

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

<u>CPT4</u>	<u>SIM Code</u>	<u>Code Description</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Rationale for FY2016</u>	<u>Change from Current to Proposed</u>	<u>% of Change</u>
0500F	0500F	INITIAL PRENATAL CARE VISIT	\$216.00	<b>\$234.00</b>	75th% market	\$18.00	8.3%
0502F	0502F	SUBSEQUENT PRENATAL CARE	\$216.00	<b>\$234.00</b>	75th% market	\$18.00	8.3%
0503F	0503F	POSTPARTUM CARE VISIT	\$253.00	<b>\$253.00</b>	Current fee	\$0.00	0.0%
0520F	0520F	TISSUE DOSE DONE W/IN 5 DAYS	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
10060	10060	DRAINAGE OF SKIN ABSCESS	\$247.00	<b>\$252.00</b>	75th% market	\$5.00	2.0%
10080	10080	DRAINAGE OF PILONIDAL CYST	\$0.00	<b>\$392.00</b>	75th% market	\$392.00	100.0%
1010	1010	BOP Urine Collection	\$33.00	<b>\$34.00</b>	Current fee	\$1.00	3.0%
10120	10120	REMOVE FOREIGN BODY	\$0.00	<b>\$331.00</b>	75th% market	\$331.00	100.0%
1070F	1070F	ALARM SYMP ASSESSED-ABSENT	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
11200	11200	REMOVAL OF SKIN TAGS	\$204.00	<b>\$212.00</b>	75th% market	\$8.00	3.9%
11400	11400	EXC TR-EXT B9+MARG 0.5 < CM	\$0.00	<b>\$300.00</b>	75th% market	\$300.00	100.0%
11406	11406	EXC TR-EXT B9+MARG > 4.0 CM	\$0.00	<b>\$1,028.00</b>	75th% market	\$1,028.00	100.0%
11420	11420	EXC H-F-NK-SP B9+MARG 0.5 <	\$294.00	<b>\$300.00</b>	75th% market	\$6.00	2.0%
11442	11442	EXC FACE-MM B9+MARG 1.1-2 CM	\$0.00	<b>\$628.00</b>	75th% market	\$628.00	100.0%
11730	11730	REMOVAL OF NAIL PLATE	\$182.00	<b>\$184.00</b>	75th% market	\$2.00	1.1%
11740	11740	DRAIN BLOOD FROM UNDER NAIL	\$84.00	<b>\$85.00</b>	75th% market	\$1.00	1.2%
11750	11750	REMOVAL OF NAIL BED	\$379.00	<b>\$379.00</b>	75th% market	\$0.00	0.0%
11975	11975	INSERT CONTRACEPTIVE CAP	\$0.00	<b>\$333.00</b>	75th% market	\$333.00	100.0%
11976	11976	REMOVAL, IMPLANTABLE CONTRACEPTIVE CAPSULES	\$269.00	<b>\$333.00</b>	75th% market	\$64.00	23.8%
11976	11976F	REMOVAL OF CONTRACEPTIVE CAP	\$269.00	<b>\$333.00</b>	75th% market	\$64.00	23.8%
11981	11981	INSERT DRUG IMPLANT DEVICE	\$269.00	<b>\$333.00</b>	75th% market	\$64.00	23.8%
11981	11981F	INSERT DRUG IMPLANT DEVICE	\$269.00	<b>\$333.00</b>	75th% market	\$64.00	23.8%
1269	1269	Condylox 0.5%	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
17000	17000	DESTRUCT PREMALG LESION	\$167.00	<b>\$178.00</b>	75th% market	\$11.00	6.6%
17003	17003	DESTRUCT PREMALG LES, 2-14	\$38.00	<b>\$40.00</b>	75th% market	\$2.00	5.3%
17110	17110	DESTRUCT B9 LESION, 1-14	\$0.00	<b>\$200.00</b>	75th% market	\$200.00	100.0%
17111	17111	DESTRUCT LESION, 15 OR MORE	\$209.00	<b>\$209.00</b>	Current Fee	\$0.00	0.0%
17250	17250	CHEMICAL CAUTERY, TISSUE	\$157.00	<b>\$167.00</b>	75th% market	\$10.00	6.4%
20000	20000	INCISION OF ABSCESS	\$0.00	<b>\$131.00</b>	Blue Cross rate	\$131.00	100.0%
2010	2010	BOP CD Individual Counseling 1/2 hr Units	\$46.00	<b>\$47.00</b>	Current fee	\$1.00	2.2%
2021	2021	BOP Clinical Group 1/2 HR	\$34.00	<b>\$35.00</b>	Current fee	\$1.00	2.9%
2030	2030	BOP Family Counseling 1/2 HR	\$38.00	<b>\$38.00</b>	Current fee	\$0.00	0.0%
20550	20550	INJ TENDON SHEATH/LIGAMENT	\$0.00	<b>\$214.00</b>	75th% market	\$214.00	100.0%
20551	20551	INJ TENDON ORIGIN/INSERTION	\$0.00	<b>\$228.00</b>	75th% market	\$228.00	100.0%
20552	20552	INJ TRIGGER POINT, 1/2 MUSCL	\$0.00	<b>\$228.00</b>	75th% market	\$228.00	100.0%
20600	20600	DRAIN/INJECT, JOINT/BURSA	\$228.00	<b>\$228.00</b>	75th% market	\$0.00	0.0%
20605	20605	INJ TRIGGER POINT, 1/2 MUSCL	\$0.00	<b>\$236.00</b>	75th% market	\$236.00	100.0%
20610	20610	DRAIN/INJECT, JOINT/BURSA	\$0.00	<b>\$279.00</b>	75th% market	\$279.00	100.0%
20999	20999	MUSCULOSKELETAL SURGERY	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
30000	30000	DRAINAGE OF NOSE LESION	\$0.00	<b>\$318.00</b>	75th% market	\$318.00	100.0%
32	C0032	Outreach	\$20.00	<b>\$20.00</b>	Current fee	\$0.00	0.0%
33	C0033	Case Finding	\$20.00	<b>\$20.00</b>	Current fee	\$0.00	0.0%
33	C0033	Case Finding	\$20.00	<b>\$20.00</b>	Current fee	\$0.00	0.0%
33214	33214	UPGRADE OF PACEMAKER SYSTEM	\$0.00	<b>\$740.00</b>	Blue Cross rate	\$740.00	100.0%
36415	36415	A-ROUTINE VACINPUNCTURE	\$0.00	<b>\$31.00</b>	75th% market	\$31.00	100.0%
44960	44960	APPENDECTOMY	\$0.00	<b>\$3,129.00</b>	75th% market	\$3,129.00	100.0%
46916	46916	CRYOSURGERY, ANAL LESION(S)	\$707.00	<b>\$707.00</b>	75th% market	\$0.00	0.0%
49322	49322	LAPAROSCOPY, ASPIRATION	\$1,594.00	<b>\$1,594.00</b>	75th% market	\$0.00	0.0%
5011	5011	BOP MH Intake Assessment & Report	\$225.00	<b>\$229.00</b>	Current fee	\$4.00	1.8%
5030	5030	BOP Psych Eval & Report	\$229.00	<b>\$229.00</b>	Current fee	\$0.00	0.0%
53000	53000	INCISION OF URETHRA	\$0.00	<b>\$1,156.00</b>	75th% market	\$1,156.00	100.0%
54050	54050	DESTRUCTION, PENIS LESION(S)	\$314.00	<b>\$320.00</b>	75th% market	\$6.00	1.9%
54050	54050	DESTRUCTION, PENIS LESION(S)	\$314.00	<b>\$320.00</b>	75th% market	\$6.00	1.9%
54056	54056	CRYOSURGERY, PENIS LESION(S)	\$413.00	<b>\$421.00</b>	75th% market	\$8.00	1.9%
54150	54150	CIRCUMCISION W/REGIONAL BLOCK	\$542.00	<b>\$544.00</b>	75th% market	\$2.00	0.4%
56405	56405	I & D OF VULVA/PERINEUM	\$508.00	<b>\$574.00</b>	75th% market	\$66.00	13.0%
56420	56420	I & D Bartholins Gland Abscess	\$559.00	<b>\$631.00</b>	75th% market	\$72.00	12.9%
56501	56501	DESTROY, VULVA LESIONS, SIM	\$432.00	<b>\$488.00</b>	75th% market	\$56.00	13.0%
56515	56515	DESTROY VULVA LESION/S COMPL	\$1,474.00	<b>\$1,664.00</b>	75th% market	\$190.00	12.9%
56605	56605	BIOPSY OF VULVA/PERINEUM	\$394.00	<b>\$445.00</b>	75th% market	\$51.00	12.9%
56605	56605	BIOPSY OF VULVA/PERINEUM	\$394.00	<b>\$445.00</b>	75th% market	\$51.00	12.9%
56740	56740	REMOVE VAGINA GLAND LESION	\$1,322.00	<b>\$1,492.00</b>	75th% market	\$170.00	12.9%
57100	57100	BIOPSY OF VAGINA	\$529.00	<b>\$571.00</b>	75th% market	\$42.00	7.9%
57160	57160	INSERT PESSARY/OTHER DEVICE	\$255.00	<b>\$276.00</b>	75th% market	\$21.00	8.2%
57452	57452	EXAM OF CERVIX W/SCOPE	\$452.00	<b>\$452.00</b>	Current Fee	\$0.00	0.0%
57454	57454	BX/CURETT OF CERVIX W/SCOPE	\$646.00	<b>\$646.00</b>	Current Fee	\$0.00	0.0%
57455	57455	BIOPSY OF CERVIX W/SCOPE	\$271.00	<b>\$590.00</b>	75th% market	\$319.00	117.7%
57456	57456	ENDOCERV CURETTAGE W/SCOPE	\$310.00	<b>\$522.00</b>	75th% market	\$212.00	68.4%
57460	57460	BX OF CERVIX W/SCOPE, LEEP	\$1,628.00	<b>\$1,628.00</b>	Current fee	\$0.00	0.0%
57461	57461	CONZ OF CERVIX W/SCOPE, LEEP	\$0.00	<b>\$1,207.00</b>	75th% market	\$1,207.00	100.0%
57500	57500	BIOPSY OF CERVIX	\$580.00	<b>\$631.00</b>	75th% market	\$51.00	8.8%
57522	57522	CONIZATION OF CERVIX	\$1,402.00	<b>\$1,525.00</b>	75th% market	\$123.00	8.8%
58100	58100	BIOPSY OF UTERUS LINING	\$405.00	<b>\$415.00</b>	75th% market	\$10.00	2.5%
58110	58110	BX DONE W/COLPOSCOPY ADD-ON	\$229.00	<b>\$415.00</b>	75th% market	\$186.00	81.2%
58140	58140	MYOMECTOMY ABDOM METHOD	\$3,700.00	<b>\$3,787.00</b>	75th% market	\$87.00	2.4%

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58150	58150A	TOTAL HYSTERECTOMY	\$183.00	<b>\$321.13</b>	BC *.85 * .20	\$138.13	75.5%
58150	58150	TOTAL HYSTERECTOMY	\$4,540.00	<b>\$4,843.00</b>	75th% market	\$303.00	6.7%
58180	58180	PARTIAL HYSTERECTOMY	\$4,397.00	<b>\$4,690.00</b>	75th% market	\$293.00	6.7%
58180	58180A	PARTIAL HYSTERECTOMY	\$175.00	<b>\$307.36</b>	BC *.85 * .20	\$132.36	75.6%
58300	58300	INSERT INTRAUTERINE DEVICE	\$399.00	<b>\$478.00</b>	75th% market	\$79.00	19.8%
58300	58300F	INSERT INTRAUTERINE DEVICE	\$399.00	<b>\$478.00</b>	75th% market	\$79.00	19.8%
58301	58301	REMOVE INTRAUTERINE DEVICE	\$319.00	<b>\$382.00</b>	75th% market	\$63.00	19.7%
58301	58301F	REMOVE INTRAUTERINE DEVICE	\$319.00	<b>\$382.00</b>	75th% market	\$63.00	19.7%
58550	58550	LAPARO-ASST VAG HYSTERECTOMY	\$3,663.00	<b>\$3,795.00</b>	75th% market	\$132.00	3.6%
58550	58550	LAPARO-ASST VAG HYSTERECTOMY	\$0.00	<b>\$282.88</b>	BC *.85 * .20	\$282.88	100.0%
58553	58553	LAPARO-VAG HYST, COMPLEX	\$4,709.00	<b>\$4,879.00</b>	75th% market	\$170.00	3.6%
58553	58553A	LAPARO-VAG HYST, COMPLEX	\$125.00	<b>\$364.82</b>	BC *.85 * .20	\$239.82	191.9%
58554	58554	LAPARO-VAG HYST W/T/O, COMPL	\$5,232.00	<b>\$5,421.00</b>	75th% market	\$189.00	3.6%
58558	58558	HYSTEROSCOPY, BIOPSY	\$1,831.00	<b>\$1,897.00</b>	75th% market	\$66.00	3.6%
58561	58561	HYSTEROSCOPY, REMOVE MYOMA	\$3,296.00	<b>\$3,415.00</b>	75th% market	\$119.00	3.6%
58562	58562	HYSTEROSCOPY, REMOVE FB	\$2,093.00	<b>\$2,168.00</b>	75th% market	\$75.00	3.6%
58563	58563	HYSTEROSCOPY, ABLATION	\$6,802.00	<b>\$7,047.00</b>	75th% market	\$245.00	3.6%
58565	58565	HYSTEROSCOPY, STERILIZATION	\$6,802.00	<b>\$7,047.00</b>	75th% market	\$245.00	3.6%
58605	58605	DIVISION OF FALLOPIAN TUBE	\$3,729.00	<b>\$3,951.00</b>	75th% market	\$222.00	6.0%
58611	58611	LIGATE OVIDUCT(S) ADD-ON	\$1,865.00	<b>\$1,976.00</b>	75th% market	\$111.00	6.0%
58660	58660	LAPAROSCOPY, LYSIS	\$6,050.00	<b>\$6,409.00</b>	75th% market	\$359.00	5.9%
58661	58661	LAPAROSCOPY, REMOVE ADNEXA	\$5,801.00	<b>\$6,146.00</b>	75th% market	\$345.00	5.9%
58661	58661A	LAPAROSCOPY, REMOVE ADNEXA	\$125.00	<b>\$207.06</b>	BC *.85 * .20	\$82.06	65.6%
58670	58670	LAPAROSCOPY, TUBAL CAUTERY	\$3,729.00	<b>\$3,951.00</b>	75th% market	\$222.00	6.0%
58671	58671	LAPAROSCOPY, TUBAL BLOCK	\$3,729.00	<b>\$3,951.00</b>	75th% market	\$222.00	6.0%
58925	58925A	REMOVAL OF OVARIAN CYST(S)	\$125.00	<b>\$237.66</b>	BC *.85 * .20	\$112.66	90.1%
58925	58925	REMOVAL OF OVARIAN CYST(S)	\$4,973.00	<b>\$5,268.00</b>	75th% market	\$295.00	5.9%
58940	58940	REMOVAL OF OVARY(S)	\$0.00	<b>\$4,917.00</b>	75th% market	\$4,917.00	100.0%
58940	58940A	REMOVAL OF OVARY(S)	\$0.00	<b>\$166.26</b>	BC *.85 * .20	\$166.26	100.0%
59025	59025	FETAL NON-STRESS TEST	\$247.00	<b>\$247.00</b>	Current fee	\$0.00	0.0%
59120	59120	TREAT ECTOPIC PREGNANCY	\$0.00	<b>\$3,464.00</b>	75th% market	\$3,464.00	100.0%
59151	59151	Laparoscopic Tmt Of Ectopic Preg With Salpingectomy	\$3,601.00	<b>\$3,613.00</b>	75th% market	\$12.00	0.3%
59151	59151A	Laparoscopic Tmt Of Ectopic Preg With Salpingectom	\$125.00	<b>\$236.13</b>	BC *.85 * .20	\$111.13	88.9%
59160	59160	D & C AFTER DELIVERY	\$1,282.00	<b>\$1,287.00</b>	75th% market	\$5.00	0.4%
59300	59300	EPISIOTOMY OR VAGINAL REPAIR	\$925.00	<b>\$928.00</b>	75th% market	\$3.00	0.3%
59409	59409	OBSTETRICAL CARE	\$2,376.00	<b>\$2,466.00</b>	75th% market	\$90.00	3.8%
59414	59414	DELIVER PLACENTA	\$735.00	<b>\$735.00</b>	75th% market	\$0.00	0.0%
59430	59430	CARE AFTER DELIVERY	\$320.00	<b>\$320.00</b>	Current fee	\$0.00	0.0%
59514	59514	CESAREAN DELIVERY ONLY	\$3,028.00	<b>\$3,028.00</b>	Current fee	\$0.00	0.0%
59514	59514A	CESAREAN DELIVERY ASSIST	\$175.00	<b>\$294.27</b>	BC *.85 * .20	\$119.27	68.2%
59612	59612	VBAC DELIVERY ONLY	\$2,429.00	<b>\$2,429.00</b>	Current fee	\$0.00	0.0%
59812	59812	TREATMENT OF MISCARRIAGE	\$1,840.00	<b>\$1,840.00</b>	Current fee	\$0.00	0.0%
59820	59820	CARE OF MISCARRIAGE	\$1,908.00	<b>\$1,908.00</b>	Current fee	\$0.00	0.0%
59899	59899	Maternity Care And Delivery, Unlisted Procedure	\$1,988.00	<b>\$1,988.00</b>	Current fee	\$0.00	0.0%
6010	6010	Individual Counseling 1/2 Hr.	\$57.00	<b>\$57.00</b>	Current Fee	\$0.00	0.0%
6030	6030	Family Counseling 1/2 Hr.	\$57.00	<b>\$57.00</b>	Current Fee	\$0.00	0.0%
6041	6041	Admin Fee Psych Medication	\$0.00	<b>\$0.00</b>	Current Fee	\$0.00	0.0%
6051	6051	Medication Monitoring per visit	\$124.00	<b>\$124.00</b>	Current Fee	\$0.00	0.0%
60210	60210	PARTIAL THYROID EXCISION	\$0.00	<b>\$1,188.00</b>	Blue Cross rate	\$1,188.00	100.0%
61600	61600	RESECT/EXCISE CRANIAL LESION	\$0.00	<b>\$3,847.00</b>	Blue Cross rate	\$3,847.00	100.0%
69200	69200	CLEAR OUTER EAR CANAL	\$0.00	<b>\$350.00</b>	75th% market	\$350.00	100.0%
69210	69210	REMOVE IMPACTED EAR WAX	\$102.00	<b>\$140.00</b>	75th% market	\$38.00	37.3%
70150	70150	X-RAY EXAM OF FACIAL BONES	\$131.00	<b>\$219.00</b>	75th% market	\$88.00	67.2%
70160	70160	X-RAY EXAM OF NASAL BONES	\$129.00	<b>\$130.00</b>	75th% market	\$1.00	0.8%
70220	70220	X-RAY EXAM OF SINUSES	\$249.00	<b>\$251.00</b>	75th% market	\$2.00	0.8%
70260	70260	X-RAY EXAM OF SKULL	\$0.00	<b>\$251.00</b>	75th% market	\$251.00	100.0%
70330	70330	X-RAY EXAM OF JAW JOINTS	\$264.00	<b>\$266.00</b>	75th% market	\$2.00	0.8%
71010	71010	CHEST X-RAY - Single View Frontal	\$130.00	<b>\$137.00</b>	75th% market	\$7.00	5.4%
71010	71010T	CHEST X-RAY	\$130.00	<b>\$137.00</b>	75th% market	\$7.00	5.4%
71020	71020	CHEST X-RAY, 2 Views Frontal And Lateral	\$167.00	<b>\$176.00</b>	75th% market	\$9.00	5.4%
71030	71030	CHEST X-RAY - Complete Minimum 4 Views	\$225.00	<b>\$237.00</b>	75th% market	\$12.00	5.3%
71100	71100	X-RAY EXAM OF RIBS	\$164.00	<b>\$173.00</b>	75th% market	\$9.00	5.5%
71101	71101	X-RAY EXAM OF RIBS/CHEST	\$193.00	<b>\$203.00</b>	75th% market	\$10.00	5.2%
71110	71110	X-RAY EXAM OF RIBS	\$216.00	<b>\$228.00</b>	75th% market	\$12.00	5.6%
72040	72040	X-RAY EXAM OF NECK SPINE	\$0.00	<b>\$165.00</b>	75th% market	\$165.00	100.0%
72050	72050	X-RAY EXAM OF NECK SPINE	\$238.00	<b>\$238.00</b>	Current fee	\$0.00	0.0%
72070	72070	X-RAY EXAM OF THORACIC SPINE	\$171.00	<b>\$171.00</b>	Current fee	\$0.00	0.0%
72072	72072	X-RAY EXAM OF THORACIC SPINE	\$196.00	<b>\$196.00</b>	Current fee	\$0.00	0.0%
72080	72080	X-RAY EXAM OF TRUNK SPINE	\$185.00	<b>\$185.00</b>	Current fee	\$0.00	0.0%
72090	72090	X-RAY EXAM OF TRUNK SPINE	\$221.00	<b>\$221.00</b>	Current fee	\$0.00	0.0%
72100	72100	X-RAY EXAM OF LOWER SPINE	\$174.00	<b>\$174.00</b>	Current fee	\$0.00	0.0%
72110	72110	X-RAY EXAM OF LOWER SPINE	\$252.00	<b>\$252.00</b>	Current fee	\$0.00	0.0%
72170	72170	X-RAY EXAM OF PELVIS	\$163.00	<b>\$163.00</b>	Current fee	\$0.00	0.0%
72220	72220	X-RAY EXAM OF TAILBONE	\$172.00	<b>\$172.00</b>	Current fee	\$0.00	0.0%
73000	73000	X-RAY EXAM OF COLLAR BONE	\$148.00	<b>\$148.00</b>	Current fee	\$0.00	0.0%

