

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

The five character codes included in the Ohio Bureau of Workers' Compensation (BWC) 2009 Provider Fee Schedule are obtained from Current Procedural Terminology (CPT®), copyright 2008 by the American Medical Association (AMA). CPT is developed by the AMA as a listing of descriptive terms and five character identifying codes and modifiers for reporting medical services and procedures by physicians. The responsibility for the content of the BWC 2009 Provider Fee Schedule is with the State of Ohio Bureau of Workers' Compensation and no endorsement by the AMA is intended or should be implied. The AMA disclaims responsibility for any consequences or liability attributable or related to any use, nonuse or interpretation of information contained in the BWC 2009 Provider Fee Schedule. No fee schedules, basic unit values, relative value guides, conversion factors or scales are included in any part of the CPT. Any use of CPT outside of the BWC 2009 Provider Fee Schedule should refer to the most current Current Procedural Terminology which contains the complete and most current listing of CPT codes and descriptive terms. Applicable FARS/DFARS apply.

For the purposes of this fee schedule, the following definitions apply:

Non-Facility Fee	The reimbursement fee for all bills with place of service codes 11 (Office), 15 (Mobile Unit), and 20 (Urgent Care Facility) for all in-state and out-of-state practitioners.
Facility Fee	The reimbursement fee for all bills with place of service codes other than 11 (Office), 15 (Mobile Unit), and 20 (Urgent Care Facility) for all in-state and out-of-state practitioners

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BR	<p>“By Report.” No fee is associated with the procedure or service; therefore, a report is necessary to consider reimbursement.</p> <p>Reimbursement is at the discretion of the party responsible for payment of the bill (i.e., BWC, Managed Care Organization, and Self-Insuring Employer).</p>
Strikethrough	<p>A strikethrough indicates the procedure or service is typically not covered and will not routinely be reimbursed.</p> <p>Reimbursement is at the discretion of the party responsible for payment of the bill (i.e., BWC, MCO, and SI Employer).</p>
\$0.00	<p>Not Covered. The procedure or service is not covered and will not be reimbursed.</p>
-26 modifier	<p>Professional component reimbursement.</p>
TC modifier	<p>Technical component reimbursement (i.e., -27 modifier).</p>

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Negotiated	Negotiated reimbursement rates are required for designated all-inclusive per diem codes. The services/supplies must be medically necessary for treatment of the work-related injury.
ASC Level	The level or group number denoting the group level payment for the ASC facility for the surgical CPT® code. Zero (0) or blank means the procedure is not reimbursed to the ASC.
ASC Fee	Reimbursement rate for the ASC facility for the surgical CPT® code. \$0.00 or blank means the procedure is not reimbursed to the ASC.

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
10021		\$270.36	\$145.66	0	\$0.00
10022		\$300.94	\$135.17	0	\$0.00
10040		<del>\$172.19</del>	<del>\$146.80</del>	0	\$0.00
10060		\$189.40	\$169.24	0	\$0.00
10061		\$339.47	\$316.32	0	\$0.00
10080		<del>\$337.27</del>	<del>\$185.69</del>	0	\$0.00
10081		<del>\$518.91</del>	<del>\$322.53</del>	0	\$0.00
10120		\$214.25	\$135.10	0	\$0.00
10121		\$482.50	\$374.23	2	\$541.00
10140		\$246.80	\$200.51	0	\$0.00
10160		\$157.45	\$138.04	0	\$0.00
10180		\$442.18	\$354.07	2	\$541.00
11000		\$94.79	\$67.91	0	\$0.00
11001		\$42.15	\$33.19	0	\$0.00
11004		\$1,156.61	\$1,156.61	0	\$0.00
11005		\$1,574.27	\$1,574.27	0	\$0.00
11006		\$1,456.12	\$1,456.12	0	\$0.00
11008		\$592.47	\$592.47	0	\$0.00
11010		\$875.73	\$543.45	2	\$541.00
11011		\$1,039.78	\$611.92	2	\$541.00
11012		\$1,513.93	\$907.61	2	\$541.00
11040		\$82.49	\$59.35	0	\$0.00
11041		\$117.97	\$94.08	0	\$0.00
11042		\$168.34	\$130.26	2	\$541.00
11043		\$466.51	\$403.78	2	\$541.00
11044		\$610.93	\$552.69	2	\$541.00
11055		\$76.95	\$47.83	0	\$0.00
11056		\$98.52	\$68.65	0	\$0.00
11057		\$120.07	\$88.71	0	\$0.00
11100		<del>\$161.96</del>	<del>\$94.75</del>	0	\$0.00
11101		<del>\$58.96</del>	<del>\$47.76</del>	0	\$0.00
11200		<del>\$143.90</del>	<del>\$122.24</del>	0	\$0.00
11201		<del>\$36.14</del>	<del>\$33.15</del>	0	\$0.00
11300		\$118.33	\$59.34	0	\$0.00
11301		\$154.63	\$98.63	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
11302		\$184.43	\$120.96	0	\$0.00
11303		\$221.70	\$141.06	0	\$0.00
11305		\$119.66	\$76.35	0	\$0.00
11306		\$164.81	\$113.29	0	\$0.00
11307		\$190.72	\$130.23	0	\$0.00
11308		\$225.30	\$161.08	0	\$0.00
11310		\$146.00	\$85.52	0	\$0.00
11311		\$179.95	\$123.20	0	\$0.00
11312		\$207.37	\$140.17	0	\$0.00
11313		\$271.63	\$188.00	0	\$0.00
11400		\$224.11	\$138.99	0	\$0.00
11401		\$260.57	\$181.42	0	\$0.00
11402		\$297.44	\$210.07	0	\$0.00
11403		\$336.58	\$254.45	0	\$0.00
11404		\$383.87	\$283.82	1	\$402.00
11406		\$471.55	\$363.27	2	\$541.00
11420		\$217.86	\$153.65	0	\$0.00
11421		\$276.94	\$204.51	0	\$0.00
11422		\$311.35	\$241.16	0	\$0.00
11423		\$368.73	\$282.11	0	\$0.00
11424		\$421.80	\$329.96	2	\$541.00
11426		\$591.78	\$484.26	2	\$541.00
11440		\$262.20	\$190.51	0	\$0.00
11441		\$305.53	\$239.07	0	\$0.00
11442		\$342.28	\$266.11	0	\$0.00
11443		\$419.77	\$333.15	0	\$0.00
11444		\$534.10	\$431.80	1	\$402.00
11446		\$686.72	\$586.66	2	\$541.00
11450		\$623.79	\$389.32	2	\$541.00
11451		\$853.83	\$536.48	2	\$541.00
11462		\$611.80	\$369.12	2	\$541.00
11463		\$872.51	\$547.70	2	\$541.00
11470		\$670.49	\$451.71	2	\$541.00
11471		\$898.72	\$589.59	2	\$541.00
11600		\$311.62	\$183.93	0	\$0.00
11601		\$356.69	\$243.19	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
11602		\$380.40	\$260.18	0	\$0.00
11603		\$420.11	\$285.74	0	\$0.00
11604		\$461.97	\$309.64	2	\$541.00
11606		\$603.13	\$424.67	2	\$541.00
11620		\$299.26	\$173.06	0	\$0.00
11621		\$354.31	\$241.56	0	\$0.00
11622		\$403.32	\$281.64	0	\$0.00
11623		\$476.18	\$341.77	0	\$0.00
11624		\$546.51	\$394.93	2	\$541.00
11626		\$720.55	\$548.06	2	\$541.00
11640		\$317.75	\$198.28	0	\$0.00
11641		\$413.27	\$297.53	0	\$0.00
11642		\$478.31	\$349.13	0	\$0.00
11643		\$553.35	\$410.73	0	\$0.00
11644		\$701.65	\$529.94	2	\$541.00
11646		\$943.04	\$768.34	2	\$541.00
11719		\$32.72	\$19.28	0	\$0.00
11720		\$51.93	\$36.25	0	\$0.00
11721		\$78.88	\$61.71	0	\$0.00
11730		\$172.85	\$128.80	0	\$0.00
11732		\$82.74	\$66.31	0	\$0.00
11740		\$96.19	\$42.43	0	\$0.00
11750		\$319.65	\$289.79	0	\$0.00
11752		\$460.96	\$460.96	0	\$0.00
11755		\$189.09	\$148.77	0	\$0.00
11760		\$276.88	\$229.84	0	\$0.00
11762		\$424.35	\$391.50	0	\$0.00
11765		\$145.13	\$98.09	0	\$0.00
11770		\$492.69	\$339.62	3	\$618.00
11771		\$929.83	\$748.38	3	\$618.00
11772		\$1,147.94	\$896.30	3	\$618.00
11900		\$91.45	\$58.60	0	\$0.00
11901		\$115.61	\$92.46	0	\$0.00
11920		\$290.43	\$198.58	0	\$0.00
11921		\$346.89	\$242.35	0	\$0.00
11922		\$71.26	\$61.55	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
11950		\$158.37	\$102.36	0	\$0.00
11951		\$214.15	\$140.23	0	\$0.00
11952		\$287.72	\$198.11	0	\$0.00
11954		\$345.08	\$229.34	0	\$0.00
11960		\$1,581.26	\$1,581.26	2	\$541.00
11970		\$1,078.96	\$1,078.96	3	\$618.00
11971		\$722.43	\$543.97	1	\$402.00
11975		\$0.00	\$0.00	0	\$0.00
11976		\$0.00	\$0.00	0	\$0.00
11977		\$0.00	\$0.00	0	\$0.00
11980		\$206.94	\$165.88	0	\$0.00
11981		\$259.30	\$179.44	0	\$0.00
11982		\$302.22	\$217.09	0	\$0.00
11983		\$459.36	\$395.89	0	\$0.00
12001		\$296.64	\$181.65	0	\$0.00
12002		\$315.15	\$229.28	0	\$0.00
12004		\$368.78	\$268.72	0	\$0.00
12005		\$459.91	\$336.70	2	\$541.00
12006		\$573.40	\$430.04	2	\$541.00
12007		\$646.04	\$492.96	2	\$541.00
12011		\$314.04	\$187.85	0	\$0.00
12013		\$344.75	\$242.45	0	\$0.00
12014		\$406.17	\$291.18	0	\$0.00
12015		\$511.11	\$366.99	0	\$0.00
12016		\$607.18	\$452.61	2	\$541.00
12017		\$545.81	\$545.81	2	\$541.00
12018		\$643.64	\$643.64	2	\$541.00
12020		\$427.77	\$358.32	1	\$402.00
12021		\$292.78	\$266.64	1	\$402.00
12031		\$354.99	\$242.24	0	\$0.00
12032		\$499.47	\$344.91	0	\$0.00
12034		\$485.45	\$352.54	2	\$541.00
12035		\$692.77	\$459.05	2	\$541.00
12036		\$757.89	\$532.38	2	\$541.00
12037		\$894.60	\$617.57	2	\$541.00
12041		\$386.41	\$264.70	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
12042		\$469.80	\$331.66	0	\$0.00
12044		\$507.94	\$383.99	2	\$541.00
12045		\$592.04	\$478.54	2	\$541.00
12046		\$866.09	\$576.37	2	\$541.00
12047		\$886.88	\$632.26	2	\$541.00
12051		\$450.21	\$309.83	0	\$0.00
12052		\$469.90	\$331.76	0	\$0.00
12053		\$503.30	\$374.12	0	\$0.00
12054		\$559.85	\$412.75	2	\$541.00
12055		\$718.73	\$537.28	2	\$541.00
12056		\$958.43	\$679.17	2	\$541.00
12057		\$970.79	\$793.08	2	\$541.00
13100		\$526.47	\$395.80	2	\$541.00
13101		\$607.68	\$491.94	3	\$618.00
13102		\$160.56	\$148.61	1	\$402.00
13120		\$550.30	\$415.15	2	\$541.00
13121		\$659.21	\$534.51	3	\$618.00
13122		\$187.43	\$170.25	1	\$402.00
13131		\$610.28	\$478.86	2	\$541.00
13132		\$844.91	\$731.41	3	\$618.00
13133		\$276.02	\$263.32	1	\$402.00
13150		\$738.13	\$519.35	3	\$618.00
13151		\$779.13	\$600.67	3	\$618.00
13152		\$985.23	\$823.20	3	\$618.00
13153		\$303.60	\$287.92	1	\$402.00
13160		\$1,460.59	\$1,460.59	2	\$541.00
14000		\$1,142.95	\$886.83	2	\$541.00
14001		\$1,468.88	\$1,215.00	3	\$618.00
14020		\$1,249.98	\$1,009.54	3	\$618.00
14021		\$1,633.51	\$1,428.92	3	\$618.00
14040		\$1,285.90	\$1,180.62	2	\$541.00
14041		\$1,760.95	\$1,613.10	3	\$618.00
14060		\$1,400.16	\$1,294.87	3	\$618.00
14061		\$1,904.21	\$1,742.17	3	\$618.00
