling and root planing-four or more	\$279.00	\$293.00	75th percentile	\$14.00	5.0%
D4342	D4342	Periodonatal Scaling	\$161.00	\$169.00	75th percentile	\$8.00	5.0%
D4355	D4355	Subgingival Plaque/Calculus	\$191.00	\$200.00	75th percentile	\$9.00	4.7%
D4910	D4910	Periodontal maintenance	\$172.00	\$180.00	75th percentile	\$8.00	4.7%
D500B	D500B	Occlusal Records - Wax Bite	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D500C	D500C	Crown Cementation	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D500D	D500D	Denture Delivery	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D500I	D500I	Final Impression	\$0.00	\$0.00	Current fee	\$0.00	0.0%

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
D500T	D500T	Wax Tryin	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D510M	D510M	Adjust complete denture-maxillary made elsewhere	\$102.00	\$102.00	Current fee	\$0.00	0.0%
D5110	D5110	Complete denture-maxillary	\$1,855.00	\$1,904.00	75th percentile	\$49.00	2.6%
D511M	D511M	Adjust Complee Denture-Mandibular made elsewhere	\$102.00	\$102.00	Current fee	\$0.00	0.0%
D5120	D5120	Complete denture-mandibular	\$1,855.00	\$1,904.00	75th percentile	\$49.00	2.6%
D5130	D5130	Immediate denture-maxillary	\$2,022.00	\$2,076.00	75th percentile	\$54.00	2.7%
D5140	D5140	Immediate denture-mandibular	\$2,022.00	\$2,076.00	75th percentile	\$54.00	2.7%
D5211	D5211	Maxillary partial denture-resin base (including an	\$1,565.00	\$1,607.00	75th percentile	\$42.00	2.7%
D521M	D521M	Adjust Partial Denture-Maxillary made elsewhere	\$102.00	\$102.00	Current fee	\$0.00	0.0%
D5212	D5212	Mandibular partial denture-resin base (including)	\$1,819.00	\$1,867.00	75th percentile	\$48.00	2.6%
D5213	D5213	Maxillary partial denture-cast metal framework wit	\$2,049.00	\$2,104.00	75th percentile	\$55.00	2.7%
D5214	D5214	Mandibular partial denture-cast metal framework wi	\$2,049.00	\$2,104.00	75th percentile	\$55.00	2.7%
D5225	D5225	Maxillary Partial Denture - Flexible Base	\$1,565.00	\$1,607.00	75th percentile	\$42.00	2.7%
D5226	D5226	Mandibular Partial Denture- Flexible Base	\$1,819.00	\$1,867.00	75th percentile	\$48.00	2.6%
D522M	D522M	Adjust Partial Denture-Mandibular made elsewhere	\$102.00	\$102.00	Current fee	\$0.00	0.0%
D5281	D5281	Removable Unilateral Partial	\$1,195.00	\$1,226.00	75th percentile	\$31.00	2.6%
D5410	D5410	Adjust complete denture-maxillary	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D5411	D5411	Adjust Complete Denture-Mandibular	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D5411	D511M	Adjust Complee Denture-Mandibular made elsewhere	\$102.00	\$104.00	75th percentile	\$2.00	2.0%
D5421	D521M	Adjust Partial Denture-Maxillary made elsewhere	\$102.00	\$104.00	75th percentile	\$2.00	2.0%
D5421	D5421	Adjust Partial Denture-Maxillary	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D5422	D5422	Adjust Partial Denture-Mandibular	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D5510	D5510	Repair broken complete denture base	\$203.00	\$208.00	75th percentile	\$5.00	2.5%
D5520	D5520	Replace missing or broken teeth-complete denture (\$169.00	\$174.00	75th percentile	\$5.00	3.0%
D5610	D5610	Repair resin denture base	\$220.00	\$226.00	75th percentile	\$6.00	2.7%
D5620	D5620	Repair Cast Framework	\$237.00	\$243.00	75th percentile	\$6.00	2.5%
D5630	D5630	Repair or replace broken clasp	\$288.00	\$295.00	75th percentile	\$7.00	2.4%