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73010	73010	X-RAY EXAM OF SHOULDER BLADE	\$169.00	<b>\$169.00</b>	Current fee	\$0.00	0.0%
73020	73020	X-RAY EXAM OF SHOULDER	\$127.00	<b>\$127.00</b>	Current fee	\$0.00	0.0%
73030	73030	X-RAY EXAM OF SHOULDER	\$181.00	<b>\$181.00</b>	Current fee	\$0.00	0.0%
73060	73060	X-RAY EXAM OF HUMERUS	\$166.00	<b>\$166.00</b>	Current fee	\$0.00	0.0%
73080	73080	X-RAY EXAM OF ELBOW	\$160.00	<b>\$160.00</b>	Current fee	\$0.00	0.0%
73090	73090	X-RAY EXAM OF FOREARM	\$142.00	<b>\$142.00</b>	Current fee	\$0.00	0.0%
73100	73100	X-RAY EXAM OF WRIST	\$133.00	<b>\$133.00</b>	Current fee	\$0.00	0.0%
73110	73110	X-RAY EXAM OF WRIST	\$153.00	<b>\$153.00</b>	Current fee	\$0.00	0.0%
73130	73130	X-RAY EXAM OF HAND	\$151.00	<b>\$151.00</b>	Current fee	\$0.00	0.0%
73140	73140	X-RAY EXAM OF FINGER(S)	\$112.00	<b>\$112.00</b>	Current fee	\$0.00	0.0%
73510	73510	X-RAY EXAM OF HIP	\$164.00	<b>\$164.00</b>	Current fee	\$0.00	0.0%
73520	73520	X-RAY EXAM OF HIPS	\$198.00	<b>\$198.00</b>	Current fee	\$0.00	0.0%
73550	73550	X-RAY EXAM OF THIGH	\$153.00	<b>\$153.00</b>	Current fee	\$0.00	0.0%
73560	73560	X-RAY EXAM OF KNEE, 1 OR 2	\$139.00	<b>\$139.00</b>	Current fee	\$0.00	0.0%
73562	73562	X-RAY EXAM OF KNEE, 3	\$156.00	<b>\$156.00</b>	Current fee	\$0.00	0.0%
73564	73564	X-RAY EXAM, KNEE, 4 OR MORE	\$185.00	<b>\$185.00</b>	Current fee	\$0.00	0.0%
73590	73590	X-RAY EXAM OF LOWER LEG	\$137.00	<b>\$137.00</b>	Current fee	\$0.00	0.0%
73600	73600	X-RAY EXAM OF ANKLE - 2 Views	\$128.00	<b>\$128.00</b>	Current fee	\$0.00	0.0%
73610	73610	X-RAY EXAM OF ANKLE - Complete, Minimum 3 Views	\$145.00	<b>\$145.00</b>	Current fee	\$0.00	0.0%
73620	73620	X-RAY EXAM OF FOOT	\$127.00	<b>\$127.00</b>	Current fee	\$0.00	0.0%
73630	73630	X-RAY EXAM OF FOOT	\$143.00	<b>\$143.00</b>	Current fee	\$0.00	0.0%
74000	74000	X-RAY EXAM OF ABDOMEN	\$147.00	<b>\$147.00</b>	Current fee	\$0.00	0.0%
74020	74020	X-RAY EXAM OF ABDOMEN	\$180.00	<b>\$180.00</b>	Current fee	\$0.00	0.0%
80047	80047	METABOLIC PANEL IONIZED CA	\$82.00	<b>\$91.00</b>	75th% market	\$9.00	11.0%
80048	80048	BASIC METABOLIC PANEL	\$82.00	<b>\$91.00</b>	75th% market	\$9.00	11.0%
80051	80051	ELECTROLYTE PANEL	\$68.00	<b>\$76.00</b>	75th% market	\$8.00	11.8%
80053	80053	COMPREHEN METABOLIC PANEL	\$96.00	<b>\$106.00</b>	75th% market	\$10.00	10.4%
80053	80053F	COMPREHEN METABOLIC PANEL	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
80061	80061F	LIPID PANEL	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
80061	80061	LIPID PANEL	\$109.00	<b>\$122.00</b>	75th% market	\$13.00	11.9%
80074	80074	ACUTE HEPATITIS PANEL	\$307.00	<b>\$342.00</b>	75th% market	\$35.00	11.4%
80076	80076	HEPATIC FUNCTION PANEL	\$85.00	<b>\$95.00</b>	75th% market	\$10.00	11.8%
80100	80100	DRUG SCREEN, QUALITATE/MULTI	\$41.00	<b>\$41.00</b>	Current fee	\$0.00	0.0%
80100	W7254	DRUG SCREEN, QUALITATE/MULTI	\$41.00	<b>\$41.00</b>	Current fee	\$0.00	0.0%
80101	80101	DRUG SCREEN, SINGLE	\$35.00	<b>\$35.00</b>	Current fee	\$0.00	0.0%
80150	80150	ASSAY OF AMIKACIN	\$0.00	<b>\$100.00</b>	75th% market	\$100.00	100.0%
80156	80156	ASSAY, CARBAMAZEPINE, TOTAL	\$99.00	<b>\$112.00</b>	Vendor cost	\$13.00	13.1%
80162	80162	ASSAY OF DIGOXIN	\$93.00	<b>\$94.00</b>	75th% market	\$1.00	1.1%
80164	80164	ASSAY, DIPROPYLACETIC ACID	\$97.00	<b>\$98.00</b>	75th% market	\$1.00	1.0%
80173	80173	ASSAY OF HALOPERIDOL	\$0.00	<b>\$92.00</b>	75th% market	\$92.00	100.0%
80177	80177	Levetiracetam	\$27.00	<b>\$29.00</b>	Vendor cost	\$2.00	7.4%
80178	80178	ASSAY OF LITHIUM	\$62.00	<b>\$62.00</b>	75th% market	\$0.00	0.0%
80184	80184	ASSAY OF PHENOBARBITAL	\$83.00	<b>\$83.00</b>	75th% market	\$0.00	0.0%
80185	80185	ASSAY OF PHENYTOIN, TOTAL	\$93.00	<b>\$94.00</b>	75th% market	\$1.00	1.1%
80201	80201	ASSAY OF TOPIRAMATE	\$101.00	<b>\$102.00</b>	75th% market	\$1.00	1.0%
80299	80299	QUANTITATIVE ASSAY, DRUG	\$103.00	<b>\$141.00</b>	Vendor cost	\$38.00	36.9%
81000	81000F	URINALYSIS, NONAUTO W/SCOPE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
81001	81001F	URINALYSIS, AUTO W/SCOPE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
81001	81001	URINALYSIS, AUTO W/SCOPE	\$30.00	<b>\$30.00</b>	75th% market	\$0.00	0.0%
81002	81002	URINALYSIS NONAUTO W/O SCOPE	\$23.00	<b>\$24.00</b>	75th% market	\$1.00	4.3%
81002	81002F	URINALYSIS NONAUTO W/O SCOPE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
81005	81005	URINALYSIS	\$0.00	<b>\$26.00</b>	Vendor cost	\$26.00	100.0%
81015	81015	MICROSCOPIC EXAM OF URINE	\$0.00	<b>\$26.00</b>	Vendor cost	\$26.00	100.0%
81025	81025N	Negative URINE PREGNANCY TEST	\$44.00	<b>\$45.00</b>	75th% market	\$1.00	2.3%
81025	81025NF	Negative URINE PREGNANCY TEST	\$44.00	<b>\$45.00</b>	75th% market	\$1.00	2.3%
81025	81025PF	Positive URINE PREGNANCY TEST	\$44.00	<b>\$45.00</b>	75th% market	\$1.00	2.3%
81025	81025	URINE PREGNANCY TEST	\$44.00	<b>\$45.00</b>	75th% market	\$1.00	2.3%
81025	81025P	Positive URINE PREGNANCY TEST	\$44.00	<b>\$45.00</b>	75th% market	\$1.00	2.3%
82024	82024	ASSAY OF ACTH	\$287.00	<b>\$306.00</b>	75th% market	\$19.00	6.6%
82043	82043	MICROALBUMIN, QUANTITATIVE	\$112.00	<b>\$119.00</b>	75th% market	\$7.00	6.3%
82045	82045	ALBUMIN, ISCHEMIA MODIFIED	\$0.00	<b>\$78.00</b>	Medicare * 200%	\$78.00	100.0%
82055	82055	ASSAY OF ETHANOL	\$96.00	<b>\$96.00</b>	Current fee	\$0.00	0.0%
82085	82085	ASSAY OF ALDOLASE	\$0.00	<b>\$95.00</b>	75th% market	\$95.00	100.0%
82088	82088	ASSAY OF ALDOSTERONE	\$256.00	<b>\$272.00</b>	75th% market	\$16.00	6.3%
82105	82105	ALPHA-FETOPROTEIN, SERUM	\$150.00	<b>\$160.00</b>	75th% market	\$10.00	6.7%
82140	82140	ASSAY OF AMMONIA	\$80.00	<b>\$85.00</b>	75th% market	\$5.00	6.3%
82150	82150	ASSAY OF AMYLASE	\$39.00	<b>\$45.00</b>	Vendor cost	\$6.00	15.4%
82247	82247	BILIRUBIN, TOTAL	\$25.00	<b>\$25.00</b>	75th% market	\$0.00	0.0%
82248	82248	BILIRUBIN, DIRECT	\$25.00	<b>\$25.00</b>	75th% market	\$0.00	0.0%
82270	82270	OCCULT BLOOD, FECES	\$23.00	<b>\$23.00</b>	75th% market	\$0.00	0.0%
82270	82270F	OCCULT BLOOD, FECES	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
82272	82272	OCCULT BLOOD, FECES, SINGLE	\$20.00	<b>\$21.00</b>	75th% market	\$1.00	5.0%
82274	82274	ASSAY TEST FOR BLOOD, FECAL	\$0.00	<b>\$81.00</b>	75th% market	\$81.00	100.0%
82306	82306	ASSAY OF VITAMIN D	\$161.00	<b>\$177.00</b>	75th% market	\$16.00	9.9%
82310	82310	ASSAY OF CALCIUM	\$26.00	<b>\$45.00</b>	Vendor cost	\$19.00	73.1%