14300		\$1,838.42	\$1,686.09	4	\$762.00
14350		\$1,384.95	\$1,384.95	3	\$618.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
15002		\$628.00	\$445.51	2	\$541.00
15003		\$139.10	\$91.81	2	\$541.00
15004		\$758.86	\$552.00	2	\$541.00
15005		\$236.82	\$183.63	2	\$541.00
15040		\$514.00	\$260.12	2	\$541.00
15050		\$826.82	\$733.48	2	\$541.00
15100		\$1,743.33	\$1,378.19	2	\$541.00
15101		\$440.19	\$275.91	3	\$618.00
15110		\$1,642.25	\$1,370.66	2	\$541.00
15111		\$261.61	\$224.71	1	\$402.00
15115		\$1,547.41	\$1,408.66	2	\$541.00
15116		\$339.83	\$305.88	1	\$402.00
15120		\$1,660.05	\$1,433.05	2	\$541.00
15121		\$577.30	\$373.45	3	\$618.00
15130		\$1,358.47	\$1,097.96	2	\$541.00
15131		\$213.83	\$182.09	1	\$402.00
15135		\$1,656.13	\$1,526.98	2	\$541.00
15136		\$199.77	\$183.54	1	\$402.00
15150		\$1,366.41	\$1,217.33	2	\$541.00
15151		\$276.49	\$242.55	1	\$402.00
15152		\$339.90	\$303.00	1	\$402.00
15155		\$1,371.56	\$1,308.09	2	\$541.00
15156		\$360.45	\$336.83	1	\$402.00
15157		\$398.77	\$367.04	1	\$402.00
15170		\$721.35	\$612.87	0	\$0.00
15171		\$187.46	\$183.03	0	\$0.00
15175		\$1,018.48	\$912.94	0	\$0.00
15176		\$298.10	\$289.25	0	\$0.00
15200		\$1,498.87	\$1,142.69	3	\$618.00
15201		\$193.78	\$162.42	2	\$541.00
15220		\$1,474.36	\$1,160.75	2	\$541.00
15221		\$170.88	\$146.24	2	\$541.00
15240		\$1,542.87	\$1,353.21	3	\$618.00
15241		\$268.90	\$228.57	3	\$618.00
15260		\$1,584.85	\$1,489.27	2	\$541.00
15261		\$394.14	\$296.32	2	\$541.00

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15300		\$590.34	\$518.75	2	\$541.00
15301		\$124.59	\$119.43	1	\$402.00
15320		\$684.44	\$604.00	2	\$541.00
15321		\$185.78	\$178.40	1	\$402.00
15330		\$589.60	\$518.01	2	\$541.00
15331		\$123.86	\$119.43	1	\$402.00
15335		\$655.24	\$579.22	2	\$541.00
15336		\$179.48	\$170.62	1	\$402.00
15340		\$621.84	\$529.59	0	\$0.00
15341		\$89.20	\$58.94	0	\$0.00
15360		\$669.94	\$567.36	0	\$0.00
15361		\$144.58	\$135.72	0	\$0.00
15365		\$700.31	\$599.94	0	\$0.00
15366		\$179.48	\$170.62	0	\$0.00
15400		\$662.12	\$656.14	2	\$541.00
15401		\$179.16	\$120.91	2	\$541.00
15420		\$749.60	\$676.54	2	\$541.00
15421		\$232.28	\$180.62	1	\$402.00
15430		\$1,016.48	\$995.07	2	\$541.00
15431		BR	BR	1	\$402.00
15570		\$1,496.02	\$1,307.10	3	\$618.00
15572		\$1,438.66	\$1,277.37	3	\$618.00
15574		\$1,515.40	\$1,375.77	3	\$618.00
15576		\$1,451.12	\$1,225.61	3	\$618.00
15600		\$701.47	\$369.93	3	\$618.00
15610		\$493.54	\$440.53	3	\$618.00
15620		\$817.22	\$531.23	4	\$762.00
15630		\$796.72	\$577.18	3	\$618.00
15650		\$848.60	\$644.75	5	\$867.00
15731		\$2,101.31	\$1,911.44	3	\$618.00
15732		\$2,886.06	\$2,445.51	3	\$618.00
15734		\$2,911.42	\$2,486.55	3	\$618.00
15736		\$2,797.60	\$2,273.42	3	\$618.00
15738		\$2,926.15	\$2,457.22	3	\$618.00
15740		\$1,593.69	\$1,448.08	2	\$541.00
15750		\$1,671.30	\$1,671.30	2	\$541.00

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15756		\$4,585.78	\$4,585.78	0	\$0.00
15757		\$4,686.40	\$4,686.40	0	\$0.00
15758		\$4,689.26	\$4,689.26	0	\$0.00
15760		\$1,478.17	\$1,274.32	2	\$541.00
15770		\$1,161.22	\$1,161.22	3	\$618.00
15775		\$558.26	\$447.75	3	\$618.00
15776		\$891.89	\$698.49	3	\$618.00
15780		\$1,138.71	\$1,138.71	0	\$0.00
15781		\$805.13	\$805.13	0	\$0.00
15782		\$682.23	\$682.23	0	\$0.00
15783		\$729.27	\$672.52	0	\$0.00
15786		\$291.01	\$264.13	0	\$0.00
15787		\$51.21	\$39.27	0	\$0.00
15788		\$424.88	\$343.49	0	\$0.00
15789		\$890.50	\$781.48	0	\$0.00
15792		\$393.45	\$362.09	0	\$0.00
15793		\$619.63	\$619.63	0	\$0.00
15819		\$0.00	\$0.00	0	\$0.00
15820		\$0.00	\$0.00	0	\$0.00
15821		\$0.00	\$0.00	0	\$0.00
15822		\$0.00	\$0.00	0	\$0.00
15823		\$0.00	\$0.00	0	\$0.00
15824		\$0.00	\$0.00	0	\$0.00
15825		\$0.00	\$0.00	0	\$0.00
15826		\$0.00	\$0.00	0	\$0.00
15828		\$0.00	\$0.00	0	\$0.00
15829		\$0.00	\$0.00	0	\$0.00
15830		\$0.00	\$0.00	0	\$0.00
15832		\$0.00	\$0.00	0	\$0.00
15833		\$0.00	\$0.00	0	\$0.00
15834		\$0.00	\$0.00	0	\$0.00
15835		\$0.00	\$0.00	0	\$0.00
15836		\$0.00	\$0.00	0	\$0.00
15837		\$0.00	\$0.00	0	\$0.00
15838		\$0.00	\$0.00	0	\$0.00
15839		\$0.00	\$0.00	0	\$0.00

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15840		\$1,893.49	\$1,893.49	4	\$762.00
15841		\$3,188.84	\$3,188.84	4	\$762.00
15842		\$5,054.11	\$5,054.11	0	\$0.00
15845		\$1,757.44	\$1,757.44	4	\$762.00
15847		\$0.00	\$0.00	0	\$0.00
15850		\$185.00	\$87.18	0	\$0.00
15851		\$202.47	\$97.19	0	\$0.00
15852		\$213.71	\$100.21	0	\$0.00
15860		\$260.18	\$222.84	0	\$0.00
15876		\$0.00	\$0.00	0	\$0.00
15877		\$0.00	\$0.00	0	\$0.00
15878		\$0.00	\$0.00	0	\$0.00
15879		\$0.00	\$0.00	0	\$0.00
15920		\$1,115.75	\$1,115.75	3	\$618.00
15922		\$1,417.96	\$1,417.96	4	\$762.00
15931		\$1,238.49	\$1,238.49	3	\$618.00
15933		\$1,547.64	\$1,547.64	3	\$618.00
15934		\$1,725.46	\$1,725.46	3	\$618.00
15935		\$2,060.97	\$2,060.97	4	\$762.00
15936		\$1,713.11	\$1,713.11	4	\$762.00
15937		\$1,993.90	\$1,993.90	4	\$762.00
15940		\$1,285.19	\$1,285.19	3	\$618.00
15941		\$1,723.04	\$1,723.04	3	\$618.00
15944		\$1,658.15	\$1,658.15	3	\$618.00
15945		\$1,847.23	\$1,847.23	4	\$762.00
15946		\$2,976.92	\$2,976.92	4	\$762.00
15950		\$1,071.74	\$1,071.74	3	\$618.00
15951		\$1,538.23	\$1,538.23	4	\$762.00
15952		\$1,585.47	\$1,585.47	3	\$618.00
15953		\$1,791.76	\$1,791.76	4	\$762.00
15956		\$2,174.19	\$2,174.19	3	\$618.00
15958		\$2,194.25	\$2,194.25	4	\$762.00
15999		BR	BR	0	\$0.00
16000		\$139.09	\$94.29	0	\$0.00
16020		\$164.95	\$114.17	0	\$0.00
16025		\$294.23	\$231.51	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
16030		\$345.11	\$263.72	2	\$541.00
16035		\$434.91	\$434.91	0	\$0.00
16036		\$171.94	\$171.94	0	\$0.00
17000		\$123.87	\$73.84	0	\$0.00
17003		\$20.70	\$17.71	0	\$0.00
17004		\$401.92	\$325.00	0	\$0.00
17106		\$750.50	\$634.01	0	\$0.00
17107		\$1,328.40	\$1,172.34	0	\$0.00
17108		\$1,832.98	\$1,686.62	0	\$0.00
17110		\$177.83	\$92.70	0	\$0.00
17111		\$202.63	\$120.49	0	\$0.00
17250		\$136.24	\$69.78	0	\$0.00
17260		\$171.23	\$108.51	0	\$0.00
17261		\$217.70	\$140.05	0	\$0.00
17262		\$272.18	\$187.81	0	\$0.00
17263		\$302.82	\$210.97	0	\$0.00
17264		\$327.24	\$224.94	0	\$0.00
17266		\$382.44	\$266.71	0	\$0.00
17270		\$237.66	\$155.52	0	\$0.00
17271		\$256.17	\$177.02	0	\$0.00
17272		\$294.50	\$209.37	0	\$0.00
17273		\$335.10	\$241.77	0	\$0.00
17274		\$405.72	\$302.67	0	\$0.00
17276		\$486.30	\$371.31	0	\$0.00
17280		\$217.70	\$138.55	0	\$0.00
17281		\$283.87	\$203.97	0	\$0.00
17282		\$330.59	\$243.22	0	\$0.00
17283		\$408.10	\$309.53	0	\$0.00
17284		\$484.82	\$376.55	0	\$0.00
17286		\$644.55	\$529.55	0	\$0.00
17311		\$1,301.88	\$738.18	0	\$0.00
17312		\$780.06	\$392.93	0	\$0.00
17313		\$1,188.08	\$662.06	0	\$0.00
17314		\$722.79	\$363.74	0	\$0.00
17315		\$155.51	\$103.05	0	\$0.00
17340		\$91.59	\$86.37	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
17360		\$226.84	\$172.33	0	\$0.00
17380		\$0.00	\$0.00	0	\$0.00
17999		BR	BR	0	\$0.00
19000		\$224.84	\$98.65	0	\$0.00
19001		\$95.62	\$46.34	0	\$0.00
19020		\$763.56	\$519.38	2	\$541.00
19030		\$376.55	\$162.99	0	\$0.00
19100		\$269.68	\$139.76	1	\$402.00
19101		\$617.76	\$392.25	2	\$541.00
19102		\$467.19	\$217.04	2	\$541.00
19103		\$1,208.63	\$395.47	2	\$541.00
19105		\$3,705.64	\$386.20	0	\$0.00
19110		\$815.58	\$606.50	2	\$541.00
19112		\$763.23	\$523.54	3	\$618.00
19120		\$829.15	\$715.65	3	\$618.00
19125		\$892.23	\$775.74	3	\$618.00
19126		\$330.37	\$330.37	3	\$618.00
19260		\$2,181.38	\$2,181.38	5	\$867.00
19271		\$2,989.21	\$2,989.21	0	\$0.00
19272		\$3,279.00	\$3,279.00	0	\$0.00
19290		\$329.33	\$135.93	1	\$402.00
19291		\$182.97	\$67.98	1	\$402.00
19295		\$210.59	\$210.59	0	\$0.00
19296		BR	BR	0	\$0.00
19297		\$196.66	\$196.66	0	\$0.00
19298		\$3,635.89	\$686.64	0	\$0.00
19300		\$0.00	\$0.00	0	\$0.00
19301		\$0.00	\$0.00	0	\$0.00
19302		\$0.00	\$0.00	0	\$0.00
19303		\$0.00	\$0.00	0	\$0.00
19304		\$0.00	\$0.00	0	\$0.00
19305		\$0.00	\$0.00	0	\$0.00
19306		\$0.00	\$0.00	0	\$0.00
19307		\$0.00	\$0.00	0	\$0.00
19316		\$0.00	\$0.00	0	\$0.00
19318		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
19324		\$0.00	\$0.00	0	\$0.00
19325		\$0.00	\$0.00	0	\$0.00
19328		\$880.45	\$880.45	1	\$402.00
19330		\$1,121.96	\$1,121.96	1	\$402.00
19340		\$790.25	\$790.25	2	\$541.00
19342		\$1,658.77	\$1,658.77	3	\$618.00
19350		\$1,851.92	\$1,317.28	4	\$762.00
19355		\$0.00	\$0.00	0	\$0.00
19357		\$2,637.29	\$2,637.29	5	\$867.00
19361		\$2,576.37	\$2,576.37	0	\$0.00
19364		\$5,328.07	\$5,328.07	5	\$867.00
19366		\$2,709.23	\$2,709.23	5	\$867.00
19367		\$3,503.79	\$3,503.79	0	\$0.00
19368		\$4,370.85	\$4,370.85	0	\$0.00
19369		\$4,106.61	\$4,106.61	0	\$0.00
19370		\$1,228.92	\$1,228.92	4	\$762.00
19371		\$1,413.73	\$1,413.73	4	\$762.00
19380		\$1,385.30	\$1,385.30	5	\$867.00
19396		\$626.30	\$264.89	0	\$0.00
19499		BR	BR	0	\$0.00
20000		\$357.91	\$301.91	0	\$0.00
20005		\$548.71	\$456.87	2	\$541.00
20100		\$1,311.66	\$1,204.14	0	\$0.00
20101		\$495.53	\$392.48	0	\$0.00
20102		\$604.30	\$474.38	0	\$0.00
20103		\$776.74	\$706.55	0	\$0.00
20150		\$1,696.69	\$1,696.69	0	\$0.00
20200		\$365.32	\$187.61	2	\$541.00
20205		\$517.16	\$295.39	3	\$618.00
20206		\$321.63	\$108.08	1	\$402.00
20220		\$462.24	\$314.39	1	\$402.00
20225		\$482.36	\$378.57	2	\$541.00
20240		\$471.12	\$471.12	2	\$541.00
20245		\$1,118.09	\$1,118.09	3	\$618.00
20250		\$779.38	\$779.38	3	\$618.00
20251		\$896.11	\$896.11	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
20500		\$552.55	\$398.72	0	\$0.00
20501		\$287.96	\$81.12	0	\$0.00
20520		\$329.34	\$295.74	0	\$0.00
20525		\$564.80	\$509.54	3	\$618.00
20526		\$97.01	\$75.35	0	\$0.00
20550		\$75.91	\$52.80	0	\$0.00
20551		\$74.46	\$57.61	0	\$0.00
20552		\$72.33	\$46.82	0	\$0.00
20553		\$82.17	\$52.32	0	\$0.00
20555		\$668.48	\$668.48	7	\$1,205.00