D5640	D5640	Replace broken teeth-per tooth	\$186.00	\$191.00	75th percentile	\$5.00	2.7%
D5650	D5650	Add tooth to existing partial denture	\$254.00	\$261.00	75th percentile	\$7.00	2.8%
D5660	D5660	Add clasp to existing partial denture	\$305.00	\$313.00	75th percentile	\$8.00	2.6%
D5721	D5721	Rebase Mandibular Partial Denture	\$711.00	\$730.00	75th percentile	\$19.00	2.7%
D5710	D5710	Rebase complete maxillary denture	\$753.00	\$773.00	75th percentile	\$20.00	2.7%
D5711	D5711	Rebase Complete Mandibular Denture	\$719.00	\$738.00	75th percentile	\$19.00	2.6%
D5720	D5720	Rebase Maxillary Partial Denture	\$711.00	\$730.00	75th percentile	\$19.00	2.7%
D5721	D5721	Rebase Mandibular Partial Denture	\$711.00	\$730.00	75th percentile	\$19.00	2.7%
D5730	D5730	Reline complete maxillary denture (chairside)	\$425.00	\$436.00	75th percentile	\$11.00	2.6%
D5740	D5740	Reline maxillary partial denture (chairside)	\$389.00	\$400.00	75th percentile	\$11.00	2.8%
D5750	D5750	Reline complete maxillary denture (laboratory)	\$567.00	\$582.00	75th percentile	\$15.00	2.6%
D5751	D5751	Reline Complete Mandibular Denture	\$567.00	\$582.00	75th percentile	\$15.00	2.6%
D5760	D5760	Reline maxillary partial denture (laboratory)	\$558.00	\$573.00	75th percentile	\$15.00	2.7%
D5761	D5761	Reline Mandibular Partial Denture	\$558.00	\$573.00	75th percentile	\$15.00	2.7%
D5820	D5820	Interim partial denture (maxillary)	\$694.00	\$712.00	75th percentile	\$18.00	2.6%
D5821	D5821	Interim Partial Denture (Mand.)	\$736.00	\$756.00	75th percentile	\$20.00	2.7%
D5850	D5850	Tissue Conditioning, Maxillary, Per App	\$178.00	\$182.00	75th percentile	\$4.00	2.2%
D5899	D5899	Unspecified removable prosthodontic procedure,by R	\$96.00	\$96.00	Current fee	\$0.00	0.0%
D6930	D6930	Recement Bridge	\$182.00	\$197.00	75th percentile	\$15.00	8.2%
D7000	D7000	Dental Suture Removal	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D7140	D7140	Extraction, erupted tooth or exposed root (elevati	\$215.00	\$227.00	75th percentile	\$12.00	5.6%
D7210	D7210	Surgical removal of erupted tooth requiring elevat	\$358.00	\$366.00	75th percentile	\$8.00	2.2%
D7220	D7220	Removal of impacted tooth-soft tissue	\$449.00	\$459.00	75th percentile	\$10.00	2.2%
D7230	D7230	Removal of impacted tooth-partially bony	\$598.00	\$611.00	75th percentile	\$13.00	2.2%
D7240	D7240	Removal of impacted tooth-completely bony	\$702.00	\$717.00	75th percentile	\$15.00	2.1%
D7241	D7241	Removal of impacted tooth-completely bony, with un	\$882.00	\$901.00	75th percentile	\$19.00	2.2%
D7250	D7250	Surgical removal of residual tooth roots (cutting	\$379.00	\$387.00	75th percentile	\$8.00	2.1%
D7270	D7270	Tooth reimplantation and/or stabilization of accid	\$746.00	\$769.00	75th percentile	\$23.00	3.1%
D7286	D7286	Biopsy of oral tissue-soft	\$597.00	\$615.00	75th percentile	\$18.00	3.0%
D7310	D7310	Alveoloplasty in conjunction with extractions-per	\$391.00	\$394.00	75th percentile	\$3.00	0.8%
D7320	D7320	Alveoloplasty not in conjunction with extractions	\$636.00	\$641.00	75th percentile	\$5.00	0.8%
D7321	D7321	Alveoloplasty Not Conj. W Ext 1-3 Teeth, Per Quad	\$538.00	\$542.00	75th percentile	\$4.00	0.7%
D7411	D7411	Excision Benign Lesion Soft Tissue > 1.25cm	\$1,858.00	\$1,874.00	75th percentile	\$16.00	0.9%
D7450	D7450	Removal Of Benign Odontogenic Cyst Or Tumor	\$1,173.00	\$1,183.00	75th percentile	\$10.00	0.9%