\* Note - Flu vaccines effective 7/1/2016

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

<b>CPT4</b>	<b>SIM Code</b>	<b>Code Description</b>	<b>Current Fee</b>	<b>Proposed Fee</b>	<b>Rationale for FY2016</b>	<b>Change from Current to Proposed</b>	<b>% of Change</b>
82330	82330	ASSAY OF CALCIUM	\$71.00	<b>\$78.00</b>	75th% market	\$7.00	9.9%
82340	82340	ASSAY OF CALCIUM IN URINE	\$34.00	<b>\$45.00</b>	Vendor cost	\$11.00	32.4%
82360	82360	CALCULUS ASSAY, QUANT	\$0.00	<b>\$90.00</b>	75th% market	\$90.00	100.0%
82378	82378	CARCINOEMBRYONIC ANTIGEN	\$112.00	<b>\$123.00</b>	75th% market	\$11.00	9.8%
82384	82384	ASSAY, THREE CATECHOLAMINES	\$150.00	<b>\$217.00</b>	Vendor cost	\$67.00	44.7%
82390	82390	ASSAY OF CERULOPLASMIN	\$0.00	<b>\$75.00</b>	75th% market	\$75.00	100.0%
82397	82397	CHEMILUMINESCENT ASSAY	\$60.00	<b>\$167.00</b>	75th% market	\$107.00	178.3%
82465	82465	ASSAY, BLD/SERUM CHOLESTEROL	\$21.00	<b>\$24.00</b>	75th% market	\$3.00	14.3%
82530	82530	CORTISOL, FREE	\$151.00	<b>\$223.00</b>	75th% market	\$72.00	47.7%
82533	82533	TOTAL CORTISOL	\$148.00	<b>\$218.00</b>	75th% market	\$70.00	47.3%
82540	82540	ASSAY OF CREATINE	\$0.00	<b>\$84.00</b>	75th% market	\$84.00	100.0%
82550	82550	ASSAY OF CK (CPK)	\$41.00	<b>\$60.00</b>	75th% market	\$19.00	46.3%
82552	82552	ASSAY OF CPK IN BLOOD	\$0.00	<b>\$167.00</b>	75th% market	\$167.00	100.0%
82565	82565	ASSAY OF CREATININE	\$32.00	<b>\$46.00</b>	75th% market	\$14.00	43.8%
82570	82570	ASSAY OF URINE CREATININE	\$50.00	<b>\$78.00</b>	Vendor cost	\$28.00	56.0%
82575	82575	CREATININE CLEARANCE TEST	\$91.00	<b>\$135.00</b>	75th% market	\$44.00	48.4%
82595	82595	ASSAY OF CRYOGLOBULIN	\$0.00	<b>\$97.00</b>	75th% market	\$97.00	100.0%
82607	82607	VITAMIN B-12	\$126.00	<b>\$186.00</b>	75th% market	\$60.00	47.6%
82627	82627	DEHYDROEPIANDROSTERONE	\$144.00	<b>\$178.00</b>	75th% market	\$34.00	23.6%
82652	82652	ASSAY OF DIHYDROXYVITAMIN D	\$172.00	<b>\$189.00</b>	75th% market	\$17.00	9.9%
82668	82668	ASSAY OF ERYTHROPOIETIN	\$156.00	<b>\$193.00</b>	75th% market	\$37.00	23.7%
82670	82670	ASSAY OF ESTRADIOL	\$113.00	<b>\$139.00</b>	75th% market	\$26.00	23.0%
82672	82672	ASSAY OF ESTROGEN	\$0.00	<b>\$178.00</b>	75th% market	\$178.00	100.0%
82677	82677	ASSAY OF ESTRADIOL	\$103.00	<b>\$128.00</b>	75th% market	\$25.00	24.3%
82728	82728	ASSAY OF FERRITIN	\$89.00	<b>\$110.00</b>	75th% market	\$21.00	23.6%
82746	82746	BLOOD FOLIC ACID SERUM	\$98.00	<b>\$122.00</b>	75th% market	\$24.00	24.5%
82747	82747	ASSAY OF FOLIC ACID, RBC	\$0.00	<b>\$145.00</b>	75th% market	\$145.00	100.0%
82784	82784	ASSAY OF GAMMAGLOBULIN IGM	\$74.00	<b>\$86.00</b>	Vendor cost	\$12.00	16.2%
82785	82785	ASSAY OF GAMMAGLOBULIN IGE	\$95.00	<b>\$103.00</b>	75th% market	\$8.00	8.4%
82926	82926	ASSAY OF GASTRIC ACID	\$0.00	<b>\$4.00</b>	Blue Cross rate	\$4.00	100.0%
82946	82946	GLUCAGON TOLERANCE TEST	\$67.00	<b>\$73.00</b>	75th% market	\$6.00	9.0%
82947	82947F	ASSAY, GLUCOSE, BLOOD QUANT	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
82947	82947	ASSAY, GLUCOSE, BLOOD QUANT	\$30.00	<b>\$33.00</b>	75th% market	\$3.00	10.0%
82950	82950	GLUCOSE TEST	\$39.00	<b>\$43.00</b>	75th% market	\$4.00	10.3%
82951	82951	GLUCOSE TOLERANCE TEST (GTT)	\$84.00	<b>\$91.00</b>	75th% market	\$7.00	8.3%
82952	82952	GTT-ADDED SAMPLES	\$26.00	<b>\$28.00</b>	75th% market	\$2.00	7.7%
82955	82955	ASSAY OF G6PD ENZYME	\$84.00	<b>\$91.00</b>	75th% market	\$7.00	8.3%
82962	82962	GLUCOSE BLOOD TEST	\$23.00	<b>\$25.00</b>	75th% market	\$2.00	8.7%
82962	82962F	GLUCOSE BLOOD TEST	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
82965	82965	ASSAY OF GDH ENZYME	\$0.00	<b>\$35.00</b>	75th% market	\$35.00	100.0%
82977	82977	ASSAY OF GGT	\$26.00	<b>\$28.00</b>	75th% market	\$2.00	7.7%
83001	83001	GONADOTROPIN (FSH)	\$116.00	<b>\$138.00</b>	Vendor cost	\$22.00	19.0%
83001	83001F	GONADOTROPIN (FSH)	\$0.00	<b>\$0.00</b>	Vendor cost	\$0.00	0.0%
83002	83002	GONADOTROPIN (LH)	\$116.00	<b>\$138.00</b>	Vendor cost	\$22.00	19.0%
83002	83002F	GONADOTROPIN (LH)	\$0.00	<b>\$0.00</b>	Vendor cost	\$0.00	0.0%
83003	83003	ASSAY, GROWTH HORMONE (HGH)	\$111.00	<b>\$121.00</b>	75th% market	\$10.00	9.0%
83010	83010	ASSAY OF HAPTOGLOBIN, QUANT	\$103.00	<b>\$124.00</b>	75th% market	\$21.00	20.4%
83021	83021	HEMOGLOBIN CHROMATOGRAPHY	\$125.00	<b>\$150.00</b>	75th% market	\$25.00	20.0%
83036	83036	GLYCOSYLATED HEMOGLOBIN TEST	\$75.00	<b>\$90.00</b>	75th% market	\$15.00	20.0%
83036	83036F	GLYCOSYLATED HEMOGLOBIN TEST	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
83037	83037	GLYCOSYLATED HB, HOME DEVICE	\$67.00	<b>\$80.00</b>	75th% market	\$13.00	19.4%
83090	83090	ASSAY OF HOMOCYSTEINE	\$106.00	<b>\$179.00</b>	Vendor cost	\$73.00	68.9%
83498	83498	ASSAY OF PROGESTERONE	\$178.00	<b>\$214.00</b>	75th% market	\$36.00	20.2%
83516	83516	IMMUNOASSAY, NONANTIBODY	\$95.00	<b>\$111.00</b>	75th% market	\$16.00	16.8%
83520	83520	IMMUNOASSAY, RIA	\$108.00	<b>\$140.00</b>	Vendor cost	\$32.00	29.6%
83525	83525	ASSAY OF INSULIN	\$121.00	<b>\$141.00</b>	75th% market	\$20.00	16.5%
83540	83540	ASSAY OF IRON	\$35.00	<b>\$41.00</b>	75th% market	\$6.00	17.1%
83550	83550	IRON BINDING TEST	\$54.00	<b>\$63.00</b>	75th% market	\$9.00	16.7%
83615	83615	LACTATE (LD) (LDH) ENZYME	\$35.00	<b>\$46.00</b>	Vendor cost	\$11.00	31.4%
83655	83655	ASSAY OF LEAD	\$80.00	<b>\$93.00</b>	75th% market	\$13.00	16.3%
83690	83690	ASSAY OF LIPASE	\$70.00	<b>\$82.00</b>	75th% market	\$12.00	17.1%
83718	83718	ASSAY OF LIPOPROTEIN	\$60.00	<b>\$71.00</b>	75th% market	\$11.00	18.3%
83721	83721	ASSAY OF BLOOD LIPOPROTEIN	\$64.00	<b>\$74.00</b>	75th% market	\$10.00	15.6%
83735	83735	ASSAY OF MAGNESIUM	\$51.00	<b>\$54.00</b>	75th% market	\$3.00	5.9%
83789	83789	MASS SPECTROMETRY QUANT	\$143.00	<b>\$152.00</b>	75th% market	\$9.00	6.3%
83874	83874	ASSAY OF MYOGLOBIN	\$114.00	<b>\$123.00</b>	Vendor cost	\$9.00	7.9%
83880	83880	NATRIURETIC PEPTIDE	\$191.00	<b>\$202.00</b>	75th% market	\$11.00	5.8%
83930	83930	ASSAY OF BLOOD OSMOLALITY	\$0.00	<b>\$51.00</b>	Vendor cost	\$51.00	100.0%
83935	83935	ASSAY OF URINE OSMOLALITY	\$55.00	<b>\$55.00</b>	Current fee	\$0.00	0.0%
83945	83945	ASSAY OF OXALATE	\$66.00	<b>\$66.00</b>	Current fee	\$0.00	0.0%
83970	83970	ASSAY OF PARATHORMONE	\$200.00	<b>\$200.00</b>	Current fee	\$0.00	0.0%
83986	83986	PH Body Fluids	\$0.00	<b>\$48.00</b>	Vendor cost	\$48.00	100.0%
84035	84035	ASSAY OF PHENYLKETONES	\$0.00	<b>\$25.00</b>	75th% market	\$25.00	100.0%
84075	84075	ASSAY ALKALINE PHOSPHATASE	\$22.00	<b>\$84.00</b>	Vendor cost	\$62.00	281.8%
84080	84080	ASSAY ALKALINE PHOSPHATASES	\$95.00	<b>\$95.00</b>	Current fee	\$0.00	0.0%

\* Note - Flu vaccines effective 7/1/2016

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

<b>CPT4</b>	<b>SIM Code</b>	<b>Code Description</b>	<b>Current Fee</b>	<b>Proposed Fee</b>	<b>Rationale for FY2016</b>	<b>Change from Current to Proposed</b>	<b>% of Change</b>
84100	84100	ASSAY OF PHOSPHORUS	\$18.00	<b>\$45.00</b>	Vendor cost	\$27.00	150.0%
84119	84119	TEST URINE FOR PORPHYRINS	\$0.00	<b>\$56.00</b>	75th% market	\$56.00	100.0%
84132	84132	ASSAY OF SERUM POTASSIUM	\$20.00	<b>\$20.00</b>	75th% market	\$0.00	0.0%
84144	84144	ASSAY OF PROGESTERONE	\$110.00	<b>\$153.00</b>	Vendor cost	\$43.00	39.1%
84146	84146	ASSAY OF PROLACTIN	\$110.00	<b>\$110.00</b>	Current fee	\$0.00	0.0%
84153	84153	ASSAY OF PSA, TOTAL	\$106.00	<b>\$106.00</b>	Current fee	\$0.00	0.0%
84154	84154	ASSAY OF PSA, FREE	\$88.00	<b>\$88.00</b>	Current fee	\$0.00	0.0%
84155	84155	ASSAY OF PROTEIN, SERUM	\$24.00	<b>\$24.00</b>	75th% market	\$0.00	0.0%
84156	84156	ASSAY OF PROTEIN, URINE	\$31.00	<b>\$31.00</b>	Current fee	\$0.00	0.0%
84165	84165	PROTEIN E-PHORESIS, SERUM	\$79.00	<b>\$79.00</b>	Current fee	\$0.00	0.0%
84166	84166	PROTEIN E-PHORESIS/URINE/CSF	\$84.00	<b>\$84.00</b>	Current fee	\$0.00	0.0%
84244	84244	ASSAY OF RENIN	\$152.00	<b>\$152.00</b>	Current fee	\$0.00	0.0%
84300	84300	ASSAY OF URINE SODIUM	\$31.00	<b>\$45.00</b>	Vendor cost	\$14.00	45.2%
84402	84402	ASSAY OF TESTOSTERONE	\$176.00	<b>\$202.00</b>	75th% market	\$26.00	14.8%
84403	84403	ASSAY OF TOTAL TESTOSTERONE	\$141.00	<b>\$173.00</b>	Vendor cost	\$32.00	22.7%
84430	84430	ASSAY OF THIOCYANATE	\$101.00	<b>\$136.00</b>	Vendor cost	\$35.00	34.7%
84436	84436	ASSAY OF TOTAL THYROXINE	\$50.00	<b>\$58.00</b>	75th% market	\$8.00	16.0%
84439	84439	ASSAY OF FREE THYROXINE	\$88.00	<b>\$101.00</b>	75th% market	\$13.00	14.8%
84443	84443F	ASSAY THYROID STIM HORMONE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
84443	84443	ASSAY THYROID STIM HORMONE	\$126.00	<b>\$144.00</b>	75th% market	\$18.00	14.3%
84445	84445	ASSAY OF TSI	\$384.00	<b>\$440.00</b>	75th% market	\$56.00	14.6%
84446	84446	ASSAY OF VITAMIN E	\$0.00	<b>\$115.00</b>	75th% market	\$115.00	100.0%
84450	84450	TRANSFERASE (AST) (SGOT)	\$35.00	<b>\$40.00</b>	75th% market	\$5.00	14.3%
84460	84460	ALANINE AMINO (ALT) (SGPT)	\$35.00	<b>\$40.00</b>	75th% market	\$5.00	14.3%
84479	84479	ASSAY OF THYROID (T3 OR T4)	\$57.00	<b>\$65.00</b>	75th% market	\$8.00	14.0%
84480	84480	ASSAY, TRIIODOTHYRONINE (T3)	\$126.00	<b>\$144.00</b>	75th% market	\$18.00	14.3%
84481	84481	FREE ASSAY (FT-3)	\$167.00	<b>\$191.00</b>	75th% market	\$24.00	14.4%
84520	84520	ASSAY OF UREA NITROGEN	\$29.00	<b>\$30.00</b>	75th% market	\$1.00	3.4%
84550	84550	ASSAY OF BLOOD/URIC ACID	\$29.00	<b>\$30.00</b>	75th% market	\$1.00	3.4%
84681	84681	ASSAY OF C-PEPTIDE	\$150.00	<b>\$157.00</b>	75th% market	\$7.00	4.7%
84702	84702	CHORIONIC GONADOTROPIN TEST	\$100.00	<b>\$104.00</b>	75th% market	\$4.00	4.0%
84703	84703	CHORIONIC GONADOTROPIN ASSAY	\$61.00	<b>\$63.00</b>	75th% market	\$2.00	3.3%
85007	85007	BL SMEAR W/DIFF WBC COUNT	\$0.00	<b>\$36.00</b>	75th% market	\$36.00	100.0%
85014	85014	HEMATOCRIT	\$27.00	<b>\$27.00</b>	75th% market	\$0.00	0.0%
85014	85014F	HEMATOCRIT	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
85018	85018F	HEMOGLOBIN	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
85018	85018	HEMOGLOBIN	\$27.00	<b>\$27.00</b>	75th% market	\$0.00	0.0%
85025	85025	COMPLETE CBC W/AUTO DIFF WBC	\$55.00	<b>\$56.00</b>	75th% market	\$1.00	1.8%
85025	85025F	COMPLETE CBC W/AUTO DIFF WBC	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
85027	85027	COMPLETE CBC, AUTOMATED	\$0.00	<b>\$53.00</b>	75th% market	\$53.00	100.0%
85041	85041	AUTOMATED RBC COUNT	\$36.00	<b>\$36.00</b>	75th% market	\$0.00	0.0%
85044	85044	MANUAL RETICULOCYTE COUNT	\$42.00	<b>\$42.00</b>	75th% market	\$0.00	0.0%
85045	85045	AUTOMATED RETICULOCYTE COUNT	\$45.00	<b>\$45.00</b>	75th% market	\$0.00	0.0%
85049	85049	AUTOMATED PLATELET COUNT	\$36.00	<b>\$36.00</b>	75th% market	\$0.00	0.0%
85055	85055	RETICULATED PLATELET ASSAY	\$0.00	<b>\$36.00</b>	Medicare * 200%	\$36.00	100.0%
85302	85302	BLOOD CLOT INHIBITOR ANTIGEN	\$0.00	<b>\$201.00</b>	Vendor cost	\$201.00	100.0%
85303	85303	BLOOD CLOT INHIBITOR TEST	\$182.00	<b>\$205.00</b>	75th% market	\$23.00	12.6%
85305	85305	BLOOD CLOT INHIBITOR ASSAY	\$0.00	<b>\$208.00</b>	75th% market	\$208.00	100.0%
85306	85306	BLOOD CLOT INHIBITOR TEST	\$191.00	<b>\$215.00</b>	75th% market	\$24.00	12.6%
85379	85379	FIBRIN DEGRADATION, QUANT	\$103.00	<b>\$116.00</b>	75th% market	\$13.00	12.6%
85384	85384	FIBRINOGEN	\$73.00	<b>\$83.00</b>	75th% market	\$10.00	13.7%
85610	85610	PROTHROMBIN TIME	\$35.00	<b>\$40.00</b>	75th% market	\$5.00	14.3%
85613	85613	RUSSELL VIPER VENOM, DILUTED	\$91.00	<b>\$102.00</b>	75th% market	\$11.00	12.1%
85651	85651	RBC SED RATE, NONAUTOMATED	\$37.00	<b>\$41.00</b>	75th% market	\$4.00	10.8%
85652	85652	RBC SED RATE, AUTOMATED	\$35.00	<b>\$40.00</b>	75th% market	\$5.00	14.3%
85660	85660	RBC SICKLE CELL TEST	\$46.00	<b>\$51.00</b>	75th% market	\$5.00	10.9%
85730	85730	THROMBOPLASTIN TIME, PARTIAL	\$50.00	<b>\$56.00</b>	75th% market	\$6.00	12.0%
86001	86001	ALLERGEN SPECIFIC IGG	\$0.00	<b>\$50.00</b>	Vendor cost	\$50.00	100.0%
86003	86003	ALLERGEN SPECIFIC IGE	\$38.00	<b>\$44.00</b>	75th% market	\$6.00	15.8%
86021	86021	WBC ANTIBODY IDENTIFICATION	\$205.00	<b>\$239.00</b>	75th% market	\$34.00	16.6%
86022	86022	PLATELET ANTIBODIES	\$291.00	<b>\$338.00</b>	75th% market	\$47.00	16.2%
86023	86023	IMMUNOGLOBULIN ASSAY	\$0.00	<b>\$219.00</b>	75th% market	\$219.00	100.0%
86038	86038	ANTINUCLEAR ANTIBODIES	\$120.00	<b>\$139.00</b>	75th% market	\$19.00	15.8%
86060	86060	ANTISTREPTOLYSIN O, TITER	\$82.00	<b>\$95.00</b>	75th% market	\$13.00	15.9%
86140	86140	C-REACTIVE PROTEIN	\$73.00	<b>\$73.00</b>	75th% market	\$0.00	0.0%
86141	86141	C-REACTIVE PROTEIN, HS	\$0.00	<b>\$95.00</b>	75th% market	\$95.00	100.0%
86146	86146	GLYCOPROTEIN ANTIBODY	\$236.00	<b>\$238.00</b>	75th% market	\$2.00	0.8%
86147	86147	CARDIOLIPIN ANTIBODY	\$236.00	<b>\$238.00</b>	75th% market	\$2.00	0.8%
86160	86160	COMPLEMENT, ANTIGEN	\$149.00	<b>\$150.00</b>	75th% market	\$1.00	0.7%
86162	86162	COMPLEMENT, TOTAL (CH50)	\$225.00	<b>\$227.00</b>	75th% market	\$2.00	0.9%
86200	86200	CCP ANTIBODY	\$153.00	<b>\$154.00</b>	75th% market	\$1.00	0.7%
86225	86225	DNA ANTIBODY	\$156.00	<b>\$157.00</b>	75th% market	\$1.00	0.6%
86235	86235	NUCLEAR ANTIGEN ANTIBODY	\$138.00	<b>\$139.00</b>	75th% market	\$1.00	0.7%
86255	86255	FLUORESCENT ANTIBODY, SCREEN	\$127.00	<b>\$157.00</b>	Vendor cost	\$30.00	23.6%
86304	86304	IMMUNOASSAY, TUMOR, CA 125	\$99.00	<b>\$152.00</b>	75th% market	\$53.00	53.5%