20600		\$68.00	\$54.04	0	\$0.00
20605		\$74.31	\$55.53	0	\$0.00
20610		\$90.48	\$65.44	0	\$0.00
20612		\$73.39	\$55.09	0	\$0.00
20615		\$386.90	\$333.14	0	\$0.00
20650		\$381.70	\$345.86	3	\$618.00
20660		\$471.97	\$368.17	0	\$0.00
20661		\$839.54	\$839.54	0	\$0.00
20662		\$957.66	\$957.66	0	\$0.00
20663		\$852.30	\$852.30	0	\$0.00
20664		\$1,294.56	\$1,294.56	0	\$0.00
20665		\$272.96	\$216.21	0	\$0.00
20670		\$662.14	\$451.57	1	\$402.00
20680		\$544.24	\$544.24	3	\$618.00
20690		\$502.29	\$502.29	2	\$541.00
20692		\$835.15	\$835.15	3	\$618.00
20693		\$951.05	\$951.05	3	\$618.00
20694		\$893.77	\$713.81	1	\$402.00
20696		\$2,232.40	\$2,232.40	0	\$0.00
20697		\$2,426.59	\$0.97	0	\$0.00
20802		\$5,347.66	\$5,347.66	0	\$0.00
20805		\$6,884.07	\$6,884.07	0	\$0.00
20808		\$8,662.27	\$8,662.27	0	\$0.00
20816		\$5,641.47	\$5,641.47	0	\$0.00
20822		\$4,983.16	\$4,983.16	0	\$0.00
20824		\$5,599.18	\$5,599.18	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
20827		\$5,210.34	\$5,210.34	0	\$0.00
20838		\$5,467.35	\$5,467.35	0	\$0.00
20900		\$1,058.16	\$940.93	3	\$618.00
20902		\$1,202.27	\$1,202.27	4	\$762.00
20910		\$999.25	\$870.82	3	\$618.00
20912		\$1,002.84	\$1,002.84	3	\$618.00
20920		\$794.64	\$794.64	4	\$762.00
20922		\$1,103.76	\$976.82	3	\$618.00
20924		\$1,024.78	\$1,024.78	4	\$762.00
20926		\$868.98	\$868.98	4	\$762.00
20930		\$245.84	\$245.84	0	\$0.00
20931		\$242.22	\$242.22	0	\$0.00
20936		\$374.12	\$374.12	0	\$0.00
20937		\$366.02	\$366.02	0	\$0.00
20938		\$399.86	\$399.86	0	\$0.00
20950		\$215.27	\$187.64	0	\$0.00
20955		\$5,331.79	\$5,331.79	0	\$0.00
20956		\$5,456.82	\$5,456.82	0	\$0.00
20957		\$5,124.75	\$5,124.75	0	\$0.00
20962		\$5,519.76	\$5,519.76	0	\$0.00
20969		\$5,883.44	\$5,883.44	0	\$0.00
20970		\$5,722.80	\$5,722.80	0	\$0.00
20972		\$5,540.51	\$5,416.55	0	\$0.00
20973		\$5,888.99	\$5,888.99	0	\$0.00
20974		\$103.91	\$98.68	0	\$0.00
20975		\$371.33	\$371.33	2	\$541.00
20979		\$140.52	\$77.67	0	\$0.00
20982		\$8,555.29	\$843.33	0	\$0.00
20985		\$310.65	\$310.65	0	\$0.00
20999		BR	BR	0	\$0.00
21010		\$1,384.81	\$1,384.81	2	\$541.00
21015		\$875.90	\$875.90	3	\$618.00
21025		\$1,625.52	\$1,475.43	2	\$541.00
21026		\$938.33	\$830.81	2	\$541.00
21029		\$1,317.12	\$1,140.16	2	\$541.00
21030		\$848.10	\$659.93	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21031		\$624.12	\$515.10	0	\$0.00
21032		\$625.58	\$521.79	0	\$0.00
21034		\$2,407.33	\$2,236.34	3	\$618.00
21040		\$813.61	\$609.76	2	\$541.00
21044		\$1,658.05	\$1,658.05	2	\$541.00
21045		\$2,230.00	\$2,230.00	0	\$0.00
21046		\$2,062.56	\$2,062.56	2	\$541.00
21047		\$2,612.22	\$2,612.22	2	\$541.00
21048		\$2,121.76	\$2,121.76	0	\$0.00
21049		\$2,476.35	\$2,476.35	0	\$0.00
21050		\$1,690.82	\$1,690.82	3	\$618.00
21060		\$1,641.84	\$1,641.84	2	\$541.00
21070		\$1,229.03	\$1,229.03	3	\$618.00
21073		\$703.20	\$468.54	0	\$0.00
21076		\$2,127.47	\$1,936.32	0	\$0.00
21077		\$5,372.12	\$4,916.63	0	\$0.00
21079		\$3,561.91	\$3,203.49	0	\$0.00
21080		\$4,091.78	\$3,679.60	0	\$0.00
21081		\$3,684.61	\$3,294.08	0	\$0.00
21082		\$3,258.60	\$2,963.65	0	\$0.00
21083		\$3,143.00	\$2,792.80	0	\$0.00
21084		\$3,607.99	\$3,227.18	0	\$0.00
21085		\$1,402.77	\$1,279.56	0	\$0.00
21086		\$3,944.79	\$3,590.10	0	\$0.00
21087		\$3,946.32	\$3,608.06	0	\$0.00
21088		BR	BR	0	\$0.00
21089		BR	BR	0	\$0.00
21100		\$771.43	\$694.52	2	\$541.00
21110		\$960.99	\$859.44	0	\$0.00
21116		\$620.45	\$93.28	0	\$0.00
21120		\$1,079.50	\$809.94	7	\$1,205.00
21121		\$1,433.71	\$1,147.73	7	\$1,205.00
21122		\$1,250.89	\$1,250.89	7	\$1,205.00
21123		\$1,598.04	\$1,598.04	7	\$1,205.00
21125		\$1,782.62	\$1,516.79	7	\$1,205.00
21127		\$2,031.61	\$1,623.16	9	\$1,578.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21137		\$1,373.23	\$1,373.23	0	\$0.00
21138		\$1,784.46	\$1,784.46	0	\$0.00
21139		\$1,966.59	\$1,966.59	0	\$0.00
21141		\$0.00	\$0.00	0	\$0.00
21142		\$0.00	\$0.00	0	\$0.00
21143		\$0.00	\$0.00	0	\$0.00
21145		\$0.00	\$0.00	0	\$0.00
21146		\$0.00	\$0.00	0	\$0.00
21147		\$0.00	\$0.00	0	\$0.00
21150		\$0.00	\$0.00	0	\$0.00
21151		\$0.00	\$0.00	0	\$0.00
21154		\$0.00	\$0.00	0	\$0.00
21155		\$0.00	\$0.00	0	\$0.00
21159		\$0.00	\$0.00	0	\$0.00
21160		\$0.00	\$0.00	0	\$0.00
21172		\$0.00	\$0.00	0	\$0.00
21175		\$0.00	\$0.00	0	\$0.00
21179		\$0.00	\$0.00	0	\$0.00
21180		\$0.00	\$0.00	0	\$0.00
21181		\$0.00	\$0.00	0	\$0.00
21182		\$0.00	\$0.00	0	\$0.00
21183		\$0.00	\$0.00	0	\$0.00
21184		\$0.00	\$0.00	0	\$0.00
21188		\$3,060.36	\$3,060.36	0	\$0.00
21193		\$2,452.87	\$2,452.87	0	\$0.00
21194		\$2,733.71	\$2,733.71	0	\$0.00
21195		\$2,452.47	\$2,452.47	0	\$0.00
21196		\$2,666.74	\$2,666.74	0	\$0.00
21198		\$2,020.35	\$2,020.35	0	\$0.00
21199		\$2,052.57	\$2,052.57	0	\$0.00
21206		\$2,005.87	\$2,005.87	5	\$867.00
21208		\$1,975.09	\$1,580.09	7	\$1,205.00
21209		\$1,474.66	\$1,123.71	5	\$867.00
21210		\$1,909.29	\$1,586.72	7	\$1,205.00
21215		\$1,951.86	\$1,658.40	7	\$1,205.00
21230		\$1,571.60	\$1,571.60	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21235		\$1,427.43	\$1,104.86	7	\$1,205.00
21240		\$2,158.33	\$2,158.33	4	\$762.00
21242		\$2,057.26	\$2,057.26	5	\$867.00
21243		\$3,136.72	\$3,136.72	5	\$867.00
21244		\$1,767.99	\$1,767.99	7	\$1,205.00
21245		\$2,218.09	\$1,735.72	7	\$1,205.00
21246		\$2,179.87	\$1,823.70	7	\$1,205.00
21247		\$3,316.36	\$3,316.36	0	\$0.00
21248		\$1,968.41	\$1,687.65	7	\$1,205.00
21249		\$2,742.09	\$2,445.65	7	\$1,205.00
21255		\$2,365.38	\$2,365.38	0	\$0.00
21256		\$2,271.54	\$2,271.54	0	\$0.00
21260		\$2,073.77	\$2,073.77	0	\$0.00
21261		\$4,099.68	\$4,099.68	0	\$0.00
21263		\$3,379.61	\$3,379.61	0	\$0.00
21267		\$2,589.22	\$2,589.22	7	\$1,205.00
21268		\$3,132.25	\$3,132.25	0	\$0.00
21270		\$1,761.86	\$1,472.89	5	\$867.00
21275		\$1,627.89	\$1,627.89	7	\$1,205.00
21280		\$951.11	\$951.11	5	\$867.00
21282		\$642.75	\$642.75	5	\$867.00
21295		\$344.58	\$344.58	1	\$402.00
21296		\$693.38	\$693.38	1	\$402.00
21299		BR	BR	0	\$0.00
21310		\$227.63	\$61.12	2	\$541.00
21315		\$357.92	\$224.26	2	\$541.00
21320		\$478.65	\$296.45	2	\$541.00
21325		\$605.11	\$605.11	4	\$762.00
21330		\$861.21	\$861.21	5	\$867.00
21335		\$1,241.60	\$1,241.60	7	\$1,205.00
21336		\$944.46	\$944.46	4	\$762.00
21337		\$615.38	\$507.85	2	\$541.00
21338		\$1,001.69	\$1,001.69	4	\$762.00
21339		\$1,207.94	\$1,207.94	5	\$867.00
21340		\$1,572.11	\$1,572.11	4	\$762.00
21343		\$1,869.84	\$1,869.84	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21344		\$2,724.29	\$2,724.29	0	\$0.00
21345		\$1,561.03	\$1,286.24	7	\$1,205.00
21346		\$1,899.36	\$1,583.50	0	\$0.00
21347		\$1,828.05	\$1,828.05	0	\$0.00
21348		\$2,288.43	\$2,288.43	0	\$0.00
21355		\$675.27	\$499.05	3	\$618.00
21356		\$1,239.00	\$598.33	3	\$618.00
21360		\$1,599.02	\$1,016.59	0	\$0.00
21365		\$2,169.97	\$2,169.97	0	\$0.00
21366		\$2,389.81	\$2,389.81	0	\$0.00
21385		\$1,304.00	\$1,304.00	0	\$0.00
21386		\$1,346.07	\$1,346.07	0	\$0.00
21387		\$1,393.50	\$1,393.50	0	\$0.00
21390		\$1,456.81	\$1,456.81	0	\$0.00
21395		\$1,789.82	\$1,789.82	0	\$0.00
21400		\$400.85	\$279.13	2	\$541.00
21401		\$669.12	\$576.53	3	\$618.00
21406		\$1,078.40	\$1,078.40	0	\$0.00
21407		\$1,269.28	\$1,269.28	0	\$0.00
21408		\$1,771.19	\$1,771.19	0	\$0.00
21421		\$1,187.29	\$902.79	4	\$762.00
21422		\$1,562.53	\$1,245.93	0	\$0.00
21423		\$1,535.95	\$1,535.95	0	\$0.00
21431		\$1,407.07	\$1,118.85	0	\$0.00
21432		\$1,185.40	\$1,185.40	0	\$0.00
21433		\$3,467.46	\$3,467.46	0	\$0.00
21435		\$2,471.43	\$2,471.43	0	\$0.00
21436		\$3,782.60	\$3,782.60	0	\$0.00
21440		\$837.90	\$540.71	0	\$0.00
21445		\$1,258.60	\$943.49	4	\$762.00
21450		\$1,056.91	\$537.20	3	\$618.00
21451		\$1,077.27	\$849.53	4	\$762.00
21452		\$761.34	\$436.52	2	\$541.00
21453		\$1,270.23	\$992.46	3	\$618.00
21454		\$1,047.28	\$1,047.28	5	\$867.00
21461		\$1,641.70	\$1,321.36	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21462		\$1,897.14	\$1,515.58	5	\$867.00
21465		\$1,761.96	\$1,761.96	4	\$762.00
21470		\$2,241.64	\$2,241.64	0	\$0.00
21480		\$200.11	\$66.45	1	\$402.00
21485		\$787.33	\$701.46	2	\$541.00
21490		\$1,789.68	\$1,789.68	3	\$618.00
21495		\$931.57	\$931.57	0	\$0.00
21497		\$822.72	\$707.73	2	\$541.00
21499		BR	BR	0	\$0.00
21501		\$683.02	\$621.79	2	\$541.00
21502		\$1,046.37	\$1,046.37	2	\$541.00
21510		\$927.08	\$927.08	0	\$0.00
21550		\$447.23	\$303.12	0	\$0.00
21555		\$758.19	\$614.82	2	\$541.00
21556		\$789.50	\$789.50	2	\$541.00
21557		\$1,177.28	\$1,177.28	0	\$0.00
21600		\$1,035.90	\$1,035.90	2	\$541.00
21610		\$1,989.32	\$1,989.32	2	\$541.00
21615		\$1,370.38	\$1,370.38	0	\$0.00
21616		\$1,651.42	\$1,651.42	0	\$0.00
21620		\$1,044.42	\$1,044.42	0	\$0.00
21627		\$1,073.72	\$1,073.72	0	\$0.00
21630		\$2,424.73	\$2,424.73	0	\$0.00
21632		\$2,413.64	\$2,413.64	0	\$0.00
21685		\$1,888.37	\$1,888.37	0	\$0.00
21700		\$967.40	\$868.84	2	\$541.00
21705		\$1,254.61	\$1,254.61	0	\$0.00
21720		\$927.91	\$864.44	3	\$618.00
21725		\$1,042.42	\$1,042.42	3	\$618.00
21740		\$2,094.06	\$2,094.06	0	\$0.00
21742		BR	BR	0	\$0.00
21743		BR	BR	0	\$0.00
21750		\$1,402.21	\$1,402.21	0	\$0.00
21800		\$241.71	\$190.18	1	\$402.00
21805		\$486.54	\$486.54	2	\$541.00
21810		\$958.43	\$958.43	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
21820		\$312.39	\$251.16	1	\$402.00
21825		\$1,138.58	\$1,138.58	0	\$0.00
21899		BR	BR	0	\$0.00
21920		\$418.08	\$282.92	0	\$0.00
21925		\$889.38	\$640.73	2	\$541.00
21930		\$847.96	\$694.88	2	\$541.00
21935		\$2,337.71	\$2,337.71	3	\$618.00
22010		\$1,665.17	\$1,665.17	0	\$0.00
22015		\$1,650.50	\$1,650.50	0	\$0.00
22100		\$1,474.44	\$1,474.44	0	\$0.00
22101		\$1,492.55	\$1,492.55	0	\$0.00
22102		\$1,506.63	\$1,506.63	0	\$0.00
22103		\$307.59	\$307.59	0	\$0.00