D7510	D7510	Incision and drainage of abscess-intraoral soft ti	\$420.00	\$424.00	75th percentile	\$4.00	1.0%
D7911	D7911	Complicated suture-up to 5 cm	\$1,602.00	\$1,615.00	75th percentile	\$13.00	0.8%
D7960	D7960	Frenulectomy (frenectomy or frenotomy)- separate P	\$538.00	\$542.00	75th percentile	\$4.00	0.7%
D7971	D7971	Excision Of Pericoronal Gingiva	\$293.00	\$296.00	75th percentile	\$3.00	1.0%
D9110	D9110	Palliative (emergency) treatment of dental pain-mi	\$142.00	\$151.00	75th percentile	\$9.00	6.3%
D9120	D9120	Fixed Partial Denture Sectioning	\$161.00	\$171.00	75th percentile	\$10.00	6.2%
D9430	D9430	Office Visit Observation - No Other Procedure	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D9910	D9910	Application Of Desensitizing Medicament	\$73.00	\$76.00	75th percentile	\$3.00	4.1%
D9911	D9911	Application Of Desensitizing Resin For Cervical An	\$102.00	\$106.00	75th percentile	\$4.00	3.9%
D9930	D9930	Treatment Of Complications (post Surgical)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
D9940	D9940	Occlusal Night Guard	\$601.00	\$629.00	75th percentile	\$28.00	4.7%

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
D9941	D9941	Fabrication Of Athletic Mouthguard	\$207.00	\$217.00	75th percentile	\$10.00	4.8%
D9951	D9951	Occlusal Adjustment-limited	\$176.00	\$184.00	75th percentile	\$8.00	4.5%
DSEAL	DSEAL	Dental Sealant Exclusion	\$0.00	\$0.00	Current fee	\$0.00	0.0%
DTXCP	DTXCP	Comp Tx Plan Completed	\$0.00	\$0.00	Current fee	\$0.00	0.0%
DTXIN	DTXIN	Comp Tx Plan Initiated	\$0.00	\$0.00	Current fee	\$0.00	0.0%
DTXIP	DTXIP	Comp Tx Plan In Process	\$0.00	\$0.00	Current fee	\$0.00	0.0%
G0003	G0003	Non DUI Assessment	\$40.00	\$40.00	Current fee	\$0.00	0.0%
G0008	G0008	Admin influenza virus vac	\$38.00	\$45.00	75th percentile	\$7.00	18.4%
G0009	G0009	Admin pneumococcal vaccine	\$50.00	\$50.00	75th percentile	\$0.00	0.0%
G0101	G0101	CA screen;pelvic/breast exam	\$100.02	\$100.00	75th percentile	-\$0.02	0.0%
G0101E	G0101E	CA screen;pelvic/breast exam, Est	\$100.02	\$100.00	75th percentile	-\$0.02	0.0%
G0101N	G0101N	CA screen;pelvic/breast exam, New	\$100.02	\$100.00	75th percentile	-\$0.02	0.0%
G0145	G0145	Scr c/v cyto,thinlayer,rescr	\$0.00	\$0.00	Current fee	\$0.00	0.0%
G0328	G0328	Fecal blood scrn immunoassay	\$50.00	\$50.00	75th percentile	\$0.00	0.0%
G0466	G0466	FQHC Visit, New Patient	\$202.00	\$203.00	Medicare FQHC	\$1.00	0.5%
G0467	G0467	FQHC Visit, Established Patient	\$182.00	\$189.00	Medicare FQHC	\$7.00	3.8%
G0469	G0469	FQHC Visit, Mental Health, New Patient	\$290.00	\$309.00	Medicare FQHC	\$19.00	6.6%
G0470	G0470	FQHC Visit, Mental Health, Est. Patient	\$207.00	\$194.00	Medicare FQHC	-\$13.00	-6.3%
H0002	H000211	LOCUS Assessment	\$72.00	\$72.00	DMH	\$0.00	0.0%
H0002	H000212	LOCUS Assessment	\$72.00	\$72.00	DMH	\$0.00	0.0%
H0002	H000299	LOCUS Assessment	\$72.00	\$72.00	DMH	\$0.00	0.0%
H0002	H0031DS	MH Health Discharge Assess by Non-MD Per 15 Mins	\$48.00	\$48.00	DASA	\$0.00	0.0%
H0002	H0031N99	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DASA	\$0.00	0.0%
H0002	H0031IN	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DASA	\$0.00	0.0%