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<b>CPT4</b>	<b>SIM Code</b>	<b>Code Description</b>	<b>Current Fee</b>	<b>Proposed Fee</b>	<b>Rationale for FY2016</b>	<b>Change from Current to Proposed</b>	<b>% of Change</b>
86308	86308	HETEROPHILE ANTIBODIES	\$36.00	<b>\$55.00</b>	75th% market	\$19.00	52.8%
86317	86317	IMMUNOASSAY,INFECTIOUS AGENT	\$47.00	<b>\$129.00</b>	Vendor cost	\$82.00	174.5%
86318	86318	IMMUNOASSAY,INFECTIOUS AGENT	\$0.00	<b>\$73.00</b>	75th% market	\$73.00	100.0%
86334	86334	IMMUNOFIX E-PHORESIS, SERUM	\$107.00	<b>\$165.00</b>	75th% market	\$58.00	54.2%
86335	86335	IMMUNIFX E-PHORSIS/URINE/CSF	\$107.00	<b>\$165.00</b>	75th% market	\$58.00	54.2%
86336	86336	INHIBIN A	\$99.00	<b>\$174.00</b>	Vendor cost	\$75.00	75.8%
86360	86360	T CELL, ABSOLUTE COUNT/RATIO	\$118.00	<b>\$183.00</b>	75th% market	\$65.00	55.1%
86376	86376	MICROSOMAL ANTIBODY	\$102.00	<b>\$116.00</b>	75th% market	\$14.00	13.7%
86430	86430	RHEUMATOID FACTOR TEST	\$48.00	<b>\$55.00</b>	75th% market	\$7.00	14.6%
86431	86431	RHEUMATOID FACTOR, QUANT	\$51.00	<b>\$58.00</b>	75th% market	\$7.00	13.7%
86480	86480	TB TEST, CELL IMMUN MEASURE	\$84.00	<b>\$96.00</b>	75th% market	\$12.00	14.3%
86580	86580T	TB INTRADERMAL TEST	\$36.00	<b>\$41.00</b>	75th% market	\$5.00	13.9%
86580	86580	TB INTRADERMAL TEST	\$36.00	<b>\$41.00</b>	75th% market	\$5.00	13.9%
86592	86592F	BLOOD SEROLOGY, QUALITATIVE	\$0.00	<b>\$0.00</b>	Vendor cost	\$0.00	0.0%
86592	86592	BLOOD SEROLOGY, QUALITATIVE	\$36.00	<b>\$49.00</b>	Vendor cost	\$13.00	36.1%
86617	86617	LYME DISEASE ANTIBODY	\$164.00	<b>\$179.00</b>	75th% market	\$15.00	9.1%
86644	86644	CMV ANTIBODY	\$142.00	<b>\$155.00</b>	75th% market	\$13.00	9.2%
86645	86645	CMV ANTIBODY, IGM	\$148.00	<b>\$162.00</b>	75th% market	\$14.00	9.5%
86651	86651	ENCEPHALITIS ANTIBODY	\$0.00	<b>\$121.00</b>	75th% market	\$121.00	100.0%
86677	86677	HELICOBACTER PYLORI	\$154.00	<b>\$169.00</b>	75th% market	\$15.00	9.7%
86689	86689	HTLV/HIV CONFIRMATORY TEST	\$0.00	<b>\$179.00</b>	75th% market	\$179.00	100.0%
86694	86694	HERPES SIMPLEX TEST	\$136.00	<b>\$148.00</b>	75th% market	\$12.00	8.8%
86695	86695	HERPES SIMPLEX TEST	\$136.00	<b>\$148.00</b>	75th% market	\$12.00	8.8%
86696	86696	HERPES SIMPLEX TYPE 2	\$136.00	<b>\$148.00</b>	75th% market	\$12.00	8.8%
86701	86701	HIV-1	\$105.00	<b>\$115.00</b>	75th% market	\$10.00	9.5%
86703	86703F	HIV-1/HIV-2, SINGLE ASSAY	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
86703	86703	HIV-1/HIV-2, SINGLE ASSAY	\$123.00	<b>\$135.00</b>	75th% market	\$12.00	9.8%
86703	86703-92	HIV-1/HIV-2, SINGLE ASSAY	\$0.00	<b>\$0.00</b>	Population Health	\$0.00	0.0%
86703	86703F	HIV-1/HIV-2, SINGLE ASSAY	\$0.00	<b>\$0.00</b>	Population Health	\$0.00	0.0%
86704	86704	HEP B CORE ANTIBODY, TOTAL	\$108.00	<b>\$118.00</b>	75th% market	\$10.00	9.3%
86706	86706	HEP B SURFACE ANTIBODY	\$96.00	<b>\$105.00</b>	75th% market	\$9.00	9.4%
86708	86708	HEP A ANTIBODY, TOTAL	\$114.00	<b>\$125.00</b>	75th% market	\$11.00	9.6%
86709	86709	HEP A ANTIBODY, IGM	\$108.00	<b>\$118.00</b>	75th% market	\$10.00	9.3%
86735	86735	MUMPS ANTIBODY	\$123.00	<b>\$135.00</b>	75th% market	\$12.00	9.8%
86762	86762	RUBELLA ANTIBODY	\$74.00	<b>\$81.00</b>	75th% market	\$7.00	9.5%
86765	86765	RUBEOLA ANTIBODY	\$130.00	<b>\$142.00</b>	75th% market	\$12.00	9.2%
86777	86777	TOXOPLASMA ANTIBODY	\$102.00	<b>\$111.00</b>	75th% market	\$9.00	8.8%
86787	86787	VARICELLA-ZOSTER ANTIBODY	\$127.00	<b>\$138.00</b>	75th% market	\$11.00	8.7%
86800	86800	THYROGLOBULIN ANTIBODY	\$133.00	<b>\$145.00</b>	75th% market	\$12.00	9.0%
86803	86803	HEPATITIS C AB TEST	\$151.00	<b>\$165.00</b>	75th% market	\$14.00	9.3%
86812	86812	HLA TYPING, A, B, OR C	\$194.00	<b>\$213.00</b>	75th% market	\$19.00	9.8%
86850	86850	RBC ANTIBODY SCREEN	\$77.00	<b>\$91.00</b>	75th% market	\$14.00	18.2%
86900	86900	BLOOD TYPING, ABO	\$40.00	<b>\$47.00</b>	75th% market	\$7.00	17.5%
86901	86901	BLOOD TYPING, RH (D)	\$40.00	<b>\$47.00</b>	75th% market	\$7.00	17.5%
87015	87015	SPECIMEN CONCENTRATION	\$56.00	<b>\$71.00</b>	75th% market	\$15.00	26.8%
87040	87040	BLOOD CULTURE FOR BACTERIA	\$75.00	<b>\$94.00</b>	75th% market	\$19.00	25.3%
87045	87045	FECES CULTURE, BACTERIA	\$75.00	<b>\$94.00</b>	75th% market	\$19.00	25.3%
87046	87046	STOOL CULTR, BACTERIA, EACH	\$75.00	<b>\$94.00</b>	75th% market	\$19.00	25.3%
87070	87070	CULTURE, BACTERIA, OTHER	\$72.00	<b>\$91.00</b>	75th% market	\$19.00	26.4%
87075	87075	CULTR BACTERIA, EXCEPT BLOOD	\$80.00	<b>\$101.00</b>	75th% market	\$21.00	26.3%
87081	87081	CULTURE SCREEN ONLY	\$48.00	<b>\$71.00</b>	Vendor cost	\$23.00	47.9%
87081	87081B	CULTURE SCREEN ONLY	\$48.00	<b>\$71.00</b>	Vendor cost	\$23.00	47.9%
87081	87081T	Throat Strep CULTURE SCREEN ONLY	\$48.00	<b>\$71.00</b>	Vendor cost	\$23.00	47.9%
87086	87086F	URINE CULTURE/COLONY COUNT	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87086	87086	URINE CULTURE/COLONY COUNT	\$67.00	<b>\$84.00</b>	75th% market	\$17.00	25.4%
87101	87101	SKIN FUNGI CULTURE	\$67.00	<b>\$84.00</b>	75th% market	\$17.00	25.4%
87110	87110	CHLAMYDIA CULTURE	\$102.00	<b>\$128.00</b>	75th% market	\$26.00	25.5%
87116	87116	MYCOBACTERIA CULTURE	\$80.00	<b>\$101.00</b>	75th% market	\$21.00	26.3%
87140	87140	CULTURE TYPE IMMUNOFLUORESC	\$56.00	<b>\$71.00</b>	75th% market	\$15.00	26.8%
87172	87172	PINWORM EXAM	\$0.00	<b>\$70.00</b>	75th% market	\$70.00	100.0%
87177	87177	OVA AND PARASITES SMEARS	\$109.00	<b>\$126.00</b>	75th% market	\$17.00	15.6%
87205	87205	SMEAR, GRAM STAIN	\$61.00	<b>\$70.00</b>	75th% market	\$9.00	14.8%
87206	87206	SMEAR, FLUORESCENT/ACID STAI	\$73.00	<b>\$84.00</b>	75th% market	\$11.00	15.1%
87209	87209	SMEAR, COMPLEX STAIN	\$73.00	<b>\$84.00</b>	75th% market	\$11.00	15.1%
87210	87210F	SMEAR, WET MOUNT, SALINE/INK	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87210	87210	SMEAR, WET MOUNT, SALINE/INK	\$53.00	<b>\$61.00</b>	75th% market	\$8.00	15.1%
87220	87220	TISSUE EXAM FOR FUNGI	\$61.00	<b>\$70.00</b>	75th% market	\$9.00	14.8%
87254	87254	VIRUS INOCULATION, SHELL VIA	\$203.00	<b>\$234.00</b>	75th% market	\$31.00	15.3%
87255	87255	GENET VIRUS ISOLATE, HSV	\$203.00	<b>\$234.00</b>	75th% market	\$31.00	15.3%
87324	87324	CLOSTRIDIUM AG, EIA	\$53.00	<b>\$56.00</b>	75th% market	\$3.00	5.7%
87329	87329	GIARDIA AG, EIA	\$0.00	<b>\$67.00</b>	Vendor cost	\$67.00	100.0%
87338	87338	HPYLORI, STOOL, EIA	\$53.00	<b>\$56.00</b>	75th% market	\$3.00	5.7%
87339	87339	H PYLORI AG, EIA	\$0.00	<b>\$56.00</b>	75th% market	\$56.00	100.0%
87340	87340	HEPATITIS B SURFACE AG, EIA	\$53.00	<b>\$56.00</b>	75th% market	\$3.00	5.7%
87490	87490	CHYLM D TRACH, DNA, DIR PROBE	\$83.00	<b>\$87.00</b>	75th% market	\$4.00	4.8%