22110		\$1,893.26	\$1,893.26	0	\$0.00
22112		\$1,878.04	\$1,878.04	0	\$0.00
22114		\$1,879.57	\$1,879.57	0	\$0.00
22116		\$305.35	\$305.35	0	\$0.00
22206		\$4,746.68	\$4,746.68	0	\$0.00
22207		\$4,684.74	\$4,684.74	0	\$0.00
22208		\$1,211.27	\$1,211.27	0	\$0.00
22210		\$3,411.49	\$3,411.49	0	\$0.00
22212		\$2,765.13	\$2,765.13	0	\$0.00
22214		\$2,805.56	\$2,805.56	0	\$0.00
22216		\$796.63	\$796.63	0	\$0.00
22220		\$3,036.62	\$3,036.62	0	\$0.00
22222		\$2,831.30	\$2,831.30	0	\$0.00
22224		\$3,040.65	\$3,040.65	0	\$0.00
22226		\$796.70	\$796.70	0	\$0.00
22305		\$426.64	\$366.15	1	\$402.00
22310		\$605.72	\$548.22	1	\$402.00
22315		\$1,826.41	\$1,382.12	2	\$541.00
22318		\$3,084.71	\$3,084.71	0	\$0.00
22319		\$3,428.21	\$3,428.21	0	\$0.00
22325		\$2,578.71	\$2,578.71	0	\$0.00
22326		\$2,816.66	\$2,816.66	0	\$0.00
22327		\$2,683.67	\$2,683.67	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
22328		\$590.10	\$590.10	0	\$0.00
22505		\$240.77	\$240.77	2	\$541.00
22520		\$8,474.49	\$1,111.24	9	\$1,578.00
22521		\$7,554.66	\$1,048.63	9	\$1,578.00
22522		\$493.55	\$493.55	9	\$1,578.00
22523		\$1,254.45	\$1,254.45	0	\$0.00
22524		\$1,201.91	\$1,201.91	0	\$0.00
22525		\$577.43	\$577.43	0	\$0.00
22526		\$4,000.51	\$718.05	0	\$0.00
22527		\$3,228.85	\$333.51	0	\$0.00
22532		\$3,325.26	\$3,325.26	0	\$0.00
22533		\$3,103.63	\$3,103.63	0	\$0.00
22534		\$786.04	\$786.04	0	\$0.00
22548		\$3,659.74	\$3,659.74	0	\$0.00
22554		\$2,699.73	\$2,699.73	0	\$0.00
22556		\$3,275.63	\$3,275.63	0	\$0.00
22558		\$3,020.81	\$3,020.81	0	\$0.00
22585		\$730.64	\$730.64	0	\$0.00
22590		\$2,948.86	\$2,948.86	0	\$0.00
22595		\$2,806.44	\$2,806.44	0	\$0.00
22600		\$2,361.26	\$2,361.26	0	\$0.00
22610		\$2,344.67	\$2,344.67	0	\$0.00
22612		\$2,996.45	\$2,996.45	0	\$0.00
22614		\$849.66	\$849.66	0	\$0.00
22630		\$2,990.28	\$2,990.28	0	\$0.00
22632		\$690.60	\$690.60	0	\$0.00
22800		\$0.00	\$0.00	0	\$0.00
22802		\$0.00	\$0.00	0	\$0.00
22804		\$0.00	\$0.00	0	\$0.00
22808		\$0.00	\$0.00	0	\$0.00
22810		\$0.00	\$0.00	0	\$0.00
22812		\$0.00	\$0.00	0	\$0.00
22818		\$0.00	\$0.00	0	\$0.00
22819		\$0.00	\$0.00	0	\$0.00
22830		\$1,597.45	\$1,597.45	0	\$0.00
22840		\$1,651.74	\$1,651.74	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
22841		\$614.61	\$614.61	0	\$0.00
22842		\$1,657.89	\$1,657.89	0	\$0.00
22843		\$1,738.70	\$1,738.70	0	\$0.00
22844		\$2,161.91	\$2,161.91	0	\$0.00
22845		\$1,592.65	\$1,592.65	0	\$0.00
22846		\$1,651.83	\$1,651.83	0	\$0.00
22847		\$1,820.35	\$1,820.35	0	\$0.00
22848		\$788.06	\$788.06	0	\$0.00
22849		\$2,588.93	\$2,588.93	0	\$0.00
22850		\$1,407.20	\$1,407.20	0	\$0.00
22851		\$876.88	\$876.88	0	\$0.00
22852		\$1,341.72	\$1,341.72	0	\$0.00
22855		\$2,160.28	\$2,160.28	0	\$0.00
22856		\$3,437.60	\$3,437.60	0	\$0.00
22857		\$3,033.59	\$3,033.59	0	\$0.00
22861		\$4,154.75	\$4,154.75	0	\$0.00
22862		\$3,695.67	\$3,695.67	0	\$0.00
22864		\$3,895.77	\$3,895.77	0	\$0.00
22865		\$3,598.18	\$3,598.18	0	\$0.00
22899		BR	BR	0	\$0.00
22900		\$751.63	\$751.63	4	\$762.00
22999		BR	BR	0	\$0.00
23000		\$778.58	\$699.43	2	\$541.00
23020		\$1,377.65	\$1,377.65	2	\$541.00
23030		\$532.48	\$526.51	1	\$402.00
23031		\$447.76	\$447.76	3	\$618.00
23035		\$1,419.77	\$1,419.77	3	\$618.00
23040		\$1,424.25	\$1,424.25	3	\$618.00
23044		\$1,131.87	\$1,131.87	4	\$762.00
23065		\$402.43	\$306.11	0	\$0.00
23066		\$753.99	\$676.33	2	\$541.00
23075		\$378.45	\$346.34	2	\$541.00
23076		\$1,108.79	\$1,108.79	2	\$541.00
23077		\$2,228.81	\$2,228.81	3	\$618.00
23100		\$973.20	\$973.20	2	\$541.00
23101		\$910.31	\$910.31	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
23105		\$1,283.90	\$1,283.90	4	\$762.00
23106		\$971.48	\$971.48	4	\$762.00
23107		\$1,336.17	\$1,336.17	4	\$762.00
23120		\$1,132.64	\$1,132.64	5	\$867.00
23125		\$1,420.41	\$1,420.41	5	\$867.00
23130		\$1,220.19	\$1,220.19	5	\$867.00
23140		\$1,017.99	\$1,017.99	4	\$762.00
23145		\$1,392.43	\$1,392.43	5	\$867.00
23146		\$1,248.90	\$1,248.90	5	\$867.00
23150		\$1,290.03	\$1,290.03	4	\$762.00
23155		\$1,552.75	\$1,552.75	5	\$867.00
23156		\$1,339.33	\$1,339.33	5	\$867.00
23170		\$1,086.64	\$1,086.64	2	\$541.00
23172		\$1,106.43	\$1,106.43	2	\$541.00
23174		\$1,490.34	\$1,490.34	2	\$541.00
23180		\$1,464.26	\$1,464.26	4	\$762.00
23182		\$1,399.25	\$1,399.25	4	\$762.00
23184		\$1,563.69	\$1,563.69	4	\$762.00
23190		\$1,121.09	\$1,121.09	4	\$762.00
23195		\$1,474.34	\$1,474.34	5	\$867.00
23200		\$1,746.01	\$1,746.01	0	\$0.00
23210		\$1,817.92	\$1,817.92	0	\$0.00
23220		\$2,138.12	\$2,138.12	0	\$0.00
23221		\$2,501.87	\$2,501.87	0	\$0.00
23222		\$3,362.17	\$3,362.17	0	\$0.00
23330		\$315.19	\$303.25	1	\$402.00
23331		\$1,179.18	\$1,179.18	1	\$402.00
23332		\$1,753.68	\$1,753.68	0	\$0.00
23350		\$368.69	\$107.35	0	\$0.00
23395		\$2,479.62	\$2,479.62	5	\$867.00
23397		\$2,317.24	\$2,317.24	7	\$1,205.00
23400		\$1,991.70	\$1,991.70	7	\$1,205.00
23405		\$1,278.39	\$1,278.39	2	\$541.00
23406		\$1,607.90	\$1,607.90	2	\$541.00
23410		\$1,835.19	\$1,835.19	5	\$867.00
23412		\$1,951.21	\$1,951.21	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
23415		\$1,504.06	\$1,504.06	5	\$867.00
23420		\$2,016.89	\$2,016.89	7	\$1,205.00
23430		\$1,516.06	\$1,516.06	4	\$762.00
23440		\$1,574.69	\$1,574.69	4	\$762.00
23450		\$1,956.00	\$1,956.00	5	\$867.00
23455		\$2,089.63	\$2,089.63	7	\$1,205.00
23460		\$2,250.98	\$2,250.98	5	\$867.00
23462		\$2,199.94	\$2,199.94	7	\$1,205.00
23465		\$2,232.02	\$2,232.02	5	\$867.00
23466		\$2,139.12	\$2,139.12	7	\$1,205.00
23470		\$2,467.47	\$2,467.47	0	\$0.00
23472		\$2,933.58	\$2,933.58	0	\$0.00
23480		\$1,674.40	\$1,674.40	4	\$762.00
23485		\$1,959.81	\$1,959.81	7	\$1,205.00
23490		\$1,679.48	\$1,679.48	3	\$618.00
23491		\$2,095.03	\$2,095.03	3	\$618.00
23500		\$461.76	\$379.63	1	\$402.00
23505		\$735.18	\$616.45	1	\$402.00
23515		\$1,162.88	\$1,162.88	3	\$618.00
23520		\$468.02	\$397.08	1	\$402.00
23525		\$719.06	\$613.77	1	\$402.00
23530		\$1,097.93	\$1,097.93	3	\$618.00
23532		\$1,247.29	\$1,247.29	4	\$762.00
23540		\$517.51	\$383.10	1	\$402.00
23545		\$628.87	\$544.50	1	\$402.00
23550		\$1,131.49	\$1,131.49	3	\$618.00
23552		\$1,312.40	\$1,312.40	4	\$762.00
23570		\$477.29	\$417.56	1	\$402.00
23575		\$800.01	\$685.77	1	\$402.00
23585		\$1,384.53	\$1,384.53	3	\$618.00
23600		\$696.46	\$552.34	0	\$0.00
23605		\$937.49	\$813.54	2	\$541.00
23615		\$1,503.24	\$1,503.24	4	\$762.00
23616		\$2,992.25	\$2,992.25	4	\$762.00
23620		\$608.61	\$460.02	1	\$402.00
23625		\$831.67	\$698.01	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
23630		\$1,163.42	\$1,163.42	5	\$867.00
23650		\$646.35	\$511.20	1	\$402.00
23655		\$718.08	\$718.08	1	\$402.00
23660		\$1,155.65	\$1,155.65	3	\$618.00
23665		\$899.37	\$774.67	2	\$541.00
23670		\$1,229.68	\$1,229.68	3	\$618.00
23675		\$1,117.42	\$1,003.92	2	\$541.00
23680		\$1,520.05	\$1,520.05	3	\$618.00
23700		\$401.52	\$401.52	1	\$402.00
23800		\$2,070.89	\$2,070.89	4	\$762.00
23802		\$2,279.52	\$2,279.52	7	\$1,205.00
23900		\$2,658.73	\$2,658.73	0	\$0.00
23920		\$2,073.84	\$2,073.84	0	\$0.00
23921		\$892.10	\$892.10	3	\$618.00
23929		BR	BR	0	\$0.00
23930		\$462.61	\$433.49	1	\$402.00
23931		\$341.92	\$323.25	2	\$541.00
23935		\$1,012.31	\$1,012.31	2	\$541.00
24000		\$927.58	\$927.58	4	\$762.00
24006		\$1,420.13	\$1,420.13	4	\$762.00
24065		\$333.08	\$309.18	0	\$0.00
24066		\$894.49	\$783.98	2	\$541.00
24075		\$726.13	\$621.59	2	\$541.00
24076		\$937.28	\$937.28	2	\$541.00
24077		\$1,687.80	\$1,687.80	3	\$618.00
24100		\$777.05	\$777.05	1	\$402.00
24101		\$996.02	\$996.02	4	\$762.00
24102		\$1,239.82	\$1,239.82	4	\$762.00
24105		\$654.99	\$654.99	3	\$618.00
24110		\$1,171.70	\$1,171.70	2	\$541.00
24115		\$1,409.04	\$1,409.04	3	\$618.00
24116		\$1,757.42	\$1,757.42	3	\$618.00
24120		\$1,039.67	\$1,039.67	3	\$618.00
24125		\$1,160.49	\$1,160.49	3	\$618.00
24126		\$1,253.81	\$1,253.81	3	\$618.00
24130		\$1,013.63	\$1,013.63	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
24134		\$1,568.00	\$1,568.00	2	\$541.00
24136		\$1,257.82	\$1,257.82	2	\$541.00
24138		\$1,306.40	\$1,306.40	2	\$541.00
24140		\$1,542.79	\$1,542.79	3	\$618.00
24145		\$1,297.09	\$1,297.09	3	\$618.00
24147		\$1,333.62	\$1,333.62	2	\$541.00
24149		\$2,139.58	\$2,139.58	0	\$0.00
24150		\$1,959.92	\$1,959.92	0	\$0.00
24151		\$2,292.82	\$2,292.82	0	\$0.00
24152		\$1,485.26	\$1,485.26	0	\$0.00
24153		\$1,395.84	\$1,395.84	0	\$0.00
24155		\$1,674.48	\$1,674.48	3	\$618.00
24160		\$1,218.19	\$1,218.19	2	\$541.00
24164		\$988.87	\$988.87	3	\$618.00
24200		\$299.13	\$276.73	0	\$0.00
24201		\$834.63	\$731.58	2	\$541.00
24220		\$890.26	\$141.32	0	\$0.00
24300		\$750.31	\$750.31	0	\$0.00
24301		\$1,529.30	\$1,529.30	4	\$762.00
24305		\$1,172.62	\$1,172.62	4	\$762.00
24310		\$965.41	\$965.41	3	\$618.00
24320		\$1,496.29	\$1,496.29	3	\$618.00
24330		\$1,451.63	\$1,451.63	3	\$618.00
24331		\$1,605.02	\$1,605.02	3	\$618.00
24332		\$1,146.77	\$1,146.77	0	\$0.00
24340		\$1,234.10	\$1,234.10	3	\$618.00
24341		\$1,296.82	\$1,296.82	3	\$618.00
24342		\$1,598.34	\$1,598.34	3	\$618.00
24343		\$1,374.21	\$1,374.21	0	\$0.00
24344		\$2,108.85	\$2,108.85	0	\$0.00
24345		\$1,366.00	\$1,366.00	2	\$541.00
24346		\$2,097.65	\$2,097.65	0	\$0.00
24357		\$840.16	\$840.16	7	\$1,205.00
24358		\$993.70	\$993.70	7	\$1,205.00
24359		\$1,272.92	\$1,272.92	7	\$1,205.00
24360		\$1,820.57	\$1,820.57	5	\$867.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
24361		\$2,061.62	\$2,061.62	5	\$867.00
24362		\$2,093.05	\$2,093.05	5	\$867.00
24363		\$2,688.15	\$2,688.15	7	\$1,205.00
24365		\$1,287.40	\$1,287.40	5	\$867.00
24366		\$1,387.41	\$1,387.41	5	\$867.00
24400		\$1,671.67	\$1,671.67	4	\$762.00
24410		\$2,112.60	\$2,112.60	4	\$762.00
24420		\$2,015.04	\$2,015.04	3	\$618.00
24430		\$1,896.36	\$1,896.36	3	\$618.00