H0004	H0004	BH Counseling and Therapy, Per 15 Mins	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000411	Behavioral Health Counseling and Therapy Ind, per 15 M	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000411F	Behavioral Health Counseling and Therapy, Fam, per 15 M	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000411FM	Behavioral Health Counseling and Therapy,Fam, per 15 M	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H000411G	Behavioral Health Counseling and Therapy, Grp, per 15 M	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H000411GM	Behavioral Health Counseling and Therapy,Grp, per 15 M	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H000411GM	Behavioral Health Counseling and Therapy,Grp, per 15 M	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H000411M	Behavioral Health Counseling and Therapy, Ind, per 15 M	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H000412	BH Counseling and Therapy, Per 15 Mins	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000412F	BH Counseling and Therapy, FAM, Per 15 Mins	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000412FM	BH Counseling and Therapy,Fam, Per 15 Mins	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H000412M	BH Counseling and Therapy,Ind, Per 15 Mins	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H000499	Behavioral Health Counseling and Therapy, per 15 M	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000499F	Behavioral Health Counseling and Therapy, Fam, per 15 M	\$23.00	\$23.00	DMH	\$0.00	0.0%
H0004	H000499FM	Behavioral Health Counseling and Therapy, Fam, per 15 M	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H000499G	Behavioral Health Counseling and Therapy, Grp, per 15 M	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H000499GM	Behavioral Health Counseling and Therapy, Grp, per 15 M	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H000499M	Behavioral Health Counseling and Therapy, Ind, per 15 M	\$28.00	\$28.00	DMH	\$0.00	0.0%
H0004	H0004GZ	Methadone Group Counseling and Therapy, per 15 M	\$0.00	\$0.00	DASA	\$0.00	0.0%
H0004	H0004HQ	BH Counseling And Therapy, Grp, Per 15 Mins	\$15.00	\$15.00	DMH	\$0.00	0.0%
H0004	H0004Z	Methadone Individual Counseling and Therapy, per 15 M	\$0.00	\$0.00	DASA	\$0.00	0.0%
H0005	H0005	Ach/Drug services Group Counseling by Clinician	\$10.00	\$10.00	DASA	\$0.00	0.0%
H0005	H0004HQ	BH Counseling And Therapy, Grp, Per 15 Mins	\$15.00	\$15.00	DASA	\$0.00	0.0%
H0010	H0010	Alcohol and/or drug services	\$350.00	\$350.00	DASA	\$0.00	0.0%
H0031	H003111B	MH Health Assess by Non-MD Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H003111M	MH Health Assess by Non-MD, Per 15 Min	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H003112B	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H003112M	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H003199B	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H003199M	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0031	H0031DS	MH Health Discharge Assess by Non-MD Per 15 Mins	\$48.00	\$48.00	DASA	\$0.00	0.0%
H0031	H0031IN	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DASA	\$0.00	0.0%
H0031	H0031N99	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	\$48.00	DMH	\$0.00	0.0%
H0032	H003211B	MH svc plan dev by non-md	\$27.00	\$27.00	DMH	\$0.00	0.0%
H0032	H003299M	MH svc plan dev by non-md	\$32.00	\$32.00	DMH	\$0.00	0.0%
H0032	H003211M	MH Service Plan Develop by Non-MD	\$32.00	\$32.00	DMH	\$0.00	0.0%
H0032	H003212M	MH Service Plan Develop by Non-MD	\$32.00	\$32.00	DMH	\$0.00	0.0%