Lake County Health Department and Community Health Center  
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<u>CPT4</u>	<u>SIM Code</u>	<u>Code Description</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Rationale for FY2016</u>	<u>Change from Current to Proposed</u>	<u>% of Change</u>
87490	87490F	CHYLM D TRACH, DNA, DIR PROBE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87491	87491	CHYLM D TRACH, DNA, AMP PROBE	\$119.00	<b>\$125.00</b>	75th% market	\$6.00	5.0%
87491	87491F	CHYLM D TRACH, DNA, AMP PROBE	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87517	87517	HEPATITIS B, DNA, QUANT	\$202.00	<b>\$213.00</b>	75th% market	\$11.00	5.4%
87522	87522	HEPATITIS C, RNA, QUANT	\$185.00	<b>\$195.00</b>	75th% market	\$10.00	5.4%
87529	87529	HSV, DNA, AMP PROBE	\$149.00	<b>\$157.00</b>	75th% market	\$8.00	5.4%
87536	87536	HIV-1, DNA, QUANT	\$231.00	<b>\$362.00</b>	Vendor cost	\$131.00	56.7%
87541	87541	LEGION PNEUMO, DNA, AMP PROB	\$0.00	<b>\$139.00</b>	75th% market	\$139.00	100.0%
87590	87590	N.GONORRHOEAE, DNA, DIR PROB	\$66.00	<b>\$70.00</b>	75th% market	\$4.00	6.1%
87590	87590F	N.GONORRHOEAE, DNA, DIR PROB	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87591	87591F	N.GONORRHOEAE, DNA, AMP PROB	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
87591	87591	N.GONORRHOEAE, DNA, AMP PROB	\$132.00	<b>\$139.00</b>	75th% market	\$7.00	5.3%
87621	87621F	HPV, DNA, AMP PROBE	\$0.00	<b>\$0.00</b>	Vendor cost	\$0.00	0.0%
87621	87621	HPV, DNA, AMP PROBE	\$0.00	<b>\$28.00</b>	Vendor cost	\$28.00	100.0%
87798	87798	DETECT AGENT NOS, DNA, AMP	\$132.00	<b>\$234.00</b>	Vendor cost	\$102.00	77.3%
87800	87800F	DETECT AGNT MULT, DNA, DIREC	\$0.00	<b>\$0.00</b>	Medicare * 200%	\$0.00	0.0%
87800	87800	DETECT AGNT MULT, DNA, DIREC	\$81.00	<b>\$81.00</b>	Current fee	\$0.00	0.0%
87901	87901	GENOTYPE, DNA, HIV REVERSE T	\$734.00	<b>\$774.00</b>	75th% market	\$40.00	5.4%
87902	87902	GENOTYPE, DNA, HEPATITIS C	\$734.00	<b>\$774.00</b>	75th% market	\$40.00	5.4%
87906	87906	HIV-1 Integrase Genotype	\$83.00	<b>\$83.00</b>	75th% market	\$0.00	0.0%
88104	88104	CYTOPATH FL NONGYN, SMEARS	\$290.00	<b>\$325.00</b>	75th% market	\$35.00	12.1%
88142	88142F	CYTOPATH, C/V, THIN LAYER	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
88142	88142	CYTOPATH, C/V, THIN LAYER	\$90.00	<b>\$100.00</b>	75th% market	\$10.00	11.1%
88164	88164F	CYTOPATH TBS, C/V, MANUAL	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
88164	88164	CYTOPATH TBS, C/V, MANUAL	\$90.00	<b>\$100.00</b>	75th% market	\$10.00	11.1%
88300	88300	SURGICAL PATH, GROSS	\$169.00	<b>\$186.00</b>	75th% market	\$17.00	10.1%
88302	88302	TISSUE EXAM BY PATHOLOGIST	\$264.00	<b>\$291.00</b>	75th% market	\$27.00	10.2%
88304	88304	TISSUE EXAM BY PATHOLOGIST	\$381.00	<b>\$419.00</b>	75th% market	\$38.00	10.0%
88305	88305	TISSUE EXAM BY PATHOLOGIST	\$518.00	<b>\$570.00</b>	75th% market	\$52.00	10.0%
88307	88307	TISSUE EXAM BY PATHOLOGIST	\$846.00	<b>\$930.00</b>	75th% market	\$84.00	9.9%
89051	89051	BODY FLUID CELL COUNT	\$0.00	<b>\$48.00</b>	75th% market	\$48.00	100.0%
89055	89055	LEUKOCYTE ASSESSMENT, FECAL	\$40.00	<b>\$41.00</b>	75th% market	\$1.00	2.5%
90281	90281	HUMAN IG, IM	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
90283	90283	HUMAN IG, IV	\$0.00	<b>\$18.00</b>	Blue Cross rate	\$18.00	100.0%
90291	90291	CMV IG, IV	\$0.00	<b>\$34.00</b>	Blue Cross rate	\$34.00	100.0%
90378	90378	RSV IG, IM, 50MG	\$0.00	<b>\$64.00</b>	75th% market	\$64.00	100.0%
90384	90384	RH IG, FULL-DOSE, IM	\$235.00	<b>\$263.00</b>	75th% market	\$28.00	11.9%
90460	90460	IMMUNE ADMIN 1 INJ, < 18 YRS	\$56.00	<b>\$56.00</b>	75th% market	\$0.00	0.0%
90461	90461	IMMUNE ADMIN ADDL INJ, < 18 YRS	\$34.00	<b>\$34.00</b>	75th% market	\$0.00	0.0%
90471	90471	IMMUNIZATION ADMIN	\$50.00	<b>\$56.00</b>	75th% market	\$6.00	12.0%
90472	90472	IMMUNIZATION ADMIN, EACH ADD	\$30.00	<b>\$34.00</b>	75th% market	\$4.00	13.3%
90620	90620	Meningococcal B, OMV	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90621	90621	Meningococcal B, Recombinant	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90632	90632	HEP A VACCINE, ADULT IM	\$0.00	<b>\$0.00</b>	State Vaccine	\$0.00	0.0%
90633	90633	HEP A VACC, PED/ADOL, 2 DOSE	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90633	9P633	HEP A VACC, PED/ADOL, 2 DOSE	\$72.00	<b>\$72.00</b>	75th% market	\$0.00	0.0%
90647	90647	HIB VACCINE, PRP-OMP, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90647	9P647	HIB VACCINE, PRP-OMP, IM	\$61.00	<b>\$61.00</b>	75th% market	\$0.00	0.0%
90648	90648	HIB VACCINE, PRP-T, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90648	9P648	HIB VACCINE, PRP-T, IM	\$58.00	<b>\$58.00</b>	75th% market	\$0.00	0.0%
90649	90649	H PAPILOMA VACC 3 DOSE IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90649	9P649	H PAPILOMA VACC 3 DOSE IM	\$275.00	<b>\$275.00</b>	75th% market	\$0.00	0.0%
90649	9064A	Adult H PAPILOMA VACC 3 DOSE IM	\$277.00	<b>\$277.00</b>	Current fee	\$0.00	0.0%
90650	9P650	HPV TYP BIVAL 3 DOSE IM	\$169.00	<b>\$169.00</b>	Current fee	\$0.00	0.0%
90651	90651	HPV9	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90655	90655	Influenza Preserv Free 6-35 Mo IIV3	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90656	90656	Influenza Preserv Free 3 Years And Over IIV3	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90656	9P656	FLU VACCINE NO PRESERV 3 & >	\$33.00	<b>\$33.00</b>	75th% market	\$0.00	0.0%
90651	906A1	HPV9	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
*90656	*906A6	Influenza No Preserv 3 And Over IIV3	\$29.00	<b>\$33.00</b>	75th% market	\$4.00	13.8%
90657	90657	Influenza 6-35 Months IIV3	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90658	90658	FLU VACCINE, 3 YRS & >	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90658	9P658	FLU VACCINE, 3 YRS & >, IM	\$33.00	<b>\$33.00</b>	75th% market	\$0.00	0.0%
*90658	*9065A	FLU VACCINE, 3 YRS & >, ADULT	\$29.00	<b>\$33.00</b>	75th% market	\$4.00	13.8%
*90654	*9A654	Influenza, Split Virus Preservative Free Intraderm	\$30.00	<b>\$30.00</b>	Current fee	\$0.00	0.0%
*90661	*9A661	Influenza -18 Yrs And Older single-dose prefill Syringe ccIIV3	\$30.00	<b>\$33.00</b>	Population Health	\$3.00	10.0%
90661	9P661	Influenza, Pres/antibiotic Free, IM	\$44.00	<b>\$44.00</b>	75th% market	\$0.00	0.0%
*90662	*90662	Influenza 65yrs And Older Prefilled Syringe	\$50.00	<b>\$50.00</b>	Current fee	\$0.00	0.0%
90670	90670	Pneumococcal Conj 13 Valent IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90670	9A670	Pneumococcal Conj 13 Valent IM	\$308.00	<b>\$308.00</b>	75th% market	\$0.00	0.0%
90670	9P670	Pneumococcal Conj 13 Valent IM	\$308.00	<b>\$308.00</b>	75th% market	\$0.00	0.0%
*90672	*9067A	Influenza 2-49yrs - 0.2ml Prefill Intranasal LAIV4	\$44.00	<b>\$44.00</b>	75th% market	\$0.00	0.0%
90672	90672	Influenza 2-49yrs - 0.2ml Prefill Intranasal LAIV4	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90672	9P672	Influenza Quadrivalent Live Intranasal	\$99.00	<b>\$99.00</b>	75th% market	\$0.00	0.0%
*90673	*90673	Influenza Recomb. Inj. Pres. Free 18-49yrs	\$50.00	<b>\$50.00</b>	Current fee	\$0.00	0.0%

Lake County Health Department and Community Health Center  
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Effective Date of December 1, 2015

CPT4	SIM Code	Code Description	Current Fee	Proposed Fee	Rationale for FY2016	Change from Current to Proposed	% of Change
*90673	*9A673	Influenza Recomb. Inj. Pres. Free 18-49yrs	\$50.00	<b>\$50.00</b>	Current fee	\$0.00	0.0%
*90673	*9P673	Influenza Recomb. Inj. Pres. Free 18-49yrs	\$43.00	<b>\$50.00</b>	75th% market	\$7.00	16.3%
90680	90680	ROTOVIRUS VACC 3 DOSE, ORAL	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90680	9P680	ROTOVIRUS VACC 3 DOSE, ORAL	\$163.00	<b>\$163.00</b>	75th% market	\$0.00	0.0%
90681	90681	ROTOVIRUS VACC 2 DOSE ORAL	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90681	9P681	ROTOVIRUS VACC 2 DOSE ORAL	\$163.00	<b>\$163.00</b>	75th% market	\$0.00	0.0%
90685	90685	Influenza 6-35 Mo(0.25ml Single Dose Prefill) IIV4	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90685	9P685	Influenza 6-35 Mo(0.25ml Single Dose Prefill)	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
*90686	*9068A	Influenza 3yrs And Older Preservative Free IIV4	\$29.00	<b>\$33.00</b>	Current fee	\$4.00	13.8%
90686	90686	Influenza 3yrs And Older(0.5ml Single Dose Prefil) IIV4	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90686	9P686	Influenza 3yrs And Under(0.5ml Single Dose Prefil)	\$36.00	<b>\$33.00</b>	Current fee	(\$3.00)	-8.3%
*90688	*9A688	Influenza 3yrs And Older Split Virus Quadrivalent	\$27.00	<b>\$30.00</b>	Current fee	\$3.00	11.1%
90688	9P688	Influenza 3yrs And Older Split Virus Quadrivalent	\$34.00	<b>\$34.00</b>	Current fee	\$0.00	0.0%
90696	90696	DTAP-IPV VACC 4-6 YR IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90696	9P696	DTAP-IPV VACC 4-6 YR IM	\$42.00	<b>\$42.00</b>	75th% market	\$0.00	0.0%
90698	90698	DTAP-HIB-IP VACCINE, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90698	9P698	DTAP-HIB-IP VACCINE, IM	\$163.00	<b>\$163.00</b>	75th% market	\$0.00	0.0%
90700	90700	DTAP VACCINE, < 7 YRS, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90700	9P700	DTAP VACCINE, < 7 YRS, IM	\$54.00	<b>\$54.00</b>	75th% market	\$0.00	0.0%
90702	90702	DT VACCINE < 7, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90707	90707	MMR VACCINE, SC	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90707	9P707	MMR VACCINE, SC	\$108.00	<b>\$108.00</b>	75th% market	\$0.00	0.0%
90710	90710	MMRV VACCINE, SC	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90710	9P710	MMRV VACCINE, SC	\$289.00	<b>\$289.00</b>	75th% market	\$0.00	0.0%
90713	90713	POLIOVIRUS, IPV, SC/IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90713	9P713	POLIOVIRUS, IPV, SC/IM	\$61.00	<b>\$61.00</b>	75th% market	\$0.00	0.0%
90714	90714	TD VACCINE NO PRSRV >= 7 IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90714	9P714	TD VACCINE NO PRSRV >= 7 IM	\$44.00	<b>\$44.00</b>	75th% market	\$0.00	0.0%
90714	9071A	Adult TD VACCINE NO PRSRV >= 7 IM	\$39.00	<b>\$39.00</b>	Current fee	\$0.00	0.0%
90715	907A5	Adult TDAP VACCINE > 7 IM	\$54.00	<b>\$54.00</b>	Current fee	\$0.00	0.0%
90715	90715	TDAP VACCINE > 7 IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90715	9P715	TDAP VACCINE > 7 IM	\$49.00	<b>\$49.00</b>	75th% market	\$0.00	0.0%
90716	90716	CHICKEN POX VACCINE, SC	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90716	9P716	CHICKEN POX VACCINE, SC	\$159.00	<b>\$159.00</b>	75th% market	\$0.00	0.0%
90723	90723	DTAP-HEP B-IPV VACCINE, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90723	9P723	DTAP-HEP B-IPV VACCINE, IM	\$159.00	<b>\$159.00</b>	75th% market	\$0.00	0.0%
90732	907A2	PNEUMOCOCCAL VACCINE	\$98.00	<b>\$98.00</b>	Current fee	\$0.00	0.0%
90732	90732	PNEUMOCOCCAL VACCINE	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90732	9P732	PNEUMOCOCCAL VACCINE	\$70.00	<b>\$70.00</b>	Current fee	\$0.00	0.0%
90734	90734	MENINGOCOCCAL VACCINE, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90734	9P734	MENINGOCOCCAL VACCINE, IM	\$206.00	<b>\$206.00</b>	75th% market	\$0.00	0.0%
90744	90744	HEPB VACC PED/ADOL 3 DOSE IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90744	9P744	HEPB VACC PED/ADOL 3 DOSE IM	\$75.00	<b>\$75.00</b>	75th% market	\$0.00	0.0%
90746	90746	HEP B VACCINE, ADULT, IM	\$0.00	<b>\$0.00</b>	State Vaccine	\$0.00	0.0%
90748	90748	HEP B/HIB VACCINE, IM	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
90760	90760	HYDRATION IV INFUSION, INIT	\$0.00	<b>\$0.00</b>	Current Fee	\$0.00	0.0%
90785	90785	Interactive Complexity	\$27.00	<b>\$28.00</b>	75th% market	\$1.00	3.7%
90791	90791	Psychiatric Diagnostic Evaluation	\$263.00	<b>\$265.00</b>	75th% market	\$2.00	0.8%
90792	90792	Psychiatric Diagnostic Eval With Medical Services	\$277.00	<b>\$279.00</b>	75th% market	\$2.00	0.7%
90832	90832	Psychotherapy, 30 Min. W/Pt And/or Family Member	\$110.00	<b>\$110.00</b>	75th% market	\$0.00	0.0%
90833	90833	Psychotherapy 30 Min W/pt And/or Family With E & M	\$104.00	<b>\$104.00</b>	Current fee	\$0.00	0.0%
90834	90834	Psychotherapy 45 Min. W/pt And/or Family Member	\$152.00	<b>\$153.00</b>	75th% market	\$1.00	0.7%
90837	90837	Psychotherapy 60 Min W/Pt And/or Family Member	\$225.00	<b>\$227.00</b>	75th% market	\$2.00	0.9%
90839	90839	Psychotherapy For Crisis, First 60 Minutes	\$172.00	<b>\$190.00</b>	Blue Cross rate	\$18.00	10.5%
90840	90840	Psychotherapy For Crisis, Ea. Additional 30 Min.	\$199.00	<b>\$199.00</b>	Current fee	\$0.00	0.0%
90846	90846	FAMILY PSYTX W/O PATIENT	\$171.00	<b>\$175.00</b>	75th% market	\$4.00	2.3%
90847	90847	FAMILY PSYTX W/PATIENT	\$182.00	<b>\$186.00</b>	75th% market	\$4.00	2.2%
90853	90853	GROUP PSYCHOTHERAPY	\$112.00	<b>\$112.00</b>	Current Fee	\$0.00	0.0%
92130	92130	WATER PROVOCATION TONOGRAPHY	\$0.00	<b>\$0.00</b>	Current Fee	\$0.00	0.0%
92227	92227	REMOTE IMAG FOR DETECT OF RETINAL DS	\$23.00	<b>\$23.00</b>	Current fee	\$0.00	0.0%
92228	92228	REMOTE IMAG FOR MON AND MAN OF ACTIVE RET DS	\$59.00	<b>\$59.00</b>	Current fee	\$0.00	0.0%
92250	92250	EYE EXAM WITH PHOTOS	\$131.00	<b>\$131.00</b>	Current fee	\$0.00	0.0%
93000	93000	ELECTROCARDIOGRAM, COMPLETE	\$90.00	<b>\$90.00</b>	75th% market	\$0.00	0.0%
93005	93005	ELECTROCARDIOGRAM, TRACING	\$59.00	<b>\$60.00</b>	75th% market	\$1.00	1.7%
93271	93271	ECG/MONITORING AND ANALYSIS	\$0.00	<b>\$284.00</b>	Blue Cross rate	\$284.00	100.0%
93272	93272	ECG/REVIEW, INTERPRET ONLY	\$0.00	<b>\$43.00</b>	Blue Cross rate	\$43.00	100.0%
93307	93307	ECHO EXAM OF HEART	\$0.00	<b>\$217.00</b>	Blue Cross rate	\$217.00	100.0%
94010	94010	Spirometry, Graphic Rec, Total Tmd, Flow Rate Meas	\$136.00	<b>\$153.00</b>	75th% market	\$17.00	12.5%
94150	94150	VITAL CAPACITY TEST (Peak Flow)	\$83.00	<b>\$93.00</b>	75th% market	\$10.00	12.0%
94200	94200	LUNG FUNCTION TEST (MBC/MVV)	\$0.00	<b>\$90.00</b>	75th% market	\$90.00	100.0%
94640	94640	AIRWAY INHALATION TREATMENT	\$56.00	<b>\$63.00</b>	75th% market	\$7.00	12.5%
94760	94760	MEASURE BLOOD OXYGEN LEVEL	\$40.00	<b>\$45.00</b>	75th% market	\$5.00	12.5%
94761	94761	MEASURE BLOOD OXYGEN LEVEL	\$67.00	<b>\$75.00</b>	75th% market	\$8.00	11.9%
94762	94762	MEASURE BLOOD OXYGEN LEVEL	\$0.00	<b>\$99.00</b>	75th% market	\$99.00	100.0%
96110	96110	DEVELOPMENTAL TEST, LIM	\$67.00	<b>\$68.00</b>	75th% market	\$1.00	1.5%