24435		\$2,009.68	\$2,009.68	4	\$762.00
24470		\$0.00	\$0.00	0	\$0.00
24495		\$1,389.09	\$1,389.09	2	\$541.00
24498		\$1,779.47	\$1,779.47	3	\$618.00
24500		\$694.48	\$560.07	1	\$402.00
24505		\$1,017.80	\$866.22	1	\$402.00
24515		\$1,759.03	\$1,759.03	4	\$762.00
24516		\$1,741.86	\$1,741.86	4	\$762.00
24530		\$721.75	\$612.73	1	\$402.00
24535		\$1,254.19	\$1,105.60	1	\$402.00
24538		\$1,504.14	\$1,504.14	2	\$541.00
24545		\$1,582.09	\$1,582.09	4	\$762.00
24546		\$2,272.27	\$2,272.27	5	\$867.00
24560		\$632.44	\$492.81	1	\$402.00
24565		\$1,050.57	\$907.95	2	\$541.00
24566		\$1,319.68	\$1,319.68	2	\$541.00
24575		\$1,586.46	\$1,586.46	3	\$618.00
24576		\$630.49	\$528.93	1	\$402.00
24577		\$1,095.57	\$954.45	1	\$402.00
24579		\$1,716.28	\$1,716.28	3	\$618.00
24582		\$1,453.93	\$1,453.93	2	\$541.00
24586		\$2,214.47	\$2,214.47	4	\$762.00
24587		\$2,198.67	\$2,198.67	5	\$867.00
24600		\$794.54	\$641.46	1	\$402.00
24605		\$884.26	\$884.26	2	\$541.00
24615		\$1,435.54	\$1,435.54	3	\$618.00
24620		\$1,086.44	\$1,086.44	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
24635		\$2,266.61	\$2,266.61	3	\$618.00
24640		\$0.00	\$0.00	0	\$0.00
24650		\$537.51	\$401.61	0	\$0.00
24655		\$905.81	\$749.00	1	\$402.00
24665		\$1,300.01	\$1,300.01	4	\$762.00
24666		\$1,466.41	\$1,466.41	4	\$762.00
24670		\$564.33	\$456.81	1	\$402.00
24675		\$933.95	\$789.83	1	\$402.00
24685		\$1,363.75	\$1,363.75	3	\$618.00
24800		\$1,657.71	\$1,657.71	4	\$762.00
24802		\$2,016.82	\$2,016.82	5	\$867.00
24900		\$1,408.99	\$1,408.99	0	\$0.00
24920		\$1,420.07	\$1,420.07	0	\$0.00
24925		\$1,110.01	\$1,110.01	3	\$618.00
24930		\$1,475.54	\$1,475.54	0	\$0.00
24931		\$1,593.85	\$1,593.85	0	\$0.00
24935		\$1,988.26	\$1,988.26	0	\$0.00
24940		\$1,604.08	\$1,604.08	0	\$0.00
24999		BR	BR	0	\$0.00
25000		\$828.82	\$828.82	3	\$618.00
25001		\$612.28	\$612.28	0	\$0.00
25020		\$1,279.60	\$1,279.60	3	\$618.00
25023		\$2,304.71	\$2,304.71	3	\$618.00
25024		\$1,411.78	\$1,411.78	3	\$618.00
25025		\$2,236.40	\$2,236.40	3	\$618.00
25028		\$1,101.47	\$1,101.47	1	\$402.00
25031		\$991.37	\$991.37	2	\$541.00
25035		\$1,721.88	\$1,721.88	2	\$541.00
25040		\$1,200.01	\$1,200.01	5	\$867.00
25065		\$376.76	\$376.76	0	\$0.00
25066		\$913.66	\$913.66	2	\$541.00
25075		\$789.65	\$789.65	2	\$541.00
25076		\$1,189.14	\$1,189.14	3	\$618.00
25077		\$1,817.80	\$1,817.80	3	\$618.00
25085		\$1,043.57	\$1,043.57	3	\$618.00
25100		\$756.82	\$756.82	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
25101		\$868.77	\$868.77	3	\$618.00
25105		\$1,090.46	\$1,090.46	4	\$762.00
25107		\$1,209.04	\$1,209.04	3	\$618.00
25109		\$1,000.30	\$1,000.30	0	\$0.00
25110		\$897.23	\$897.23	3	\$618.00
25111		\$666.00	\$666.00	3	\$618.00
25112		\$811.34	\$811.34	4	\$762.00
25115		\$1,877.30	\$1,877.30	4	\$762.00
25116		\$1,655.88	\$1,655.88	4	\$762.00
25118		\$833.98	\$833.98	2	\$541.00
25119		\$1,129.28	\$1,129.28	3	\$618.00
25120		\$1,487.92	\$1,487.92	3	\$618.00
25125		\$1,673.10	\$1,673.10	3	\$618.00
25126		\$1,683.76	\$1,683.76	3	\$618.00
25130		\$960.49	\$960.49	3	\$618.00
25135		\$1,185.42	\$1,185.42	3	\$618.00
25136		\$1,022.53	\$1,022.53	3	\$618.00
25145		\$1,511.25	\$1,511.25	2	\$541.00
25150		\$1,272.88	\$1,272.88	2	\$541.00
25151		\$1,647.20	\$1,647.20	2	\$541.00
25170		\$2,169.06	\$2,169.06	0	\$0.00
25210		\$1,050.40	\$1,050.40	3	\$618.00
25215		\$1,378.09	\$1,378.09	4	\$762.00
25230		\$936.49	\$936.49	4	\$762.00
25240		\$999.82	\$999.82	4	\$762.00
25246		\$875.81	\$155.24	0	\$0.00
25248		\$1,108.41	\$1,108.41	2	\$541.00
25250		\$1,042.43	\$1,042.43	1	\$402.00
25251		\$1,439.45	\$1,439.45	1	\$402.00
25259		\$750.32	\$750.32	0	\$0.00
25260		\$1,745.04	\$1,745.04	4	\$762.00
25263		\$1,736.10	\$1,736.10	2	\$541.00
25265		\$1,984.18	\$1,984.18	3	\$618.00
25270		\$1,487.47	\$1,487.47	4	\$762.00
25272		\$1,633.22	\$1,633.22	3	\$618.00
25274		\$1,842.78	\$1,842.78	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
25275		\$1,326.65	\$1,326.65	4	\$762.00
25280		\$1,627.91	\$1,627.91	4	\$762.00
25290		\$1,644.57	\$1,644.57	3	\$618.00
25295		\$1,538.10	\$1,538.10	3	\$618.00
25300		\$1,424.64	\$1,424.64	3	\$618.00
25301		\$1,367.26	\$1,367.26	3	\$618.00
25310		\$1,739.56	\$1,739.56	3	\$618.00
25312		\$1,937.64	\$1,937.64	4	\$762.00
25315		\$2,031.74	\$2,031.74	3	\$618.00
25316		\$2,372.46	\$2,372.46	3	\$618.00
25320		\$1,803.86	\$1,803.86	3	\$618.00
25332		\$1,704.07	\$1,704.07	5	\$867.00
25335		\$2,037.42	\$2,037.42	3	\$618.00
25337		\$1,745.76	\$1,745.76	5	\$867.00
25350		\$1,866.84	\$1,866.84	3	\$618.00
25355		\$2,048.46	\$2,048.46	3	\$618.00
25360		\$1,832.02	\$1,832.02	3	\$618.00
25365		\$2,321.01	\$2,321.01	3	\$618.00
25370		\$2,439.77	\$2,439.77	3	\$618.00
25375		\$2,448.32	\$2,448.32	4	\$762.00
25390		\$2,060.32	\$2,060.32	3	\$618.00
25391		\$2,492.72	\$2,492.72	4	\$762.00
25392		\$2,467.63	\$2,467.63	3	\$618.00
25393		\$2,753.10	\$2,753.10	4	\$762.00
25394		\$1,558.59	\$1,558.59	0	\$0.00
25400		\$2,155.74	\$2,155.74	3	\$618.00
25405		\$2,623.44	\$2,623.44	4	\$762.00
25415		\$2,478.54	\$2,478.54	3	\$618.00
25420		\$2,871.92	\$2,871.92	4	\$762.00
25425		\$2,841.88	\$2,841.88	3	\$618.00
25426		\$2,735.04	\$2,735.04	4	\$762.00
25430		\$1,366.47	\$1,366.47	0	\$0.00
25431		\$1,483.71	\$1,483.71	0	\$0.00
25440		\$1,652.08	\$1,652.08	4	\$762.00
25441		\$1,916.14	\$1,916.14	5	\$867.00
25442		\$1,618.80	\$1,618.80	5	\$867.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
25443		\$1,579.24	\$1,579.24	5	\$867.00
25444		\$1,681.47	\$1,681.47	5	\$867.00
25445		\$1,463.21	\$1,463.21	5	\$867.00
25446		\$2,379.86	\$2,379.86	7	\$1,205.00
25447		\$1,572.54	\$1,572.54	5	\$867.00
25449		\$2,086.54	\$2,086.54	5	\$867.00
25450		\$1,479.26	\$1,479.26	3	\$618.00
25455		\$1,690.63	\$1,690.63	3	\$618.00
25490		\$1,910.60	\$1,910.60	3	\$618.00
25491		\$2,017.04	\$2,017.04	3	\$618.00
25492		\$2,285.56	\$2,285.56	3	\$618.00
25500		\$518.36	\$422.78	0	\$0.00
25505		\$1,014.15	\$864.81	1	\$402.00
25515		\$1,388.95	\$1,388.95	3	\$618.00
25520		\$1,125.64	\$1,006.91	1	\$402.00
25525		\$1,854.53	\$1,854.53	4	\$762.00
25526		\$2,200.12	\$2,200.12	5	\$867.00
25530		\$499.90	\$399.09	0	\$0.00
25535		\$979.54	\$852.60	1	\$402.00
25545		\$1,381.28	\$1,381.28	3	\$618.00
25560		\$519.79	\$415.99	0	\$0.00
25565		\$1,062.80	\$908.98	2	\$541.00
25574		\$1,171.05	\$1,171.05	3	\$618.00
25575		\$1,655.21	\$1,655.21	3	\$618.00
25600		\$573.63	\$459.38	0	\$0.00
25605		\$1,132.23	\$979.90	3	\$618.00
25606		\$1,229.95	\$1,229.95	3	\$618.00
25607		\$1,373.31	\$1,373.31	5	\$867.00
25608		\$1,574.05	\$1,574.05	5	\$867.00
25609		\$2,010.49	\$2,010.49	5	\$867.00
25622		\$583.99	\$471.24	0	\$0.00
25624		\$934.69	\$777.88	2	\$541.00
25628		\$1,348.84	\$1,348.84	3	\$618.00
25630		\$601.40	\$480.43	0	\$0.00
25635		\$886.69	\$673.13	1	\$402.00
25645		\$1,160.61	\$1,160.61	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
25650		\$634.84	\$514.62	0	\$0.00
25651		\$889.28	\$889.28	0	\$0.00
25652		\$1,201.60	\$1,201.60	0	\$0.00
25660		\$775.66	\$775.66	1	\$402.00
25670		\$1,246.85	\$1,246.85	3	\$618.00
25671		\$991.76	\$991.76	1	\$402.00
25675		\$905.22	\$762.60	1	\$402.00
25676		\$1,277.95	\$1,277.95	2	\$541.00
25680		\$880.03	\$880.03	2	\$541.00
25685		\$1,468.74	\$1,468.74	3	\$618.00
25690		\$905.57	\$905.57	1	\$402.00
25695		\$1,288.63	\$1,288.63	2	\$541.00
25800		\$1,564.35	\$1,564.35	4	\$762.00
25805		\$1,788.14	\$1,788.14	5	\$867.00
25810		\$1,692.77	\$1,692.77	5	\$867.00
25820		\$1,261.44	\$1,261.44	4	\$762.00
25825		\$1,526.62	\$1,526.62	5	\$867.00
25830		\$2,007.37	\$2,007.37	5	\$867.00
25900		\$1,771.11	\$1,771.11	0	\$0.00
25905		\$1,775.94	\$1,775.94	0	\$0.00
25907		\$1,621.93	\$1,621.93	3	\$618.00
25909		\$1,756.73	\$1,756.73	0	\$0.00
25915		\$3,020.56	\$3,020.56	0	\$0.00
25920		\$1,375.67	\$1,375.67	0	\$0.00
25922		\$1,203.02	\$1,203.02	3	\$618.00
25924		\$1,375.67	\$1,375.67	0	\$0.00
25927		\$1,693.34	\$1,693.34	0	\$0.00
25929		\$1,126.63	\$1,126.63	3	\$618.00
25931		\$1,597.03	\$1,597.03	0	\$0.00
25999		BR	BR	0	\$0.00
26010		\$563.42	\$258.77	0	\$0.00
26011		\$878.04	\$367.30	1	\$402.00
26020		\$837.32	\$837.32	2	\$541.00
26025		\$834.13	\$834.13	1	\$402.00
26030		\$979.37	\$979.37	2	\$541.00
26034		\$1,029.08	\$1,029.08	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
26035		\$1,454.10	\$1,454.10	0	\$0.00
26037		\$1,141.07	\$1,141.07	0	\$0.00
26040		\$600.91	\$600.91	4	\$762.00
26045		\$919.90	\$919.90	3	\$618.00
26055		\$1,339.21	\$532.02	2	\$541.00
26060		\$510.77	\$510.77	2	\$541.00
26070		\$572.82	\$572.82	2	\$541.00
26075		\$615.84	\$615.84	4	\$762.00
26080		\$737.88	\$737.88	4	\$762.00
26100		\$635.69	\$635.69	2	\$541.00
26105		\$644.79	\$644.79	1	\$402.00
26110		\$615.02	\$615.02	1	\$402.00
26115		\$1,351.77	\$696.91	2	\$541.00
26116		\$939.84	\$939.84	2	\$541.00
26117		\$1,286.99	\$1,286.99	3	\$618.00
26121		\$1,193.02	\$1,193.02	4	\$762.00
26123		\$1,489.29	\$1,489.29	4	\$762.00
26125		\$595.13	\$595.13	4	\$762.00
26130		\$881.13	\$881.13	3	\$618.00
26135		\$1,103.47	\$1,103.47	4	\$762.00
26140		\$998.93	\$998.93	2	\$541.00
26145		\$1,012.91	\$1,012.91	3	\$618.00
26160		\$1,239.33	\$585.22	3	\$618.00
26170		\$794.38	\$794.38	3	\$618.00
26180		\$865.34	\$865.34	3	\$618.00
26185		\$914.92	\$914.92	4	\$762.00
26200		\$892.77	\$892.77	2	\$541.00
26205		\$1,201.81	\$1,201.81	3	\$618.00
26210		\$863.74	\$863.74	2	\$541.00
26215		\$1,094.03	\$1,094.03	3	\$618.00
26230		\$1,010.13	\$1,010.13	7	\$1,205.00
26235		\$985.60	\$985.60	3	\$618.00
26236		\$872.58	\$872.58	3	\$618.00
26250		\$1,153.42	\$1,153.42	3	\$618.00
26255		\$1,767.96	\$1,767.96	3	\$618.00
26260		\$1,084.96	\$1,084.96	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
26261		\$1,252.67	\$1,252.67	3	\$618.00