H0032	H003299B	MH svc plan dev by non-md	\$27.00	\$27.00	DMH	\$0.00	0.0%
H0032	H0032	MH svc plan dev by non-md	\$32.00	\$32.00	DMH	\$0.00	0.0%
H0032	H003212B	MH Service Plan Develop by Non-MD	\$27.00	\$27.00	DMH	\$0.00	0.0%
H0032HN	H0032HN	MH SVC Plan Dev By Non MD	\$27.00	\$27.00	DMH	\$0.00	0.0%
H0039	H003911G	Assert Com Tx Face-Face Grp, 15 Min	\$13.00	\$13.00	DMH	\$0.00	0.0%
H0039	H003912	Assertive Commmunity Tx Face-Face, Ind, Per 15min	\$47.00	\$47.00	DMH	\$0.00	0.0%
H0039	H003911	Assert Com Tx Face-Face, Ind, 15 Min	\$47.00	\$47.00	DMH	\$0.00	0.0%
H0039	H003999G	Assert Com Tx Face-Face, Grp, 15 Min	\$13.00	\$13.00	DMH	\$0.00	0.0%
H0039	H003999	Assert Com Tx Face-Face, Ind 15 Min	\$47.00	\$47.00	DMH	\$0.00	0.0%
H0039	H003912G	Assertive Commmunity Tx Face-Face, Grp, Per 15min	\$13.00	\$13.00	DMH	\$0.00	0.0%
H0047	H0047	Alcohol/drug abuse svc nos	\$200.00	\$200.00	DASA	\$0.00	0.0%

*Note - Flu vaccines effective 7/1/2018

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
H1000	H1000	Prenatal care atrisk assessm	\$100.00	\$100.00	75th percentile	\$0.00	0.0%
H2010	H201052	Comprehensive Medication Service Per 15min	\$105.00	\$105.00	DMH	\$0.00	0.0%
H2010	H2010	Comprehensive Medication Service Per 15min	\$105.00	\$105.00	DMH	\$0.00	0.0%
H2011	H201112	Crisis Intervention Service, Ind, Per 15 min	\$50.00	\$50.00	DMH	\$0.00	0.0%
H2011	H201111	Crisis interven svc, Ind, 15 min	\$50.00	\$50.00	DMH	\$0.00	0.0%
H2011	H2011	Crisis interven svc, 15 min	\$50.00	\$50.00	DMH	\$0.00	0.0%
H2011	H201199	Crisis interven svc, Ind 15 min	\$50.00	\$50.00	DMH	\$0.00	0.0%
H2015	H201511B	Comp Comm Supp Svc, Ind,15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201511L	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201511M	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201511PB	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201511PM	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201512B	Comprehensive Community Support Services, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201512L	Comprehensive Community Support Services, Ind,15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201512M	Comprehensive Community Support Services, Ind,15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201599B	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201599L	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015	H201599M	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015G11	H2015G11	Comprehensive Community Support Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G11	H2015G11BB	Comprehensive Community Support Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G11	H2015G11MM	Comprehensive Community Support Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G11	H2015G11PBB	Comprehensive Community Support Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G11	H2015G11PMM	Comprehensive Community Support Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G12	H2015G12BB	Comprehensive Community Support, Grp 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G99	H2015G999	Comprehensive Community Support, Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G99	H2015G99BB	Comprehensive Community Support, Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015G99	H2015G99MM	Comprehensive Community Support, Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015HM	H201511L	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015HM	H201512L	Comprehensive Community Support Services, Ind,15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015HO	H201599M	Comp Comm Supp Svc, Ind, 15 min	\$29.00	\$29.00	DMH	\$0.00	0.0%