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<u>CPT4</u>	<u>SIM Code</u>	<u>Code Description</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Rationale for FY2016</u>	<u>Change from Current to Proposed</u>	<u>% of Change</u>
96150	96150	ASSESS HLTH/BEHAVE, INIT	\$78.00	<b>\$79.00</b>	75th% market	\$1.00	1.3%
96151	96151	ASSESS HLTH/BEHAVE, SUBSEQ	\$39.00	<b>\$39.00</b>	75th% market	\$0.00	0.0%
96152	96152	INTERVENE HLTH/BEHAVE, INDIV	\$39.00	<b>\$39.00</b>	75th% market	\$0.00	0.0%
96372	96372	Admin Of Therapeutic/prophylactic Injection	\$62.00	<b>\$64.00</b>	75th% market	\$2.00	3.2%
97802	97802	MEDICAL NUTRITION, INDIV, IN	\$0.00	<b>\$38.00</b>	75th% market	\$38.00	100.0%
97803	97803	MED NUTRITION, INDIV, SUBSEQ	\$0.00	<b>\$38.00</b>	75th% market	\$38.00	100.0%
99000	99000S	STI-SPECIMEN HANDLING	\$30.00	<b>\$30.00</b>	Current fee	\$0.00	0.0%
99024	99024	POSTOP FOLLOW-UP VISIT	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99050	99050	MEDICAL SERVICES AFTER HRS	\$0.00	<b>\$71.00</b>	75th% market	\$71.00	100.0%
99070	1262	Rocephin	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
99070	1263	Zithromax	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
99070	1299	Aldara	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
99070	1162	Terazol 3 Suppositories	\$67.00	<b>\$67.00</b>	Current fee	\$0.00	0.0%
99070	1079	Condoms	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	1171	Metrogel	\$38.00	<b>\$38.00</b>	Current fee	\$0.00	0.0%
99070	1750	Plan B	\$26.00	<b>\$26.00</b>	Current fee	\$0.00	0.0%
99070	1174	Diflucan	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
99070	1195G	Gynazole	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	0118	Ortho Cyclen	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	0121	Micronor	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	0130	OrthoTricyclen Lo	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	0139	Kelnor	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	1079	Condoms	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99070	1161	Terazol 7 Cream	\$50.00	<b>\$50.00</b>	Current fee	\$0.00	0.0%
99070	99070	SPECIAL SUPPLIES	\$0.00	<b>\$100.00</b>	Blue Cross rate	\$100.00	100.0%
99070	1184	Monistat Cream	\$25.00	<b>\$25.00</b>	Current fee	\$0.00	0.0%
99078	99078	GROUP HEALTH EDUCATION	\$0.00	<b>\$48.00</b>	Blue Cross rate	\$48.00	100.0%
99080	99080	Paper Processing Fee	\$25.00	<b>\$25.00</b>	Current fee	\$0.00	0.0%
99173	99173	VISUAL ACUITY SCREEN	\$28.00	<b>\$30.00</b>	75th% market	\$2.00	7.1%
99201	99201	OFFICE/OUTPATIENT VISIT, NEW	\$133.00	<b>\$144.00</b>	75th% market	\$11.00	8.3%
99201F	99201F	OFFICE/OUTPATIENT VISIT, NEW	\$133.00	<b>\$144.00</b>	75th% market	\$11.00	8.3%
99202	99202	OFFICE/OUTPATIENT VISIT, NEW	\$166.00	<b>\$180.00</b>	75th% market	\$14.00	8.4%
99202	99202S	OFFICE/OUTPATIENT VISIT, NEW	\$166.00	<b>\$180.00</b>	75th% market	\$14.00	8.4%
99202F	99202F	OFFICE/OUTPATIENT VISIT, NEW	\$166.00	<b>\$180.00</b>	75th% market	\$14.00	8.4%
99203	99203	OFFICE/OUTPATIENT VISIT, NEW	\$216.00	<b>\$234.00</b>	75th% market	\$18.00	8.3%
99203F	99203F	OFFICE/OUTPATIENT VISIT, NEW	\$216.00	<b>\$234.00</b>	75th% market	\$18.00	8.3%
99203s	99203S	OFFICE/OUTPATIENT VISIT, NEW	\$216.00	<b>\$234.00</b>	75th% market	\$18.00	8.3%
99204	99204	OFFICE/OUTPATIENT VISIT, NEW	\$309.00	<b>\$334.00</b>	75th% market	\$25.00	8.1%
99204F	99204F	OFFICE/OUTPATIENT VISIT, NEW	\$309.00	<b>\$334.00</b>	75th% market	\$25.00	8.1%
99205	99205	OFFICE/OUTPATIENT VISIT, NEW	\$418.00	<b>\$451.00</b>	75th% market	\$33.00	7.9%
99211	99211	OFFICE/OUTPATIENT VISIT, EST	\$81.00	<b>\$84.00</b>	75th% market	\$3.00	3.7%
99211	99211S	OFFICE/OUTPATIENT VISIT, EST	\$81.00	<b>\$84.00</b>	75th% market	\$3.00	3.7%
99211	99211T	OFFICE/OUTPATIENT VISIT, EST	\$81.00	<b>\$84.00</b>	75th% market	\$3.00	3.7%
99211F	99211F	OFFICE/OUTPATIENT VISIT, EST	\$81.00	<b>\$84.00</b>	75th% market	\$3.00	3.7%
99212	99212	OFFICE/OUTPATIENT VISIT, EST	\$115.00	<b>\$119.00</b>	75th% market	\$4.00	3.5%
99212	99212S	OFFICE/OUTPATIENT VISIT, EST	\$115.00	<b>\$119.00</b>	75th% market	\$4.00	3.5%
99212F	99212F	OFFICE/OUTPATIENT VISIT, EST	\$115.00	<b>\$119.00</b>	75th% market	\$4.00	3.5%
99213	99213	OFFICE/OUTPATIENT VISIT, EST	\$147.00	<b>\$152.00</b>	75th% market	\$5.00	3.4%
99213F	99213F	OFFICE/OUTPATIENT VISIT, EST	\$147.00	<b>\$152.00</b>	75th% market	\$5.00	3.4%
99213S	99213S	OFFICE/OUTPATIENT VISIT, EST	\$147.00	<b>\$152.00</b>	75th% market	\$5.00	3.4%
99214	99214	OFFICE/OUTPATIENT VISIT, EST	\$213.00	<b>\$220.00</b>	75th% market	\$7.00	3.3%
99214F	99214F	OFFICE/OUTPATIENT VISIT, EST	\$213.00	<b>\$220.00</b>	75th% market	\$7.00	3.3%
99215	99215	OFFICE/OUTPATIENT VISIT, EST	\$342.00	<b>\$353.00</b>	75th% market	\$11.00	3.2%
99215F	99215F	OFFICE/OUTPATIENT VISIT, EST	\$342.00	<b>\$353.00</b>	75th% market	\$11.00	3.2%
99218	99218	OBSERVATION CARE	\$230.00	<b>\$234.00</b>	75th% market	\$4.00	1.7%
99219	99219	OBSERVATION CARE	\$313.00	<b>\$318.00</b>	75th% market	\$5.00	1.6%
99221	99221	INITIAL HOSPITAL CARE	\$259.00	<b>\$261.00</b>	75th% market	\$2.00	0.8%
99222	99222	INITIAL HOSPITAL CARE	\$349.00	<b>\$351.00</b>	75th% market	\$2.00	0.6%
99223	99223	INITIAL HOSPITAL CARE	\$428.00	<b>\$431.00</b>	75th% market	\$3.00	0.7%
99231	99231	SUBSEQUENT HOSPITAL CARE	\$116.00	<b>\$119.00</b>	75th% market	\$3.00	2.6%
99232	99232	SUBSEQUENT HOSPITAL CARE	\$164.00	<b>\$168.00</b>	75th% market	\$4.00	2.4%
99233	99233	SUBSEQUENT HOSPITAL CARE	\$0.00	<b>\$229.00</b>	75th% market	\$229.00	100.0%
99234	99234	OBSERV/HOSP SAME DATE	\$318.00	<b>\$334.00</b>	75th% market	\$16.00	5.0%
99235	99235	OBSERV/HOSP SAME DATE	\$431.00	<b>\$453.00</b>	75th% market	\$22.00	5.1%
99238	99238	HOSPITAL DISCHARGE DAY	\$182.00	<b>\$183.00</b>	75th% market	\$1.00	0.5%
99241	99241	OFFICE CONSULTATION	\$194.00	<b>\$205.00</b>	75th% market	\$11.00	5.7%
99242	99242	OFFICE CONSULTATION	\$247.00	<b>\$261.00</b>	75th% market	\$14.00	5.7%
99243	99243	OFFICE CONSULTATION	\$315.00	<b>\$333.00</b>	75th% market	\$18.00	5.7%
99244	99244	OFFICE CONSULTATION	\$411.00	<b>\$435.00</b>	75th% market	\$24.00	5.8%
99251	99251	INPATIENT CONSULTATION	\$0.00	<b>\$177.00</b>	75th% market	\$177.00	100.0%
99252	99252	INPATIENT CONSULTATION	\$259.00	<b>\$268.00</b>	75th% market	\$9.00	3.5%
99253	99253	INPATIENT CONSULTATION	\$318.00	<b>\$330.00</b>	75th% market	\$12.00	3.8%
99254	99254	Inpatient Consult New/Est 80 Min.	\$398.00	<b>\$412.00</b>	75th% market	\$14.00	3.5%
99255	99255	INPATIENT CONSULTATION New/Est 110 Min	\$500.00	<b>\$518.00</b>	75th% market	\$18.00	3.6%
99354	99354	PROLONGED SERVICE, OFFICE	\$0.00	<b>\$382.00</b>	75th% market	\$382.00	100.0%

Lake County Health Department and Community Health Center  
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Effective Date of December 1, 2015

<u>CPT4</u>	<u>SIM Code</u>	<u>Code Description</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Rationale for FY2016</u>	<u>Change from Current to Proposed</u>	<u>% of Change</u>
99381	99381	INIT PM E/M, NEW PAT, INF	\$180.00	<b>\$183.00</b>	75th% market	\$3.00	1.7%
99381	99381c	INIT PM E/M, NEW PAT, INF	\$180.00	<b>\$183.00</b>	75th% market	\$3.00	1.7%
99382	99382	INIT PM E/M, NEW PAT 1-4 YRS	\$194.00	<b>\$197.00</b>	75th% market	\$3.00	1.5%
99382	99382c	INIT PM E/M, NEW PAT 1-4 YRS	\$194.00	<b>\$197.00</b>	75th% market	\$3.00	1.5%
99383	99383	PREV VISIT, NEW, AGE 5-11	\$207.00	<b>\$211.00</b>	75th% market	\$4.00	1.9%
99383	99383c	PREV VISIT, NEW, AGE 5-11	\$207.00	<b>\$211.00</b>	75th% market	\$4.00	1.9%
99383F	99383F	Prev Visit, New Age 5-11	\$207.00	<b>\$211.00</b>	75th% market	\$4.00	1.9%
99384	99384	PREV VISIT, NEW, AGE 12-17	\$221.00	<b>\$225.00</b>	75th% market	\$4.00	1.8%
99384F	99384F	PREV VISIT, NEW, AGE 12-17	\$221.00	<b>\$225.00</b>	75th% market	\$4.00	1.8%
99385	99385	PREV VISIT, NEW, AGE 18-39	\$300.00	<b>\$305.00</b>	75th% market	\$5.00	1.7%
99385F	99385F	PREV VISIT, NEW, AGE 18-39	\$300.00	<b>\$305.00</b>	75th% market	\$5.00	1.7%
99386	99386	PREV VISIT, NEW, AGE 40-64	\$327.00	<b>\$333.00</b>	75th% market	\$6.00	1.8%
99386F	99386F	PREV VISIT, NEW, AGE 40-64	\$327.00	<b>\$333.00</b>	75th% market	\$6.00	1.8%
99387	99387	INIT PM E/M, NEW PAT 65+ YRS	\$369.00	<b>\$376.00</b>	75th% market	\$7.00	1.9%
99391	99391	PER PM REEVAL, EST PAT, INF	\$147.00	<b>\$150.00</b>	75th% market	\$3.00	2.0%
99391	99391c	PER PM REEVAL, EST PAT, INF	\$147.00	<b>\$150.00</b>	75th% market	\$3.00	2.0%
99392	99392	PREV VISIT, EST, AGE 1-4	\$157.00	<b>\$160.00</b>	75th% market	\$3.00	1.9%
99392	99392C	PREV VISIT, EST, AGE 1-4	\$157.00	<b>\$160.00</b>	75th% market	\$3.00	1.9%
99393	99393	PREV VISIT, EST, AGE 5-11	\$171.00	<b>\$174.00</b>	75th% market	\$3.00	1.8%
99393	99393F	PREV VISIT, EST, AGE 5-11	\$171.00	<b>\$174.00</b>	75th% market	\$3.00	1.8%
99393	99393c	PREV VISIT, EST, AGE 5-11	\$171.00	<b>\$174.00</b>	75th% market	\$3.00	1.8%
99394	99394F	PREV VISIT, EST, AGE 12-17	\$184.00	<b>\$188.00</b>	75th% market	\$4.00	2.2%
99394	99394	PREV VISIT, EST, AGE 12-17	\$184.00	<b>\$188.00</b>	75th% market	\$4.00	2.2%
99395	99395	PREV VISIT, EST, AGE 18-39	\$249.00	<b>\$253.00</b>	75th% market	\$4.00	1.6%
99395	99395F	PREV VISIT, EST, AGE 18-39	\$249.00	<b>\$253.00</b>	75th% market	\$4.00	1.6%
99396	99396	PREV VISIT, EST, AGE 40-64	\$272.00	<b>\$277.00</b>	75th% market	\$5.00	1.8%
99396F	99396F	PREV VISIT, EST, AGE 40-64	\$272.00	<b>\$277.00</b>	75th% market	\$5.00	1.8%
99397	99397	PER PM REEVAL EST PAT 65+ YR	\$309.00	<b>\$314.00</b>	75th% market	\$5.00	1.6%
99401	RC2	RC Contraception	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC7	RC Preconception	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	NUTRI	Nutrition Visit Initial	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
99401	RC1	RC Sterilization	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC10	RC HIV Education	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC14	RC Abstinence < 18	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC2	RC Contraception	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC5	RC STD Education	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	BC2	Billable Counseling	\$78.00	<b>\$80.00</b>	75th% market	\$2.00	2.6%
99401	NUTRF	Nutrition Visit Follow Up	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
99401	RC3	RC Infertility	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC4	RC Pregnancy Options	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC6	RC FAM	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC8	RC Other Medical	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC13	RC Relationship Safety < 18	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC5	RC STD Education	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC9	RC Other Social Services	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	99401	PREVENTIVE COUNSELING, INDIV	\$78.00	<b>\$80.00</b>	75th% market	\$2.00	2.6%
99401	RC7	RC Preconception	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC10	RC HIV Education	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC15	RC Emergency Contraceptive Counseling	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC5	RC STD Education	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC11	RC Abnormal PAP	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99401	RC12	RC Encourage Parent/Guardian Invol. < 18	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
99402	99402	PREVENTIVE COUNSELING, INDIV	\$0.00	<b>\$155.00</b>	75th% market	\$155.00	100.0%
99404	BC1	Billable Counseling Indepth 1hr.	\$300.00	<b>\$305.00</b>	75th% market	\$5.00	1.7%
99408	99408	AUDIT/DAST, 15-30 MIN	\$0.00	<b>\$113.00</b>	75th% market	\$113.00	100.0%
99420	99420	HEALTH RISK ASSESSMENT TEST	\$18.00	<b>\$30.00</b>	Medicaid + 1	\$12.00	66.7%
99999	99999	LEFT W/O BEING SEEN	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
A4267	A4267	Male condom	\$0.00	<b>\$0.00</b>	Medicaid + 1	\$0.00	0.0%
A4550	A4550	Surgical trays	\$0.00	<b>\$68.00</b>	75th% market	\$68.00	100.0%
A4561	A4561	Pessary rubber, any type	\$75.00	<b>\$77.00</b>	75th% market	\$2.00	2.7%
A4562	A4562	Pessary, non rubber,any type	\$95.00	<b>\$100.00</b>	75th% market	\$5.00	5.3%
A4719	A4719	'Y set' tubing	\$0.00	<b>\$131.00</b>	75th% market	\$131.00	100.0%
BC3	BC3	Billable Counseling	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
CBE	Breast	Clinical Breast Exam	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
CVO	CVO	Counselor Visit Only	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D0120	D0120	Periodic oral evaluation	\$55.00	<b>\$57.00</b>	75th% market	\$2.00	3.6%
D0140	D0140	Limited oral evaluation-problem focused	\$93.00	<b>\$95.00</b>	75th% market	\$2.00	2.2%
D0150	D0150	Comprehensive oral evaluation-new or established P	\$98.00	<b>\$100.00</b>	75th% market	\$2.00	2.0%
D0190	D0190	Screening Of A Patient	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D0191	D0191	Assessment Of A Patient	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D0210	D0210	Intraoral-complete series (including bitewings)	\$151.00	<b>\$152.00</b>	75th% market	\$1.00	0.7%
D0220	D0220	Intraoral-periapical first film	\$30.00	<b>\$30.00</b>	75th% market	\$0.00	0.0%
D0230	D0230	Intraoral-periapical each additional film	\$27.00	<b>\$27.00</b>	75th% market	\$0.00	0.0%
D0270	D0270	Bitewing Single Film	\$31.00	<b>\$32.00</b>	75th% market	\$1.00	3.2%
D0272	D0272	Bitewings-two films	\$50.00	<b>\$51.00</b>	75th% market	\$1.00	2.0%