26262		\$904.51	\$904.51	2	\$541.00
26320		\$675.69	\$675.69	2	\$541.00
26340		\$579.80	\$579.80	0	\$0.00
26350		\$1,702.41	\$1,702.41	1	\$402.00
26352		\$1,895.37	\$1,895.37	4	\$762.00
26356		\$2,144.74	\$2,144.74	4	\$762.00
26357		\$2,007.69	\$2,007.69	4	\$762.00
26358		\$2,123.24	\$2,123.24	4	\$762.00
26370		\$1,838.08	\$1,838.08	4	\$762.00
26372		\$2,084.57	\$2,084.57	4	\$762.00
26373		\$1,997.92	\$1,997.92	3	\$618.00
26390		\$1,865.11	\$1,865.11	4	\$762.00
26392		\$2,246.25	\$2,246.25	3	\$618.00
26410		\$1,362.81	\$1,362.81	3	\$618.00
26412		\$1,614.79	\$1,614.79	3	\$618.00
26415		\$1,646.39	\$1,646.39	4	\$762.00
26416		\$1,986.19	\$1,986.19	3	\$618.00
26418		\$1,354.65	\$1,354.65	4	\$762.00
26420		\$1,679.17	\$1,679.17	4	\$762.00
26426		\$1,587.28	\$1,587.28	3	\$618.00
26428		\$1,737.49	\$1,737.49	3	\$618.00
26432		\$1,164.15	\$1,164.15	3	\$618.00
26433		\$1,263.23	\$1,263.23	3	\$618.00
26434		\$1,449.59	\$1,449.59	3	\$618.00
26437		\$1,425.57	\$1,425.57	3	\$618.00
26440		\$1,517.35	\$1,517.35	3	\$618.00
26442		\$1,973.95	\$1,973.95	3	\$618.00
26445		\$1,437.09	\$1,437.09	3	\$618.00
26449		\$1,858.47	\$1,858.47	3	\$618.00
26450		\$899.30	\$899.30	3	\$618.00
26455		\$892.49	\$892.49	3	\$618.00
26460		\$861.94	\$861.94	3	\$618.00
26471		\$1,392.37	\$1,392.37	2	\$541.00
26474		\$1,370.71	\$1,370.71	2	\$541.00
26476		\$1,317.04	\$1,317.04	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
26477		\$1,325.86	\$1,325.86	1	\$402.00
26478		\$1,444.97	\$1,444.97	1	\$402.00
26479		\$1,428.32	\$1,428.32	1	\$402.00
26480		\$1,780.48	\$1,780.48	3	\$618.00
26483		\$1,955.92	\$1,955.92	3	\$618.00
26485		\$1,893.24	\$1,893.24	2	\$541.00
26489		\$1,780.24	\$1,780.24	3	\$618.00
26490		\$1,744.33	\$1,744.33	3	\$618.00
26492		\$1,913.12	\$1,913.12	3	\$618.00
26494		\$1,788.76	\$1,788.76	3	\$618.00
26496		\$1,879.36	\$1,879.36	3	\$618.00
26497		\$1,905.43	\$1,905.43	3	\$618.00
26498		\$2,496.96	\$2,496.96	4	\$762.00
26499		\$1,804.32	\$1,804.32	3	\$618.00
26500		\$1,437.83	\$1,437.83	4	\$762.00
26502		\$1,584.23	\$1,584.23	4	\$762.00
26508		\$1,450.91	\$1,450.91	3	\$618.00
26510		\$1,377.85	\$1,377.85	3	\$618.00
26516		\$1,593.30	\$1,593.30	1	\$402.00
26517		\$1,828.47	\$1,828.47	3	\$618.00
26518		\$1,844.43	\$1,844.43	3	\$618.00
26520		\$1,576.64	\$1,576.64	3	\$618.00
26525		\$1,587.96	\$1,587.96	3	\$618.00
26530		\$1,052.48	\$1,052.48	3	\$618.00
26531		\$1,234.74	\$1,234.74	7	\$1,205.00
26535		\$746.11	\$746.11	5	\$867.00
26536		\$1,302.88	\$1,302.88	5	\$867.00
26540		\$1,506.21	\$1,506.21	4	\$762.00
26541		\$1,816.89	\$1,816.89	7	\$1,205.00
26542		\$1,542.65	\$1,542.65	4	\$762.00
26545		\$1,575.83	\$1,575.83	4	\$762.00
26546		\$1,945.67	\$1,945.67	4	\$762.00
26548		\$1,724.92	\$1,724.92	4	\$762.00
26550		\$3,188.95	\$3,188.95	2	\$541.00
26551		\$6,766.65	\$6,766.65	0	\$0.00
26553		\$5,528.06	\$5,528.06	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
26554		\$7,870.51	\$7,870.51	0	\$0.00
26555		\$2,895.95	\$2,895.95	3	\$618.00
26556		\$6,887.96	\$6,887.96	0	\$0.00
26560		\$1,250.50	\$1,250.50	2	\$541.00
26561		\$1,888.15	\$1,888.15	3	\$618.00
26562		\$2,582.36	\$2,582.36	4	\$762.00
26565		\$1,541.71	\$1,541.71	5	\$867.00
26567		\$1,542.74	\$1,542.74	5	\$867.00
26568		\$2,021.56	\$2,021.56	3	\$618.00
26580		\$0.00	\$0.00	0	\$0.00
26587		\$0.00	\$0.00	0	\$0.00
26590		\$0.00	\$0.00	0	\$0.00
26591		\$1,074.60	\$1,074.60	3	\$618.00
26593		\$1,339.95	\$1,339.95	3	\$618.00
26596		\$1,456.09	\$1,456.09	2	\$541.00
26600		\$483.73	\$376.20	0	\$0.00
26605		\$652.85	\$526.66	2	\$541.00
26607		\$959.43	\$959.43	2	\$541.00
26608		\$962.47	\$962.47	4	\$762.00
26615		\$895.86	\$895.86	4	\$762.00
26641		\$753.04	\$616.40	0	\$0.00
26645		\$852.74	\$707.87	1	\$402.00
26650		\$1,025.79	\$1,025.79	2	\$541.00
26665		\$1,193.28	\$1,193.28	4	\$762.00
26670		\$690.07	\$550.44	0	\$0.00
26675		\$881.95	\$745.30	2	\$541.00
26676		\$1,011.64	\$1,011.64	2	\$541.00
26685		\$1,101.48	\$1,101.48	3	\$618.00
26686		\$1,243.15	\$1,243.15	3	\$618.00
26700		\$670.64	\$544.44	0	\$0.00
26705		\$827.27	\$693.61	2	\$541.00
26706		\$841.24	\$841.24	2	\$541.00
26715		\$946.68	\$946.68	4	\$762.00
26720		\$441.51	\$345.18	0	\$0.00
26725		\$758.42	\$603.86	0	\$0.00
26727		\$953.73	\$953.73	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
26735		\$977.42	\$977.42	4	\$762.00
26740		\$441.83	\$376.86	0	\$0.00
26742		\$783.51	\$635.66	2	\$541.00
26746		\$965.57	\$965.57	5	\$867.00
26750		\$387.12	\$307.97	0	\$0.00
26755		\$636.51	\$505.84	0	\$0.00
26756		\$847.48	\$847.48	2	\$541.00
26765		\$730.90	\$730.90	4	\$762.00
26770		\$592.71	\$453.07	0	\$0.00
26775		\$770.20	\$617.87	0	\$0.00
26776		\$899.09	\$899.09	2	\$541.00
26785		\$739.32	\$739.32	2	\$541.00
26820		\$1,771.56	\$1,771.56	5	\$867.00
26841		\$1,663.56	\$1,663.56	4	\$762.00
26842		\$1,775.21	\$1,775.21	4	\$762.00
26843		\$1,637.66	\$1,637.66	3	\$618.00
26844		\$1,812.79	\$1,812.79	3	\$618.00
26850		\$1,571.74	\$1,571.74	4	\$762.00
26852		\$1,754.96	\$1,754.96	4	\$762.00
26860		\$1,291.41	\$1,291.41	3	\$618.00
26861		\$225.28	\$225.28	2	\$541.00
26862		\$1,619.49	\$1,619.49	4	\$762.00
26863		\$509.68	\$509.68	3	\$618.00
26910		\$1,556.78	\$1,556.78	3	\$618.00
26951		\$1,209.58	\$1,209.58	2	\$541.00
26952		\$1,480.26	\$1,480.26	4	\$762.00
26989		BR	BR	0	\$0.00
26990		\$1,240.54	\$1,240.54	1	\$402.00
26991		\$1,161.45	\$1,044.96	1	\$402.00
26992		\$1,994.06	\$1,994.06	0	\$0.00
27000		\$905.96	\$905.96	2	\$541.00
27001		\$1,090.14	\$1,090.14	3	\$618.00
27003		\$1,149.72	\$1,149.72	3	\$618.00
27005		\$1,467.06	\$1,467.06	0	\$0.00
27006		\$1,476.77	\$1,476.77	0	\$0.00
27025		\$1,641.07	\$1,641.07	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27027		\$1,759.65	\$1,759.65	0	\$0.00
27030		\$1,906.04	\$1,906.04	0	\$0.00
27033		\$1,960.47	\$1,960.47	3	\$618.00
27035		\$2,382.21	\$2,382.21	4	\$762.00
27036		\$1,922.74	\$1,922.74	0	\$0.00
27040		\$439.73	\$396.42	1	\$402.00
27041		\$1,368.53	\$1,368.53	2	\$541.00
27047		\$1,146.08	\$1,028.85	2	\$541.00
27048		\$932.68	\$932.68	3	\$618.00
27049		\$1,874.95	\$1,874.95	3	\$618.00
27050		\$725.64	\$725.64	3	\$618.00
27052		\$1,006.06	\$1,006.06	3	\$618.00
27054		\$1,326.13	\$1,326.13	0	\$0.00
27057		\$1,926.50	\$1,926.50	0	\$0.00
27060		\$841.48	\$841.48	5	\$867.00
27062		\$879.66	\$879.66	5	\$867.00
27065		\$946.51	\$946.51	5	\$867.00
27066		\$1,574.06	\$1,574.06	5	\$867.00
27067		\$2,059.25	\$2,059.25	5	\$867.00
27070		\$1,695.51	\$1,695.51	0	\$0.00
27071		\$1,839.50	\$1,839.50	0	\$0.00
27075		\$4,408.30	\$4,408.30	0	\$0.00
27076		\$3,095.72	\$3,095.72	0	\$0.00
27077		\$5,143.78	\$5,143.78	0	\$0.00
27078		\$1,984.10	\$1,984.10	0	\$0.00
27079		\$2,000.53	\$2,000.53	0	\$0.00
27080		\$953.49	\$953.49	2	\$541.00
27086		\$312.24	\$301.79	1	\$402.00
27087		\$1,270.71	\$1,270.71	3	\$618.00
27090		\$1,661.58	\$1,661.58	0	\$0.00
27091		\$3,052.28	\$3,052.28	0	\$0.00
27093		\$1,032.15	\$145.82	0	\$0.00
27095		\$940.28	\$165.20	0	\$0.00
27096		\$581.90	\$91.34	1	\$402.00
27097		\$1,285.33	\$1,285.33	3	\$618.00
27098		\$1,334.77	\$1,334.77	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27100		\$1,664.36	\$1,664.36	4	\$762.00
27105		\$1,761.76	\$1,761.76	4	\$762.00
27110		\$1,868.59	\$1,868.59	4	\$762.00
27111		\$1,772.39	\$1,772.39	4	\$762.00
27120		\$2,510.90	\$2,510.90	0	\$0.00
27122		\$2,176.99	\$2,176.99	0	\$0.00
27125		\$2,121.45	\$2,121.45	0	\$0.00
27130		\$2,819.18	\$2,819.18	0	\$0.00
27132		\$3,278.42	\$3,278.42	0	\$0.00
27134		\$3,915.55	\$3,915.55	0	\$0.00
27137		\$2,959.78	\$2,959.78	0	\$0.00
27138		\$3,085.99	\$3,085.99	0	\$0.00
27140		\$1,814.94	\$1,814.94	0	\$0.00
27146		\$2,486.82	\$2,486.82	0	\$0.00
27147		\$2,845.68	\$2,845.68	0	\$0.00
27151		\$2,660.82	\$2,660.82	0	\$0.00
27156		\$3,447.76	\$3,447.76	0	\$0.00
27158		\$0.00	\$0.00	0	\$0.00
27161		\$2,422.45	\$2,422.45	0	\$0.00
27165		\$2,592.07	\$2,592.07	0	\$0.00
27170		\$2,303.52	\$2,303.52	0	\$0.00
27175		\$1,263.19	\$1,263.19	0	\$0.00
27176		\$1,768.74	\$1,768.74	0	\$0.00
27177		\$2,182.64	\$2,182.64	0	\$0.00
27178		\$1,720.75	\$1,720.75	0	\$0.00
27179		\$1,926.17	\$1,926.17	0	\$0.00
27181		\$2,066.98	\$2,066.98	0	\$0.00
27185		\$0.00	\$0.00	0	\$0.00
27187		\$0.00	\$0.00	0	\$0.00
27193		\$1,038.68	\$935.63	1	\$402.00
27194		\$1,531.90	\$1,436.32	2	\$541.00
27200		\$392.89	\$327.92	0	\$0.00
27202		\$1,946.40	\$1,946.40	2	\$541.00
27215		\$1,447.53	\$1,447.53	0	\$0.00
27216		\$2,112.18	\$2,112.18	0	\$0.00
27217		\$2,042.31	\$2,042.31	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27218		\$2,696.90	\$2,696.90	0	\$0.00
27220		\$1,090.27	\$973.78	0	\$0.00
27222		\$1,894.41	\$1,894.41	0	\$0.00
27226		\$1,949.77	\$1,949.77	0	\$0.00
27227		\$3,278.14	\$3,278.14	0	\$0.00
27228		\$3,782.73	\$3,782.73	0	\$0.00
27230		\$986.11	\$875.60	1	\$402.00
27232		\$1,505.16	\$1,505.16	0	\$0.00
27235		\$1,811.02	\$1,811.02	0	\$0.00
27236		\$2,236.86	\$2,236.86	0	\$0.00
27238		\$883.21	\$883.21	1	\$402.00
27240		\$1,833.82	\$1,833.82	0	\$0.00
27244		\$2,291.92	\$2,291.92	0	\$0.00
27245		\$2,872.90	\$2,872.90	0	\$0.00
27246		\$854.03	\$759.95	1	\$402.00
27248		\$1,563.35	\$1,563.35	0	\$0.00
27250		\$964.15	\$964.15	1	\$402.00
27252		\$1,490.53	\$1,490.53	2	\$541.00
27253		\$1,903.48	\$1,903.48	0	\$0.00
27254		\$2,558.21	\$2,558.21	0	\$0.00
27256		\$0.00	\$0.00	0	\$0.00
27257		\$0.00	\$0.00	0	\$0.00
27258		\$0.00	\$0.00	0	\$0.00
27259		\$0.00	\$0.00	0	\$0.00
27265		\$811.14	\$811.14	1	\$402.00
27266		\$1,150.50	\$1,150.50	2	\$541.00
27267		\$822.32	\$822.32	0	\$0.00
27268		\$1,019.21	\$1,019.21	0	\$0.00
27269		\$2,452.31	\$2,452.31	0	\$0.00
27275		\$365.46	\$365.46	2	\$541.00
27280		\$1,998.79	\$1,998.79	0	\$0.00
27282		\$1,608.34	\$1,608.34	0	\$0.00