H2015QEN	H2015QEN	Comprehensive Community Support, Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
H2015QHN	H2015QHN	Comprehensive Community Support, Grp, 15 Mins	\$19.00	\$19.00	DMH	\$0.00	0.0%
J0456	J0456	Azithromycin	\$75.00	\$120.00	75th percentile	\$45.00	60.0%
J0570	J0570	Penicillin g benzathine inj (Patient Supplied)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J0696	J0696	Ceftriaxone sodium injection, 250 Mg (Office Supplied)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J1030	J1030	Methylprednisolone 40 MG inj	\$21.00	\$21.00	75th percentile	\$0.00	0.0%
J1050	J1050A	Depo Provera (Patient Supplied)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J1050	J1050	Depo Provera, 1mg (Office Supplied)	\$0.28	\$0.28	Current fee	\$0.00	0.0%
J1815	J1815	Insulin injection	\$10.00	\$3.00	75th percentile	-\$7.00	-70.0%
J1950	J1950	Leuprolide acetate /3.75 MG (Donated)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J2358A	J2358A	Zyprexa Relprev Injection 1 MG (Patient Supplied)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J2675	J2675	Inj progesterone per 50 MG	\$39.00	\$39.00	75th percentile	\$0.00	0.0%
J2790	J2790	Rho d immune globulin inj	\$208.05	\$217.00	75th percentile	\$8.95	4.3%
J3420	J3420	Vitamin b12 injection	\$18.00	\$18.00	75th percentile	\$0.00	0.0%
J3490MG	J3490MG	Monistat Cream (Grant Funded)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J3490TG	J3490TG	Terconazole Cream (Grant Funded)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
J7297	J7297	LILETTA Levonorgestrel IU 52mg 3 Yr	\$1,200.00	\$1,200.00	75th percentile	\$0.00	0.0%
J7297M	J7297M	LILETTA Levonorgestrel IU 52mg 3 Yr	\$85.00	\$85.00	340B pricing	\$0.00	0.0%
J7298	J7298	MIRENA Levonorgestrel IU 52mg 5 Yr	\$811.00	\$1,275.00	75th percentile	\$464.00	57.2%
J7298M	J7298M	MIRENA Levonorgestrel IU 52mg 5 Yr	\$363.38	\$363.38	340B pricing	\$0.00	0.0%
J7300	J7300	Intraut copper contraceptive	\$1,000.00	\$1,030.00	75th percentile	\$30.00	3.0%
J7300M	J7300M	Paraguard Intraut copper contraceptive	\$290.88	\$290.88	340B pricing	\$0.00	0.0%
J7303	J7303	Contraceptive vaginal ring	\$85.00	\$119.00	75th percentile	\$34.00	40.0%
J7307M	J7307M	Nexplanon Etonogestrel implant system	\$434.00	\$434.00	340B pricing	\$0.00	0.0%
J7611	J7611	Albuterol non-comp con	\$2.00	\$3.00	75th percentile	\$1.00	50.0%
J7613	J7613	Albuterol non-comp unit, 1 Mg	\$10.00	\$10.00	75th percentile	\$0.00	0.0%
J8499G	J8499G	Fluconazole Tabs (Grant Funded)	\$0.00	\$0.00	Current fee	\$0.00	0.0%
LND	LND	Lab Not Drawn	\$0.00	\$0.00	Current fee	\$0.00	0.0%
LOZ2	LOZ2	Lozenges 2mg	\$27.00	\$27.00	Current fee	\$0.00	0.0%
LOZ4	LOZ4	Lozenges 4mg	\$27.00	\$27.00	Current fee	\$0.00	0.0%
Meth-23	Meth-23	Meth Medication Visits 2-3 X Week	\$80.00	\$80.00	Current fee	\$0.00	0.0%
Meth-MT1	Meth-MT1	Meth Medication Visits 1 X Week Or 1 X Month	\$70.00	\$70.00	Current fee	\$0.00	0.0%
NVO	NVO	Nurse Visit Only	\$0.00	\$0.00	Current fee	\$0.00	0.0%
Q0091	Q0091	Obtaining screen pap smear	\$0.00	\$0.00	Current fee	\$0.00	0.0%
Q0144	Q0144	Azithromycin dihydrate, oral	\$50.00	\$32.00	75th percentile	-\$18.00	-36.0%