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

<b>CPT4</b>	<b>SIM Code</b>	<b>Code Description</b>	<b>Current Fee</b>	<b>Proposed Fee</b>	<b>Rationale for FY2016</b>	<b>Change from Current to Proposed</b>	<b>% of Change</b>
D0274	D0274	Bitewings-four films	\$70.00	<b>\$71.00</b>	75th% market	\$1.00	1.4%
D0330	D0330	Panoramic film	\$134.00	<b>\$137.00</b>	75th% market	\$3.00	2.2%
D0999	D0999	Medicaid Dental Encounter Rate	\$103.60	<b>\$103.60</b>	Current fee	\$0.00	0.0%
D1110	D1110	Prophylaxis-adult	\$102.00	<b>\$105.00</b>	75th% market	\$3.00	2.9%
D1120	D1120	Prophylaxis-child	\$71.00	<b>\$72.00</b>	75th% market	\$1.00	1.4%
D1206	D1206	Top Fluoride Varnish;TX Appl Mod	\$60.00	<b>\$61.00</b>	75th% market	\$1.00	1.7%
D1208	D1208	Topical Application Of Fluoride	\$40.00	<b>\$41.00</b>	75th% market	\$1.00	2.5%
D1310	D1310	Nutrition Counseling For Control Of Dental Disease	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D1320	D1320	Tobacco Couns For Control/ Prev Of Oral Disease	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D1330	D1330	Oral Hygiene Instructions	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D1351	D1351	Sealant-per tooth	\$61.00	<b>\$63.00</b>	75th% market	\$2.00	3.3%
D1510	D1510	Space maintainer-fixed-unilateral	\$365.00	<b>\$373.00</b>	75th% market	\$8.00	2.2%
D2140	D2140	Amalgam-one surface, primary or permanent	\$156.00	<b>\$161.00</b>	75th% market	\$5.00	3.2%
D2150	D2150	Amalgam-two surfaces, primary or permanent	\$202.00	<b>\$208.00</b>	75th% market	\$6.00	3.0%
D2160	D2160	Amalgam-three surfaces, primary or permanent	\$245.00	<b>\$252.00</b>	75th% market	\$7.00	2.9%
D2161	D2161	Amalgam-four or more surfaces, primary or permanen	\$298.00	<b>\$307.00</b>	75th% market	\$9.00	3.0%
D2330	D2330	Resin-based composite - one surface, anterior	\$171.00	<b>\$175.00</b>	75th% market	\$4.00	2.3%
D2331	D2331	Resin-based composite - two surfaces, anterior	\$219.00	<b>\$223.00</b>	75th% market	\$4.00	1.8%
D2332	D2332	Resin-based composite - three surfaces, anterior	\$268.00	<b>\$273.00</b>	75th% market	\$5.00	1.9%
D2335	D2335	Resin-based composite - four or more surfaces or I	\$317.00	<b>\$323.00</b>	75th% market	\$6.00	1.9%
D2391	D2391	Resin Based Composite One Surface	\$201.00	<b>\$205.00</b>	75th% market	\$4.00	2.0%
D2392	D2392	Resin-based composite - two surfaces, posterior	\$263.00	<b>\$268.00</b>	75th% market	\$5.00	1.9%
D2393	D2393	Resin Based Composite 3 Surface	\$326.00	<b>\$333.00</b>	75th% market	\$7.00	2.1%
D2394	D2394	Resin Based Composite 4 Surface	\$400.00	<b>\$408.00</b>	75th% market	\$8.00	2.0%
D2740	D2740	Crown - Porcelain/Ceramic	\$1,297.00	<b>\$1,321.00</b>	75th% market	\$24.00	1.9%
D2750	D2750	Crown-porcelain Fused To High Noble Metal	\$1,280.00	<b>\$1,303.00</b>	75th% market	\$23.00	1.8%
D2751	D2751	Crown-porcelain Fused To Predominately Base Metal	\$1,192.00	<b>\$1,213.00</b>	75th% market	\$21.00	1.8%
D2752	D2752	Crown-porcelain Fused To Noble Metal	\$1,221.00	<b>\$1,243.00</b>	75th% market	\$22.00	1.8%
D2920	D2920	Recement crown	\$118.00	<b>\$120.00</b>	75th% market	\$2.00	1.7%
D2940	D2940	Sedative filling	\$123.00	<b>\$125.00</b>	75th% market	\$2.00	1.6%
D2950	D2950	Core buildup, including any pins	\$307.00	<b>\$312.00</b>	75th% market	\$5.00	1.6%
D2954	D2954	Prefabricated post and core in addition to crown	\$388.00	<b>\$394.00</b>	75th% market	\$6.00	1.5%
D2970	D2970	Temporary Crown	\$291.00	<b>\$296.00</b>	75th% market	\$5.00	1.7%
D3110	D3110	Pulp cap-direct (excluding final restoration)	\$112.00	<b>\$114.00</b>	75th% market	\$2.00	1.8%
D3120	D3120	Pulp Cap Indirect Excluding Final Rest.	\$89.00	<b>\$91.00</b>	75th% market	\$2.00	2.2%
D3220	D3220	Therapeutic pulpotomy-(excluding final restoration	\$229.00	<b>\$234.00</b>	75th% market	\$5.00	2.2%
D3221	D3221	Pulpal debridement, primary and permanent teeth	\$251.00	<b>\$256.00</b>	75th% market	\$5.00	2.0%
D3310	D3310	Anterior (excluding final restoration)	\$842.00	<b>\$863.00</b>	75th% market	\$21.00	2.5%
D3320	D3320	Bicuspid (excluding final restoration)	\$1,032.00	<b>\$1,057.00</b>	75th% market	\$25.00	2.4%
D3330	D3330	Molar (excluding final restoration)	\$1,280.00	<b>\$1,311.00</b>	75th% market	\$31.00	2.4%
D3347	D3347	Retreatment Of RTC Bicuspid	\$1,321.00	<b>\$1,353.00</b>	75th% market	\$32.00	2.4%
D3999	D3999	Unspecified Endodontic Procedure	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D3999	D399F	Unspecified Endodontic Procedure	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D4211	D4211	Gingivectomy	\$317.00	<b>\$334.00</b>	75th% market	\$17.00	5.4%
D4341	D4341	Periodontal scaling and root planing-four or more	\$265.00	<b>\$268.00</b>	75th% market	\$3.00	1.1%
D4342	D4342	Periodonatal Scaling	\$154.00	<b>\$155.00</b>	75th% market	\$1.00	0.6%
D4355	D4355	Subgingival Plaque/Calculus	\$182.00	<b>\$183.00</b>	75th% market	\$1.00	0.5%
D4910	D4910	Periodontal maintenance	\$163.00	<b>\$165.00</b>	75th% market	\$2.00	1.2%
D500B	D500B	Occlusal Records - Wax Bite	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D500C	D500C	Crown Cementation	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D500D	D500D	Denture Delivery	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D500I	D500I	Final Impression	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D500T	D500T	Wax Tryin	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D5110	D5110	Complete denture-maxillary	\$1,754.00	<b>\$1,806.00</b>	75th% market	\$52.00	3.0%
D5120	D5120	Complete denture-mandibular	\$1,764.00	<b>\$1,806.00</b>	75th% market	\$42.00	2.4%
D5130	D5130	Immediate denture-maxillary	\$1,923.00	<b>\$1,969.00</b>	75th% market	\$46.00	2.4%
D5211	D5211	Maxillary partial denture-resin base (including an	\$1,489.00	<b>\$1,524.00</b>	75th% market	\$35.00	2.4%
D5212	D5212	Mandibular partial denture-resin base (including)	\$1,730.00	<b>\$1,771.00</b>	75th% market	\$41.00	2.4%
D5213	D5213	Maxillary partial denture-cast metal framework wit	\$1,949.00	<b>\$1,995.00</b>	75th% market	\$46.00	2.4%
D5214	D5214	Mandibular partial denture-cast metal framework wi	\$1,949.00	<b>\$1,995.00</b>	75th% market	\$46.00	2.4%
D5225	D5225	Maxillary Partial Denture - Flexible Base	\$1,489.00	<b>\$1,524.00</b>	75th% market	\$35.00	2.4%
D5226	D5226	Mandibular Partial Denture- Flexible Base	\$1,730.00	<b>\$1,771.00</b>	75th% market	\$41.00	2.4%
D5410	D5410	Adjust complete denture-maxillary	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D5410	D510M	Adjust complete denture-maxillary made elsewhere	\$97.00	<b>\$99.00</b>	75th% market	\$2.00	2.1%
D5411	D511M	Adjust Complee Denture-Mandibular made elsewhere	\$97.00	<b>\$99.00</b>	75th% market	\$2.00	2.1%
D5411	D5411	Adjust Complete Denture-Mandibular	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D5421	D521M	Adjust Partial Denture-Maxillary made elsewhere	\$97.00	<b>\$99.00</b>	75th% market	\$2.00	2.1%
D5421	D5421	Adjust Partial Denture-Maxillary	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D5422	D5422	Adjust Partial Denture-Mandibular	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D5510	D5510	Repair broken complete denture base	\$193.00	<b>\$198.00</b>	75th% market	\$5.00	2.6%
D5520	D5520	Replace missing or broken teeth-complete denture (	\$161.00	<b>\$165.00</b>	75th% market	\$4.00	2.5%
D5610	D5610	Repair resin denture base	\$209.00	<b>\$214.00</b>	75th% market	\$5.00	2.4%
D5630	D5630	Repair or replace broken clasp	\$274.00	<b>\$280.00</b>	75th% market	\$6.00	2.2%
D5640	D5640	Replace broken teeth-per tooth	\$177.00	<b>\$181.00</b>	75th% market	\$4.00	2.3%
D5650	D5650	Add tooth to existing partial denture	\$241.00	<b>\$247.00</b>	75th% market	\$6.00	2.5%

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

CPT4	SIM Code	Code Description	Current Fee	Proposed Fee	Rationale for FY2016	Change from Current to Proposed	% of Change
D5750	D5750	Reline complete maxillary denture (laboratory)	\$539.00	<b>\$552.00</b>	75th% market	\$13.00	2.4%
D5751	D5751	Reline Complete Mandibular Denture	\$539.00	<b>\$552.00</b>	75th% market	\$13.00	2.4%
D5760	D5760	Reline maxillary partial denture (laboratory)	\$531.00	<b>\$544.00</b>	75th% market	\$13.00	2.4%
D5761	D5761	Reline Mandibular Partial Denture	\$380.00	<b>\$544.00</b>	75th% market	\$164.00	43.2%
D5820	D5820	Interim partial denture (maxillary)	\$660.00	<b>\$675.00</b>	75th% market	\$15.00	2.3%
D5821	D5821	Interim Partial Denture (Mand.)	\$700.00	<b>\$717.00</b>	75th% market	\$17.00	2.4%
D5899	D5899	Unspecified removable prosthodontic procedure,by R	\$96.00	<b>\$96.00</b>	Current fee	\$0.00	0.0%
D6930	D6930	Recement Bridge	\$171.00	<b>\$176.00</b>	75th% market	\$5.00	2.9%
D7000	D7000	Dental Suture Removal	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D7140	D7140	Extraction, erupted tooth or exposed root (elevati	\$205.00	<b>\$206.00</b>	75th% market	\$1.00	0.5%
D7210	D7210	Surgical removal of erupted tooth requiring elevat	\$337.00	<b>\$345.00</b>	75th% market	\$8.00	2.4%
D7220	D7220	Removal of impacted tooth-soft tissue	\$423.00	<b>\$433.00</b>	75th% market	\$10.00	2.4%
D7230	D7230	Removal of impacted tooth-partially bony	\$563.00	<b>\$576.00</b>	75th% market	\$13.00	2.3%
D7240	D7240	Removal of impacted tooth-completely bony	\$497.00	<b>\$677.00</b>	75th% market	\$180.00	36.2%
D7286	D7286	Biopsy of oral tissue-soft	\$543.00	<b>\$574.00</b>	75th% market	\$31.00	5.7%
D7310	D7310	Alveoloplasty in conjunction with extractions-per	\$644.00	<b>\$408.00</b>	75th% market	(\$236.00)	-36.6%
D7510	D7510	Incision and drainage of abscess-intraoral soft ti	\$692.00	<b>\$439.00</b>	75th% market	(\$253.00)	-36.6%
D9110	D9110	Palliative (emergency) treatment of dental pain-mi	\$129.00	<b>\$140.00</b>	75th% market	\$11.00	8.5%
D9120	D9120	Fixed Partial Denture Sectioning	\$97.00	<b>\$158.00</b>	75th% market	\$61.00	62.9%
D9310	D9310	Consultation (diagnostic service provided by denti	\$128.00	<b>\$135.00</b>	75th% market	\$7.00	5.5%
D9430	D9430	Office Visit Observation - No Other Procedure	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
D9910	D9910	Application Of Desensitizing Medicament	\$44.00	<b>\$72.00</b>	75th% market	\$28.00	63.6%
D9911	D9911	Application Of Desensitizing Resin For Cervical An	\$61.00	<b>\$100.00</b>	75th% market	\$39.00	63.9%
D9930	D9930	Treatment Of Complications (post Surgical)	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
D9940	D9940	Occlusal Night Guard	\$589.00	<b>\$594.00</b>	75th% market	\$5.00	0.8%
D9951	D9951	Occlusal Adjustment-limited	\$173.00	<b>\$174.00</b>	75th% market	\$1.00	0.6%
DEPO1	DEPO1	Prescription DEPO (Pt Supplied)	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
DTXCP	DTXCP	Comp Tx Plan Completed	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
DTXIN	DTXIN	Comp Tx Plan Initiated	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
DTXIP	DTXIP	Comp Tx Plan In Process	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
G0003	G0003	Non DUI Assessment	\$40.00	<b>\$40.00</b>	Current fee	\$0.00	0.0%
*G0008	*G0008	Admin influenza virus vac	\$23.00	<b>\$38.00</b>	75th% market	\$15.00	65.2%
*G0009	*G0009	Admin pneumococcal vaccine	\$35.00	<b>\$50.00</b>	75th% market	\$15.00	42.9%
G0010	G0010	Admin hepatitis b vaccine	\$0.00	<b>\$50.00</b>	75th% market	\$50.00	100.0%
G0101	G0101	CA screen;pelvic/breast exam	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
G0108	G0108	Diab manage trn per indiv	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
G0466	G0466	FQHC Visit, New Patient	\$212.00	<b>\$273.60</b>	Medicare FQHC	\$61.60	29.1%
G0467	G0467	FQHC Visit, Established Patient	\$157.00	<b>\$172.04</b>	Medicare FQHC	\$15.04	9.6%
G0468	G0468	FQHC Visit, IPPE Or AWW	\$309.00	<b>\$224.00</b>	Medicare FQHC	(\$85.00)	-27.5%
G0469	G0469	FQHC Visit, Mental Health, New Patient	\$168.00	<b>\$279.00</b>	Medicare FQHC	\$111.00	66.1%
G0470	G0470	FQHC Visit, Mental Health, Est. Patient	\$168.00	<b>\$219.46</b>	Medicare FQHC	\$51.46	30.6%
G8053	G8053	Pt inelig for osteopor meas	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
G8553	G8553	Prescriptions Gen & Trans Via A Qual ERX System	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
H0001	H0001	Ach/Drug Assessment	\$90.00	<b>\$165.00</b>	75th% market	\$75.00	83.3%
H0002HE	H0002HE	LOCUS Assessment	\$72.00	<b>\$72.00</b>	Current fee CMH	\$0.00	0.0%
H0004	H0004	BH Counseling and Therapy,Fam, Per 15 Mins	\$23.00	<b>\$23.00</b>	Current fee CMH	\$0.00	0.0%
H0004	H0004Z	Methadone Individual Counseling and Therapy, per 15 M	\$0.00	<b>\$0.00</b>	DASA billing requirement	\$0.00	0.0%
H0004	H0004GZ	Methadone Group Counseling and Therapy, per 15 M	\$0.00	<b>\$0.00</b>	DASA billing requirement	\$0.00	0.0%
H0004HO	H0004HO	BH Counseling And Therapy, Ind, Per 15 Mins	\$28.00	<b>\$28.00</b>	Current fee	\$0.00	0.0%
H0004HO	H0004HO	BH Counseling And Therapy, Ind, Per 15 Mins	\$28.00	<b>\$28.00</b>	Current fee	\$0.00	0.0%
H0004HOHQ	H0004HOHQ	BH Counseling And Therapy 15 Minutes	\$15.00	<b>\$15.00</b>	Current fee CMH	\$0.00	0.0%
H0004HOHQ	H0004HOHQ	BH Counseling And Therapy 15 Minutes	\$15.00	<b>\$15.00</b>	Current fee CMH	\$0.00	0.0%
H0004HOHR	H0004HOHR	BH Counseling And Therapy, Fam, Per 15 Mins	\$28.00	<b>\$28.00</b>	Current fee	\$0.00	0.0%
H0004HQ	H0004HQ	BH Counseling And Therapy, Grp, Per 15 Mins	\$15.00	<b>\$15.00</b>	Current fee CMH	\$0.00	0.0%
H0004HR	H0004HR	BH Counseling And Therapy, Fam, Per 15 Mins	\$23.00	<b>\$23.00</b>	Current fee CMH	\$0.00	0.0%
H0005	H0005	Ach/Drug services Group Counseling by Clinician	\$10.00	<b>\$10.00</b>	75th% market	\$0.00	0.0%
H0006	H0006	Ach/Drug services Case Management	\$0.00	<b>\$1.00</b>	75th% market	\$1.00	100.0%
H0010	H0010	Alcohol and/or drug services	\$350.00	<b>\$350.00</b>	Current fee	\$0.00	0.0%
H0010	HAT10	ATP Detox (Residential IP)	\$300.00	<b>\$300.00</b>	Current fee	\$0.00	0.0%
H0011	H0011	Ach/Drug services Acute Detoxification (Residentia	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
H0030	H0030	Alcohol and/or drug hotline	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
H0031	H0031	MH Health Assess by Non-MD	\$48.00	<b>\$48.00</b>	Current fee CMH	\$0.00	0.0%
H0031	H0031DS	MH Health Discharge Assess by Non-MD Per 15 Mins	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031	H0031IN	MH Health Assess by Non-MD, Per 15 Mins	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031	H0031	MH Health Assess by Non-MD	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031HN	H0031HN	Mental Health Assessment By Non MD	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031HO	H0031HO	Mental Health Assessment By Non MD	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031TG	H0031TG	Mental Health Assessment By Non MD	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0031TG	H0031TG	Mental Health Assessment By Non MD	\$48.00	<b>\$48.00</b>	75th% market	\$0.00	0.0%
H0032	H0032	MH svc plan dev by non-md	\$32.00	<b>\$32.00</b>	Current fee	\$0.00	0.0%
H0032HN	H0032HN	MH SVC Plan Dev By Non MD	\$27.00	<b>\$27.00</b>	Current fee CMH	\$0.00	0.0%
H0033	H0033	Oral Med Adm Direct Observe	\$0.00	<b>\$0.00</b>	Medicaid + 1	\$0.00	0.0%
H0034	H0034	Med training & Support Per 15 min	\$32.00	<b>\$32.00</b>	Current fee	\$0.00	0.0%
H0039	H0039	Assert Com Tx Face-Face 15 Min	\$47.00	<b>\$47.00</b>	Current fee	\$0.00	0.0%
H0039HQ	H0039HQ	Assertive Commtty TX Face-To-Face, Grp, Per 15 Min	\$15.00	<b>\$13.00</b>	75th% market	(\$2.00)	-13.3%