27284		\$3,158.25	\$3,158.25	0	\$0.00
27286		\$3,232.94	\$3,232.94	0	\$0.00
27290		\$3,147.71	\$3,147.71	0	\$0.00
27295		\$2,534.53	\$2,534.53	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27299		BR	BR	0	\$0.00
27301		\$1,131.56	\$1,018.80	3	\$618.00
27303		\$1,294.56	\$1,294.56	0	\$0.00
27305		\$933.90	\$933.90	2	\$541.00
27306		\$777.47	\$777.47	3	\$618.00
27307		\$938.73	\$938.73	3	\$618.00
27310		\$1,408.10	\$1,408.10	4	\$762.00
27323		\$358.47	\$337.56	1	\$402.00
27324		\$763.45	\$763.45	1	\$402.00
27325		\$1,041.75	\$1,041.75	2	\$541.00
27326		\$931.95	\$931.95	2	\$541.00
27327		\$796.10	\$687.83	2	\$541.00
27328		\$837.61	\$837.61	3	\$618.00
27329		\$1,970.87	\$1,970.87	4	\$762.00
27330		\$796.70	\$796.70	4	\$762.00
27331		\$947.29	\$947.29	4	\$762.00
27332		\$1,281.10	\$1,281.10	4	\$762.00
27333		\$1,160.26	\$1,160.26	4	\$762.00
27334		\$1,343.96	\$1,343.96	4	\$762.00
27335		\$1,523.61	\$1,523.61	4	\$762.00
27340		\$719.89	\$719.89	3	\$618.00
27345		\$957.14	\$957.14	4	\$762.00
27347		\$928.17	\$928.17	4	\$762.00
27350		\$1,282.25	\$1,282.25	4	\$762.00
27355		\$1,206.37	\$1,206.37	3	\$618.00
27356		\$1,450.64	\$1,450.64	4	\$762.00
27357		\$1,610.73	\$1,610.73	5	\$867.00
27358		\$620.44	\$620.44	5	\$867.00
27360		\$1,695.62	\$1,695.62	5	\$867.00
27365		\$2,352.88	\$2,352.88	0	\$0.00
27370		\$987.59	\$104.24	0	\$0.00
27372		\$904.48	\$803.67	7	\$1,205.00
27380		\$1,195.56	\$1,195.56	1	\$402.00
27381		\$1,618.20	\$1,618.20	3	\$618.00
27385		\$1,276.25	\$1,276.25	3	\$618.00
27386		\$1,672.10	\$1,672.10	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27390		\$874.19	\$874.19	1	\$402.00
27391		\$1,150.87	\$1,150.87	2	\$541.00
27392		\$1,409.95	\$1,409.95	3	\$618.00
27393		\$1,020.17	\$1,020.17	2	\$541.00
27394		\$1,316.29	\$1,316.29	3	\$618.00
27395		\$1,769.02	\$1,769.02	3	\$618.00
27396		\$1,245.27	\$1,245.27	3	\$618.00
27397		\$1,703.90	\$1,703.90	3	\$618.00
27400		\$1,362.92	\$1,362.92	3	\$618.00
27403		\$1,292.53	\$1,292.53	4	\$762.00
27405		\$1,346.02	\$1,346.02	4	\$762.00
27407		\$1,551.39	\$1,551.39	4	\$762.00
27409		\$1,910.75	\$1,910.75	4	\$762.00
27412		\$3,269.87	\$3,269.87	0	\$0.00
27415		\$2,728.00	\$2,728.00	0	\$0.00
27416		\$1,916.31	\$1,916.31	9	\$1,578.00
27418		\$1,649.99	\$1,649.99	3	\$618.00
27420		\$1,498.31	\$1,498.31	3	\$618.00
27422		\$1,494.38	\$1,494.38	7	\$1,205.00
27424		\$1,495.25	\$1,495.25	3	\$618.00
27425		\$886.57	\$886.57	7	\$1,205.00
27427		\$1,430.07	\$1,430.07	3	\$618.00
27428		\$2,103.90	\$2,103.90	4	\$762.00
27429		\$2,336.64	\$2,336.64	4	\$762.00
27430		\$1,476.04	\$1,476.04	4	\$762.00
27435		\$1,490.33	\$1,490.33	4	\$762.00
27437		\$1,301.98	\$1,301.98	4	\$762.00
27438		\$1,651.43	\$1,651.43	5	\$867.00
27440		\$1,394.45	\$1,394.45	5	\$867.00
27441		\$1,482.59	\$1,482.59	5	\$867.00
27442		\$1,742.05	\$1,742.05	5	\$867.00
27443		\$1,636.10	\$1,636.10	5	\$867.00
27445		\$2,524.01	\$2,524.01	0	\$0.00
27446		\$2,275.13	\$2,275.13	0	\$0.00
27447		\$3,035.60	\$3,035.60	0	\$0.00
27448		\$1,650.72	\$1,650.72	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27450		\$2,065.77	\$2,065.77	0	\$0.00
27454		\$2,532.50	\$2,532.50	0	\$0.00
27455		\$1,903.06	\$1,903.06	0	\$0.00
27457		\$1,964.43	\$1,964.43	0	\$0.00
27465		\$2,028.58	\$2,028.58	0	\$0.00
27466		\$2,341.14	\$2,341.14	0	\$0.00
27468		\$2,658.81	\$2,658.81	0	\$0.00
27470		\$2,346.90	\$2,346.90	0	\$0.00
27472		\$2,565.22	\$2,565.22	0	\$0.00
27475		\$1,319.67	\$1,319.67	0	\$0.00
27477		\$1,469.11	\$1,469.11	0	\$0.00
27479		\$1,904.56	\$1,904.56	0	\$0.00
27485		\$1,357.96	\$1,357.96	0	\$0.00
27486		\$2,751.75	\$2,751.75	0	\$0.00
27487		\$3,527.03	\$3,527.03	0	\$0.00
27488		\$2,296.41	\$2,296.41	0	\$0.00
27495		\$2,273.28	\$2,273.28	0	\$0.00
27496		\$976.38	\$976.38	5	\$867.00
27497		\$1,060.84	\$1,060.84	3	\$618.00
27498		\$1,166.97	\$1,166.97	3	\$618.00
27499		\$1,334.47	\$1,334.47	3	\$618.00
27500		\$1,063.15	\$910.82	1	\$402.00
27501		\$1,107.26	\$963.89	2	\$541.00
27502		\$1,571.36	\$1,571.36	2	\$541.00
27503		\$1,582.56	\$1,582.56	3	\$618.00
27506		\$2,528.09	\$2,528.09	0	\$0.00
27507		\$2,011.27	\$2,011.27	0	\$0.00
27508		\$1,053.13	\$928.43	1	\$402.00
27509		\$1,294.70	\$1,294.70	3	\$618.00
27510		\$1,366.47	\$1,366.47	1	\$402.00
27511		\$2,079.41	\$2,079.41	0	\$0.00
27513		\$2,666.03	\$2,666.03	0	\$0.00
27514		\$2,568.82	\$2,568.82	0	\$0.00
27516		\$1,034.23	\$891.61	1	\$402.00
27517		\$1,465.22	\$1,347.99	1	\$402.00
27519		\$2,236.16	\$2,236.16	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27520		\$652.14	\$515.49	1	\$402.00
27524		\$1,519.86	\$1,519.86	0	\$0.00
27530		\$784.79	\$663.08	1	\$402.00
27532		\$1,250.59	\$1,132.61	1	\$402.00
27535		\$1,802.53	\$1,802.53	0	\$0.00
27536		\$2,282.61	\$2,282.61	0	\$0.00
27538		\$972.59	\$823.25	1	\$402.00
27540		\$1,898.12	\$1,898.12	0	\$0.00
27550		\$1,007.83	\$883.13	1	\$402.00
27552		\$1,232.66	\$1,232.66	1	\$402.00
27556		\$2,183.86	\$2,183.86	0	\$0.00
27557		\$2,510.13	\$2,510.13	0	\$0.00
27558		\$2,594.39	\$2,594.39	0	\$0.00
27560		\$755.58	\$583.83	1	\$402.00
27562		\$875.79	\$875.79	1	\$402.00
27566		\$1,806.82	\$1,806.82	2	\$541.00
27570		\$294.03	\$294.03	1	\$402.00
27580		\$2,866.35	\$2,866.35	0	\$0.00
27590		\$1,591.74	\$1,591.74	0	\$0.00
27591		\$1,802.94	\$1,802.94	0	\$0.00
27592		\$1,381.28	\$1,381.28	0	\$0.00
27594		\$1,021.83	\$1,021.83	3	\$618.00
27596		\$1,481.28	\$1,481.28	0	\$0.00
27598		\$1,483.28	\$1,483.28	0	\$0.00
27599		BR	BR	0	\$0.00
27600		\$854.37	\$854.37	3	\$618.00
27601		\$879.00	\$879.00	3	\$618.00
27602		\$1,048.04	\$1,048.04	3	\$618.00
27603		\$1,239.92	\$799.36	2	\$541.00
27604		\$1,047.09	\$737.95	2	\$541.00
27605		\$921.73	\$434.14	1	\$402.00
27606		\$1,133.39	\$630.86	1	\$402.00
27607		\$1,214.18	\$1,214.18	2	\$541.00
27610		\$1,285.83	\$1,285.83	2	\$541.00
27612		\$1,123.73	\$1,123.73	3	\$618.00
27613		\$467.83	\$316.25	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27614		\$1,160.41	\$845.30	2	\$541.00
27615		\$1,901.32	\$1,901.32	3	\$618.00
27618		\$1,132.13	\$763.26	2	\$541.00
27619		\$1,546.33	\$1,210.31	3	\$618.00
27620		\$955.14	\$955.14	4	\$762.00
27625		\$1,244.64	\$1,244.64	4	\$762.00
27626		\$1,333.52	\$1,333.52	4	\$762.00
27630		\$1,108.85	\$764.62	3	\$618.00
27635		\$1,218.75	\$1,218.75	3	\$618.00
27637		\$1,520.78	\$1,520.78	3	\$618.00
27638		\$1,589.19	\$1,589.19	3	\$618.00
27640		\$1,841.54	\$1,841.54	2	\$541.00
27641		\$1,495.94	\$1,495.94	2	\$541.00
27645		\$2,213.57	\$2,213.57	0	\$0.00
27646		\$1,981.17	\$1,981.17	0	\$0.00
27647		\$1,692.42	\$1,692.42	3	\$618.00
27648		\$791.19	\$103.47	0	\$0.00
27650		\$1,443.25	\$1,443.25	3	\$618.00
27652		\$1,540.53	\$1,540.53	3	\$618.00
27654		\$1,452.74	\$1,452.74	3	\$618.00
27656		\$1,151.10	\$700.84	2	\$541.00
27658		\$1,143.26	\$809.48	1	\$402.00
27659		\$1,469.78	\$1,053.87	2	\$541.00
27664		\$1,265.00	\$772.17	2	\$541.00
27665		\$1,322.58	\$879.78	2	\$541.00
27675		\$1,087.37	\$1,087.37	2	\$541.00
27676		\$1,271.17	\$1,271.17	3	\$618.00
27680		\$911.69	\$911.69	3	\$618.00
27681		\$1,063.52	\$1,063.52	2	\$541.00
27685		\$1,201.27	\$1,004.14	3	\$618.00
27686		\$1,622.33	\$1,173.56	3	\$618.00
27687		\$974.04	\$974.04	3	\$618.00
27690		\$1,275.31	\$1,275.31	4	\$762.00
27691		\$1,492.09	\$1,492.09	4	\$762.00
27692		\$239.26	\$239.26	3	\$618.00
27695		\$1,034.77	\$1,034.77	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27696		\$1,239.30	\$1,239.30	2	\$541.00
27698		\$1,374.85	\$1,374.85	2	\$541.00
27700		\$1,260.96	\$1,260.96	5	\$867.00
27702		\$2,016.81	\$2,016.81	0	\$0.00
27703		\$2,274.52	\$2,274.52	0	\$0.00
27704		\$1,067.12	\$1,067.12	2	\$541.00
27705		\$1,560.85	\$1,560.85	2	\$541.00
27707		\$773.61	\$773.61	2	\$541.00
27709		\$1,516.68	\$1,516.68	2	\$541.00
27712		\$2,100.40	\$2,100.40	0	\$0.00
27715		\$2,119.55	\$2,119.55	0	\$0.00
27720		\$1,781.99	\$1,781.99	0	\$0.00
27722		\$1,765.65	\$1,765.65	0	\$0.00
27724		\$2,546.64	\$2,546.64	0	\$0.00
27725		\$2,310.06	\$2,310.06	0	\$0.00
27726		\$1,802.55	\$1,802.55	8	\$1,187.00
27727		\$0.00	\$0.00	0	\$0.00
27730		\$1,984.40	\$1,131.66	2	\$541.00
27732		\$1,346.69	\$849.38	2	\$541.00
27734		\$1,221.44	\$1,221.44	2	\$541.00
27740		\$2,399.11	\$1,441.09	2	\$541.00
27742		\$1,886.37	\$1,490.62	2	\$541.00
27745		\$1,528.26	\$1,528.26	3	\$618.00
27750		\$692.97	\$572.01	1	\$402.00
27752		\$1,086.06	\$943.44	1	\$402.00
27756		\$1,105.99	\$1,105.99	3	\$618.00
27758		\$1,739.45	\$1,739.45	4	\$762.00
27759		\$2,024.61	\$2,024.61	4	\$762.00
27760		\$666.12	\$537.69	1	\$402.00
27762		\$1,010.59	\$862.74	1	\$402.00
27766		\$1,297.13	\$1,297.13	3	\$618.00
27767		\$488.50	\$490.70	0	\$0.00
27768		\$776.47	\$776.47	0	\$0.00
27769		\$1,357.02	\$1,357.02	9	\$1,578.00
27780		\$607.99	\$478.81	1	\$402.00
27781		\$872.92	\$732.54	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27784		\$1,129.62	\$1,129.62	3	\$618.00
27786		\$638.59	\$505.68	1	\$402.00
27788		\$889.61	\$740.27	1	\$402.00
27792		\$1,214.62	\$1,214.62	3	\$618.00
27808		\$684.89	\$527.34	1	\$402.00
27810		\$988.52	\$840.67	1	\$402.00
27814		\$1,612.05	\$1,612.05	3	\$618.00
27816		\$635.03	\$515.56	1	\$402.00
27818		\$1,028.71	\$876.38	1	\$402.00
27822		\$1,776.24	\$1,776.24	3	\$618.00
27823		\$2,028.86	\$2,028.86	3	\$618.00
27824		\$680.64	\$542.50	1	\$402.00
27825		\$1,176.92	\$1,000.70	2	\$541.00
27826		\$1,441.93	\$1,441.93	3	\$618.00
27827		\$2,231.81	\$2,231.81	3	\$618.00
27828		\$2,514.79	\$2,514.79	4	\$762.00
27829		\$1,008.57	\$1,008.57	2	\$541.00
27830		\$722.71	\$624.89	1	\$402.00
27831		\$745.88	\$745.88	1	\$402.00
27832		\$1,051.90	\$1,051.90	2	\$541.00
27840		\$693.37	\$693.37	1	\$402.00
27842		\$936.35	\$936.35	1	\$402.00
27846		\$1,483.20	\$1,483.20	3	\$618.00
27848		\$1,745.39	\$1,745.39	3	\$618.00