S0630	S0630	REMOVAL OF SUTURES	\$132.00	\$132.00	Blue Cross	\$0.00	0.0%
S4991	NRT21	Nicotine patch nonlegend 21mg Step 1	\$21.00	\$21.00	Vendor cost	\$0.00	0.0%
S4991	NRT14	Nicotine patch nonlegend 14mg Step 2	\$21.00	\$21.00	Vendor cost	\$0.00	0.0%
S4991	NRT7	Nicotine patch nonlegend 7mg Step 3	\$21.00	\$21.00	Vendor cost	\$0.00	0.0%
S4993	0118A	Ortho Cyclen	\$46.00	\$46.00	Current fee	\$0.00	0.0%
S4993	0121A	Micronor	\$46.00	\$46.00	Current fee	\$0.00	0.0%
S4993	0130A	Tricyclen Lo	\$46.00	\$46.00	Current fee	\$0.00	0.0%

Lake County Health Department and Community Health Center
Proposed Fees for Medical, Behavioral Health and Dental Services
Effective Date of December 1, 2017

CPT4	SIM Code	Code Description	Current fee	Proposed Fee	Rationale for FY2018	Change from Current to Proposed	% of Change
S4993	0139A	Kelnor	\$46.00	\$46.00	Current fee	\$0.00	0.0%
S4995	GUM2	Smoking cessation gum 2mg	\$24.00	\$24.00	Vendor cost	\$0.00	0.0%
S4995	GUM4	Smoking cessation gum 4mg	\$24.00	\$24.00	Vendor cost	\$0.00	0.0%
S9986	W00R1	Residential Serv Prgm 620 CILA	\$1.00	\$1.00	DMH	\$0.00	0.0%
S9986	W00R2	Residential Serv Prgm 820 Scat Apts	\$1.00	\$1.00	DMH	\$0.00	0.0%
S9986	W00R4	Residential Serv Prgm 830 Group Home	\$1.00	\$1.00	DMH	\$0.00	0.0%
S9986	W00R5	Residential Serv Prgm 860 Crisis Respite	\$1.00	\$1.00	DMH	\$0.00	0.0%
S9986	W00S3	Crisis Intervention - UnReg	\$0.00	\$0.00	DMH	\$0.00	0.0%
T1015	T1015	Clinic service	\$138.01	\$138.01	Encounter rate	\$0.00	0.0%
T1015	T1015AH	Clinic service	\$52.49	\$52.49	Encounter rate	\$0.00	0.0%
T1015	T1015AJ	Clinic service	\$52.49	\$52.49	Encounter rate	\$0.00	0.0%
T1015	T1015HO	Clinic service	\$52.49	\$52.49	Encounter rate	\$0.00	0.0%
T1016	T1016	Case Management Per 15min	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101611	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101611B	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101611I	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101611M	Case management	\$28.00	\$28.00	DMH	\$0.00	0.0%
T1016	T101611X	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101611XB	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101612	Case Management Per 15min	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101612B	Case Management Per 15min	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101612I	Case Management Per 15min	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101612M	Case Management Per 15min	\$28.00	\$28.00	DMH	\$0.00	0.0%
T1016	T101612XB	Case Management Per 15min	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101699	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101699B	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101699I	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101699M	Case management	\$28.00	\$28.00	DMH	\$0.00	0.0%
T1016	T101699X	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1016	T101699XB	Case management	\$25.00	\$25.00	DMH	\$0.00	0.0%
T1023	T1023	Program Intake Assessment	\$348.00	\$348.00	DMH	\$0.00	0.0%
T1023	T102311	Program Intake Assessment	\$348.00	\$348.00	DMH	\$0.00	0.0%
T1023	T102312	Program Intake Assessment	\$348.00	\$348.00	DMH	\$0.00	0.0%
T1023	T102399	Program Intake Assessment	\$348.00	\$348.00	DMH	\$0.00	0.0%
T1502	T1502	Medication Admin Visit	\$22.00	\$22.00	DMH	\$0.00	0.0%
T1502	T150211	Medication Admin Visit	\$22.00	\$22.00	DMH	\$0.00	0.0%