Lake County Health Department and Community Health Center  
Proposed Fees for Medical, Behavioral Health and Dental Services  
Effective Date of December 1, 2015

<b>CPT4</b>	<b>SIM Code</b>	<b>Code Description</b>	<b>Current Fee</b>	<b>Proposed Fee</b>	<b>Rationale for FY2016</b>	<b>Change from Current to Proposed</b>	<b>% of Change</b>
H0040	H0040	Assert comm tx pgm per diem	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
H0047	HCH47	WRS Children NOS	\$52.00	<b>\$65.00</b>	75th% market	\$13.00	25.0%
H0047	H0047	Alcohol/drug abuse svc nos	\$200.00	<b>\$200.00</b>	Current fee	\$0.00	0.0%
H0047	HAT47	Alcohol/Drug Abuse Service NOS	\$200.00	<b>\$200.00</b>	Current fee	\$0.00	0.0%
H0047	HAT47W	Alcohol/Drug Abuse Service NOS	\$225.00	<b>\$225.00</b>	Current fee	\$0.00	0.0%
H1000	H1000	Prenatal care atrisk assessm	\$100.00	<b>\$100.00</b>	75th% market	\$0.00	0.0%
H2000	H2000	Comp multidisipln evaluation	\$0.00	<b>\$315.00</b>	75th% market	\$315.00	100.0%
H2010	H2010	Comprehensive Medication Service Per 15min	\$105.00	<b>\$105.00</b>	Current fee	\$0.00	0.0%
H2011	H2011	Crisis interven svc, 15 min	\$50.00	<b>\$50.00</b>	Current fee	\$0.00	0.0%
H2015HEHN	H2015HEHN	Comprehensive Communitiy, Ind, Per 15 Mins	\$29.00	<b>\$29.00</b>	Current fee	\$0.00	0.0%
H2015HEHO	H2015HEHO	Comprehensive Community Ind, Per 15 Mins	\$29.00	<b>\$29.00</b>	Current fee	\$0.00	0.0%
H2015HM	H2015HM	Comprehensive Community Support Ind, Per 15 Mins	\$29.00	<b>\$29.00</b>	Current fee	\$0.00	0.0%
H2015HN	H2015HN	Comprehensive Community Ind, Per 15 Mins	\$29.00	<b>\$29.00</b>	Current fee	\$0.00	0.0%
H2015HO	H2015HO	Comprehensive Community Support Ind,Per 15 Mins	\$29.00	<b>\$29.00</b>	Current fee	\$0.00	0.0%
H2015QEM	H2015QEM	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	Current fee CMH	\$0.00	0.0%
H2015QEN	H2015QEN	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	75th% market	\$0.00	0.0%
H2015QEO	H2015QEO	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	75th% market	\$0.00	0.0%
H2015QHM	H2015QHM	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	75th% market	\$0.00	0.0%
H2015QHN	H2015QHN	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	75th% market	\$0.00	0.0%
H2015QHO	H2015QHO	Comprehensive Community Support, Grp, 15 Mins	\$19.00	<b>\$19.00</b>	75th% market	\$0.00	0.0%
H2030	H2030	MH clubhouse svc, per 15 min	\$0.00	<b>\$4.00</b>	75th% market	\$4.00	100.0%
J0456	J0456	Azithromycin	\$0.00	<b>\$75.00</b>	75th% market	\$75.00	100.0%
J0560	J0560	Penicillin g benzathine inj	\$0.00	<b>\$10.00</b>	75th% market	\$10.00	100.0%
J0696	J0696	Ceftriaxone sodium injection, 250 Mg	\$0.00	<b>\$30.00</b>	75th% market	\$30.00	100.0%
J1030	J1030	Methylprednisolone 40 MG inj	\$0.00	<b>\$20.00</b>	75th% market	\$20.00	100.0%
J1050	J1050A	Depo Provera (Patient Supplied)	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
J1050	J1050	Depo Provera, 1mg (Office Supplied)	\$0.43	<b>\$0.28</b>	Medicaid + 1	(\$0.15)	-34.9%
J1050	DEPOA	Depo Provera, 1mg (Office Supplied)	\$0.43	<b>\$0.28</b>	Medicaid + 1	(\$0.15)	-34.9%
J1051	J1051	Medroxyprogesterone inj	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
J1055	J1055	Medrxypogester acetate inj	\$65.00	<b>\$65.00</b>	Current fee	\$0.00	0.0%
J1055	J1055	Medrxypogester acetate inj	\$65.00	<b>\$65.00</b>	Current fee	\$0.00	0.0%
J1815	J1815	Insulin injection	\$0.00	<b>\$10.00</b>	Medicaid + 1	\$10.00	100.0%
J1885	J1885	Ketorolac tromethamine inj	\$0.00	<b>\$18.00</b>	75th% market	\$18.00	100.0%
J2675	J2675	Inj progesterone per 50 MG	\$10.00	<b>\$39.00</b>	75th% market	\$29.00	290.0%
J2790	J2790	Rho d immune globulin inj	\$0.00	<b>\$205.00</b>	75th% market	\$205.00	100.0%
J3420	J3420	Vitamin b12 injection	\$0.00	<b>\$18.00</b>	75th% market	\$18.00	100.0%
J7300	J7300	Intraud copper contraceptive	\$430.00	<b>\$740.00</b>	Medicaid + 1	\$310.00	72.1%
J7300	0719	Paraguard Free	\$0.00	<b>\$0.00</b>	Medicaid + 1	\$0.00	100.0%
J7300	0760	Para Guard IUD	\$430.00	<b>\$739.00</b>	Medicaid + 1	\$309.00	71.9%
J7302	J7302	Levonorgestrel iu contracept	\$430.00	<b>\$811.00</b>	Medicaid + 1	\$381.00	88.6%
J7302	1999	IUS/Mirena	\$430.00	<b>\$811.00</b>	Medicaid + 1	\$381.00	88.6%
J7302	1919	IUS/Mirena, Free	\$0.00	<b>\$0.00</b>	Medicaid + 1	\$0.00	0.0%
J7303	2199	Vaginal Ring	\$85.00	<b>\$85.00</b>	current fee	\$0.00	0.0%
J7304	2099	Hormonal Patch	\$38.00	<b>\$38.00</b>	current fee	\$0.00	0.0%
J7307	J7307	Nexplanon/Implanon	\$515.00	<b>\$773.00</b>	Medicaid + 1	\$258.00	50.1%
J7307	1595	Nexplanon/Implanon	\$515.00	<b>\$773.00</b>	Medicaid + 1	\$258.00	50.1%
J7307	1519	Etonogestrel implant system -	\$0.00	<b>\$773.00</b>	Medicaid + 1	\$773.00	100.0%
J7610	J7610	Albuterol comp con	\$0.00	<b>\$20.00</b>	75th% market	\$20.00	100.0%
J7611	J7611	Albuterol non-comp con	\$0.00	<b>\$2.00</b>	75th% market	\$2.00	100.0%
J7613	J7613	Albuterol non-comp unit, 1 Mg	\$10.00	<b>\$10.00</b>	75th% market	\$0.00	0.0%
J7620	J7620	Albuterol ipratrop non-comp	\$0.00	<b>\$13.00</b>	75th% market	\$13.00	100.0%
LND	LND	Lab Not Drawn	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
Meth-MT1	Meth-MT1	Meth Medication Visit 1 X Wk. or 1 X Mo.	\$70.00	<b>\$70.00</b>	Current fee	\$0.00	0.0%
Meth-23	Meth-23	Meth Medication Visits 2-3 X wk.	\$80.00	<b>\$80.00</b>	Current fee	\$0.00	0.0%
Meth-456	Meth-456	Meth Medication Visits 4 to 6 X wk.	\$95.00	<b>\$95.00</b>	Current fee	\$0.00	0.0%
NVO	NVO	Nurse Visit Only	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
Q0144	Q0144	Azithromycin dihydrate, oral	\$0.00	<b>\$50.00</b>	75th% market	\$50.00	100.0%
*Q2035	*Q2A35	ALFURIA VACC, 19 YRS & OLDER, IM IIV3	\$30.00	<b>\$30.00</b>	Current fee	\$0.00	0.0%
*Q2036	*Q2A36	FLUVAVAL VACC, 19 YRS & OLDER, IM IIV3	\$30.00	<b>\$30.00</b>	Current fee	\$0.00	0.0%
Q2037	Q2037	FLUVIRIN VACC, 4-18 YRS, IM IIV3	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
*Q2037	*Q2A37	FLUVIRIN VACC, 19 YRS & OLDER, IM	\$30.00	<b>\$33.00</b>	Population Health	\$3.00	10.0%
*Q2038	*Q2A38	FLUZONEVACC, 19 YRS & OLDER, IM IIV3	\$30.00	<b>\$33.00</b>	Population Health	\$3.00	10.0%
Q2038	Q2038	FLUZONEVACC, 3-18 YRS, IM IIV3	\$16.00	<b>\$23.00</b>	Allowable VFC	\$7.00	43.8%
S0104	S0104	Zidovudine, oral, 100 mg	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
S0108	S0108	Mercaptopurine 50 mg	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
S0109	S0109	Methadone oral 5mg	\$5.00	<b>\$5.00</b>	75th% market	\$0.00	0.0%
S0630	S0630	REMOVAL OF SUTURES	\$0.00	<b>\$132.00</b>	Blue Cross rate	\$132.00	100.0%
S4993	0121A	Micronor	\$35.00	<b>\$46.00</b>	75th% market	\$11.00	31.4%
S4993	S4993	Contraceptive pills for bc	\$0.00	<b>\$46.00</b>	75th% market	\$46.00	100.0%
S4993	0139A	Kelnor	\$35.00	<b>\$46.00</b>	75th% market	\$11.00	31.4%
S4993	0130A	Tricyclen Lo	\$35.00	<b>\$46.00</b>	75th% market	\$11.00	31.4%
S4993	0118A	Ortho Cyclen	\$35.00	<b>\$46.00</b>	75th% market	\$11.00	31.4%
S9986	W00S3	Crisis Intervention - UnReg	\$0.00	<b>\$0.00</b>	Current fee	\$0.00	0.0%
S9986	W00R4	Residential Serv Prgm 830 Group Home	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
S9986	W00R1	Residential Serv Prgm 620 CILA	\$1.00	<b>\$1.00</b>	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, 2015

<u>CPT4</u>	<u>SIM Code</u>	<u>Code Description</u>	<u>Current Fee</u>	<u>Proposed Fee</u>	<u>Rationale for FY2016</u>	<u>Change from Current to Proposed</u>	<u>% of Change</u>
S9986	W00R5	Residential Serv Prgm 860 Crisis Respite	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
S9986	W00R2	Residential Serv Prgm 820 Scat Apts	\$1.00	<b>\$1.00</b>	Current fee	\$0.00	0.0%
S9986	W00P5	Psychotropic Medications	\$0.00	<b>\$0.00</b>	75th% market	\$0.00	0.0%
T1013	T1013	Sign Lang/Oral Interpreter	\$30.00	<b>\$30.00</b>	Current fee	\$0.00	0.0%
T1015	T1015AJ	Medicaid Clinic service	\$51.31	<b>\$51.31</b>	Encounter rate	\$0.00	0.0%
T1015	T1015HO	Medicaid Clinic service	\$51.31	<b>\$51.31</b>	Encounter rate	\$0.00	0.0%
T1015	T1015AH	Medicaid Clinic service	\$51.31	<b>\$51.31</b>	Encounter rate	\$0.00	0.0%
T1015	T1015	Medicaid Clinic service	\$134.89	<b>\$134.89</b>	Encounter rate	\$0.00	0.0%
T1016	T1016	Case Management Per 15min	\$25.00	<b>\$25.00</b>	75th% market	\$0.00	0.0%
T1016HN	T1016HN	Case Management, Per 15 Mins	\$25.00	<b>\$25.00</b>	Current fee CMH	\$0.00	0.0%
T1016HNHK	T1016HNHK	Case Management Per 15min	\$0.00	<b>\$30.00</b>	75th% market	\$30.00	100.0%
T1016HNTG	T1016HNTG	Case Management, Per 15 Min	\$25.00	<b>\$25.00</b>	Current fee CMH	\$0.00	0.0%
T1016HO	T1016HO	Case Management, Per 15 Mins	\$28.00	<b>\$28.00</b>	Current fee CMH	\$0.00	0.0%
T1016HOHK	T1016HOHK	Case Management, Per 15 Mins	\$28.00	<b>\$28.00</b>	Current fee CMH	\$0.00	0.0%
T1016TF	T1016TF	Case Management, Per 15 Mins	\$25.00	<b>\$25.00</b>	Current fee CMH	\$0.00	0.0%
T1016TG	T1016TG	Case Management, Per 15 Min	\$25.00	<b>\$25.00</b>	Current fee CMH	\$0.00	0.0%
T1023	T1023	Program Intake Assessment	\$348.00	<b>\$348.00</b>	Current fee	\$0.00	0.0%
T1029	T1029	Dwelling lead investigation	\$42.00	<b>\$42.00</b>	Current fee	\$0.00	0.0%
T1502	T1502	Medication Admin Visit	\$22.00	<b>\$22.00</b>	75th% market	\$0.00	0.0%