27860		\$361.97	\$361.97	1	\$402.00
27870		\$2,052.06	\$2,052.06	4	\$762.00
27871		\$1,406.26	\$1,406.26	4	\$762.00
27880		\$1,607.60	\$1,607.60	0	\$0.00
27881		\$1,783.76	\$1,783.76	0	\$0.00
27882		\$1,311.54	\$1,311.54	0	\$0.00
27884		\$1,182.64	\$1,182.64	3	\$618.00
27886		\$1,341.45	\$1,341.45	0	\$0.00
27888		\$1,439.25	\$1,439.25	0	\$0.00
27889		\$1,391.65	\$1,391.65	3	\$618.00
27892		\$1,093.00	\$1,093.00	3	\$618.00
27893		\$1,086.98	\$1,086.98	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
27894		\$1,526.46	\$1,526.46	3	\$618.00
27899		BR	BR	0	\$0.00
28001		\$679.15	\$504.42	0	\$0.00
28002		\$955.05	\$759.42	3	\$618.00
28003		\$1,326.12	\$1,202.91	3	\$618.00
28005		\$1,259.36	\$1,259.36	3	\$618.00
28008		\$826.03	\$664.74	3	\$618.00
28010		\$673.74	\$475.87	0	\$0.00
28011		\$935.55	\$695.86	3	\$618.00
28020		\$981.23	\$765.44	2	\$541.00
28022		\$879.19	\$715.66	2	\$541.00
28024		\$854.07	\$687.55	2	\$541.00
28035		\$877.87	\$764.37	4	\$762.00
28043		\$753.22	\$563.55	2	\$541.00
28045		\$885.34	\$703.14	3	\$618.00
28046		\$1,605.76	\$1,448.20	3	\$618.00
28050		\$817.14	\$657.34	2	\$541.00
28052		\$804.77	\$621.82	2	\$541.00
28054		\$748.42	\$563.24	2	\$541.00
28055		\$803.48	\$803.48	4	\$762.00
28060		\$952.24	\$773.78	2	\$541.00
28062		\$1,122.81	\$901.04	3	\$618.00
28070		\$908.46	\$752.40	3	\$618.00
28072		\$899.84	\$740.79	3	\$618.00
28080		\$771.39	\$603.38	3	\$618.00
28086		\$1,148.48	\$785.58	2	\$541.00
28088		\$879.92	\$649.19	2	\$541.00
28090		\$849.06	\$662.38	3	\$618.00
28092		\$802.87	\$597.52	3	\$618.00
28100		\$1,206.27	\$872.49	2	\$541.00
28102		\$1,144.45	\$1,144.45	3	\$618.00
28103		\$1,221.40	\$945.86	3	\$618.00
28104		\$939.91	\$766.68	2	\$541.00
28106		\$995.46	\$995.46	3	\$618.00
28107		\$1,047.58	\$826.56	3	\$618.00
28108		\$781.66	\$623.35	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
28110		\$817.16	\$640.20	3	\$618.00
28111		\$990.92	\$763.18	3	\$618.00
28112		\$909.14	\$709.77	3	\$618.00
28113		\$944.61	\$781.83	3	\$618.00
28114		\$1,785.61	\$1,527.25	3	\$618.00
28116		\$1,240.23	\$1,090.88	3	\$618.00
28118		\$1,073.73	\$877.34	4	\$762.00
28119		\$955.15	\$778.93	4	\$762.00
28120		\$1,139.51	\$865.47	7	\$1,205.00
28122		\$1,250.43	\$1,083.91	3	\$618.00
28124		\$891.70	\$739.37	0	\$0.00
28126		\$721.13	\$583.74	3	\$618.00
28130		\$1,237.89	\$1,237.89	3	\$618.00
28140		\$1,237.65	\$991.24	3	\$618.00
28150		\$816.51	\$650.74	3	\$618.00
28153		\$737.30	\$561.82	3	\$618.00
28160		\$766.73	\$626.35	3	\$618.00
28171		\$1,279.70	\$1,279.70	3	\$618.00
28173		\$1,402.93	\$1,205.05	3	\$618.00
28175		\$1,043.33	\$847.70	3	\$618.00
28190		\$659.75	\$432.01	0	\$0.00
28192		\$893.80	\$688.46	2	\$541.00
28193		\$982.98	\$814.22	4	\$762.00
28200		\$859.48	\$691.47	3	\$618.00
28202		\$1,220.27	\$958.92	3	\$618.00
28208		\$826.61	\$655.61	3	\$618.00
28210		\$1,101.13	\$880.85	3	\$618.00
28220		\$829.46	\$678.62	0	\$0.00
28222		\$956.00	\$826.82	1	\$402.00
28225		\$727.61	\$562.59	1	\$402.00
28226		\$831.66	\$698.75	1	\$402.00
28230		\$808.98	\$670.84	0	\$0.00
28232		\$735.59	\$567.59	0	\$0.00
28234		\$743.68	\$565.97	2	\$541.00
28238		\$1,301.49	\$1,081.96	3	\$618.00
28240		\$816.90	\$669.05	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
28250		\$1,027.33	\$856.33	3	\$618.00
28260		\$1,250.74	\$1,104.38	3	\$618.00
28261		\$1,735.49	\$1,616.76	3	\$618.00
28262		\$2,514.78	\$2,296.75	4	\$762.00
28264		\$1,579.45	\$1,527.92	1	\$402.00
28270		\$875.88	\$747.45	3	\$618.00
28272		\$731.12	\$572.07	0	\$0.00
28280		<del>\$1,016.37</del>	<del>\$809.54</del>	2	<del>\$541.00</del>
28285		\$864.78	\$704.99	3	\$618.00
28286		\$846.01	\$689.95	4	\$762.00
28288		\$932.52	\$827.99	3	\$618.00
28289		<del>\$1,312.28</del>	<del>\$1,103.20</del>	3	<del>\$618.00</del>
28290		<del>\$1,042.07</del>	<del>\$911.39</del>	2	<del>\$541.00</del>
28292		<del>\$1,224.95</del>	<del>\$1,070.38</del>	2	<del>\$541.00</del>
28293		<del>\$1,645.84</del>	<del>\$1,281.45</del>	3	<del>\$618.00</del>
28294		<del>\$1,347.84</del>	<del>\$1,155.19</del>	3	<del>\$618.00</del>
28296		<del>\$1,445.08</del>	<del>\$1,268.11</del>	3	<del>\$618.00</del>
28297		<del>\$1,521.32</del>	<del>\$1,343.60</del>	3	<del>\$618.00</del>
28298		<del>\$1,270.17</del>	<del>\$1,126.81</del>	3	<del>\$618.00</del>
28299		<del>\$1,593.22</del>	<del>\$1,419.98</del>	5	<del>\$867.00</del>
28300		\$1,851.12	\$1,394.89	2	\$541.00
28302		\$1,837.37	\$1,372.92	2	\$541.00
28304		\$1,419.77	\$1,241.31	2	\$541.00
28305		\$1,687.75	\$1,380.11	3	\$618.00
28306		\$1,072.67	\$850.90	4	\$762.00
28307		\$1,430.23	\$959.06	4	\$762.00
28308		\$936.88	\$762.90	2	\$541.00
28309		\$1,751.80	\$1,751.80	4	\$762.00
28310		\$962.04	\$790.30	3	\$618.00
28312		\$860.11	\$719.73	3	\$618.00
28313		<del>\$937.27</del>	<del>\$863.35</del>	2	<del>\$541.00</del>
28315		\$876.96	\$714.18	4	\$762.00
28320		\$1,339.78	\$1,339.78	4	\$762.00
28322		\$1,519.58	\$1,232.10	4	\$762.00
28340		\$0.00	\$0.00	0	\$0.00
28341		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
28344		\$0.00	\$0.00	0	\$0.00
28345		\$0.00	\$0.00	0	\$0.00
28360		\$0.00	\$0.00	0	\$0.00
28400		\$518.12	\$421.05	1	\$402.00
28405		\$828.85	\$754.93	2	\$541.00
28406		\$1,082.54	\$1,082.54	2	\$541.00
28415		\$2,445.86	\$2,445.86	3	\$618.00
28420		\$2,481.16	\$2,481.16	4	\$762.00
28430		\$494.67	\$384.91	0	\$0.00
28435		\$647.48	\$581.77	2	\$541.00
28436		\$871.21	\$871.21	2	\$541.00
28445		\$2,164.07	\$2,164.07	3	\$618.00
28446		\$2,346.41	\$2,346.41	9	\$1,578.00
28450		\$478.29	\$361.06	0	\$0.00
28455		\$579.13	\$537.31	0	\$0.00
28456		\$558.87	\$558.87	2	\$541.00
28465		\$1,105.14	\$1,105.14	3	\$618.00
28470		\$471.16	\$366.62	0	\$0.00
28475		\$574.17	\$508.46	0	\$0.00
28476		\$681.74	\$681.74	2	\$541.00
28485		\$936.23	\$936.23	4	\$762.00
28490		\$263.16	\$228.81	0	\$0.00
28495		\$328.46	\$297.10	0	\$0.00
28496		\$943.64	\$484.42	2	\$541.00
28505		\$1,075.35	\$696.77	3	\$618.00
28510		\$245.98	\$225.82	0	\$0.00
28515		\$304.84	\$279.45	0	\$0.00
28525		\$1,001.09	\$619.52	3	\$618.00
28530		\$251.10	\$205.56	0	\$0.00
28531		\$890.73	\$402.38	3	\$618.00
28540		\$397.37	\$383.18	0	\$0.00
28545		\$437.08	\$437.08	1	\$402.00
28546		\$889.45	\$654.98	2	\$541.00
28555		\$1,438.70	\$1,063.86	2	\$541.00
28570		\$366.87	\$321.32	0	\$0.00
28575		\$629.21	\$603.08	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
28576		\$1,146.92	\$791.49	3	\$618.00
28585		\$1,338.32	\$1,217.35	3	\$618.00
28600		\$417.01	\$370.72	0	\$0.00
28605		\$525.35	\$514.90	1	\$402.00
28606		\$1,653.72	\$896.57	2	\$541.00
28615		\$1,307.64	\$1,307.64	3	\$618.00
28630		\$239.96	\$232.50	0	\$0.00
28635		\$296.11	\$283.42	1	\$402.00
28636		\$715.31	\$482.34	3	\$618.00
28645		\$809.64	\$646.11	3	\$618.00
28660		\$227.00	\$194.15	0	\$0.00
28665		\$296.15	\$294.66	1	\$402.00
28666		\$694.75	\$410.26	3	\$618.00
28675		\$930.18	\$548.61	3	\$618.00
28705		\$2,593.55	\$2,593.55	4	\$762.00
28715		\$1,922.10	\$1,922.10	4	\$762.00
28725		\$1,677.50	\$1,677.50	4	\$762.00
28730		\$1,613.84	\$1,613.84	4	\$762.00
28735		\$1,576.07	\$1,576.07	4	\$762.00
28737		\$1,392.36	\$1,392.36	5	\$867.00
28740		\$1,601.26	\$1,212.23	4	\$762.00
28750		\$1,640.39	\$1,158.76	4	\$762.00
28755		\$943.74	\$719.73	4	\$762.00
28760		\$1,308.27	\$1,125.32	4	\$762.00
28800		\$1,181.95	\$1,181.95	0	\$0.00
28805		\$1,184.05	\$1,184.05	0	\$0.00
28810		\$904.11	\$904.11	2	\$541.00
28820		\$1,029.63	\$696.60	2	\$541.00
28825		\$916.14	\$604.01	2	\$541.00
28890		\$715.56	\$446.93	0	\$0.00
28899		BR	BR	0	\$0.00
29000		\$437.06	\$333.27	0	\$0.00
29010		\$433.34	\$315.36	0	\$0.00
29015		\$433.68	\$326.16	0	\$0.00
29020		\$427.30	\$285.43	0	\$0.00
29025		\$456.90	\$349.38	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
29035		\$420.33	\$276.21	0	\$0.00
29040		\$398.98	\$319.08	0	\$0.00
29044		\$478.40	\$331.30	0	\$0.00
29046		\$467.58	\$372.00	0	\$0.00
29049		\$173.57	\$120.55	0	\$0.00
29055		\$373.32	\$268.78	0	\$0.00
29058		\$228.10	\$169.11	0	\$0.00
29065		\$174.28	\$133.96	0	\$0.00
29075		\$161.22	\$120.15	0	\$0.00
29085		\$171.27	\$125.72	0	\$0.00
29086		\$124.00	\$93.38	0	\$0.00
29105		\$167.54	\$117.51	0	\$0.00
29125		\$126.13	\$82.08	0	\$0.00
29126		\$156.63	\$101.37	0	\$0.00
29130		\$78.76	\$56.36	0	\$0.00
29131		\$101.30	\$64.71	0	\$0.00
29200		\$111.37	\$82.25	0	\$0.00
29220		\$110.65	\$86.00	0	\$0.00
29240		\$125.04	\$89.20	0	\$0.00
29260		\$103.56	\$72.20	0	\$0.00
29280		\$105.66	\$69.82	0	\$0.00
29305		\$425.07	\$313.82	0	\$0.00
29325		\$462.71	\$352.20	0	\$0.00
29345		\$253.91	\$204.63	0	\$0.00
29355		\$261.85	\$220.03	0	\$0.00
29358		\$276.41	\$209.21	0	\$0.00
29365		\$226.21	\$176.18	0	\$0.00
29405		\$166.78	\$130.19	0	\$0.00
29425		\$180.01	\$145.66	0	\$0.00
29435		\$219.49	\$174.68	0	\$0.00
29440		\$100.69	\$71.57	0	\$0.00
29445		\$292.68	\$232.94	0	\$0.00
29450		\$0.00	\$0.00	0	\$0.00
29505		\$146.64	\$95.12	0	\$0.00
29515		\$127.39	\$99.76	0	\$0.00
29520		\$110.19	\$78.83	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
29530		\$108.85	\$74.51	0	\$0.00
29540		\$75.04	\$67.58	0	\$0.00
29550		\$72.68	\$62.23	0	\$0.00
29580		\$98.42	\$76.02	0	\$0.00
29590		\$102.83	\$87.15	0	\$0.00
29700		\$116.38	\$72.32	0	\$0.00
29705		\$128.31	\$97.69	0	\$0.00
29710		\$231.99	\$171.51	0	\$0.00
29715		\$166.95	\$110.94	0	\$0.00
29720		\$145.21	\$91.44	0	\$0.00
29730		\$126.78	\$94.67	0	\$0.00
29740		\$184.15	\$137.85	0	\$0.00
29750		\$0.00	\$0.00	0	\$0.00
29799		BR	BR	0	\$0.00
29800		\$1,114.27	\$1,114.27	3	\$618.00
29804		\$1,328.11	\$1,328.11	3	\$618.00
29805		\$962.33	\$962.33	3	\$618.00
29806		\$2,126.20	\$2,126.20	3	\$618.00
29807		\$2,071.43	\$2,071.43	3	\$618.00
29819		\$1,193.57	\$1,193.57	3	\$618.00
29820		\$1,101.89	\$1,101.89	3	\$618.00
29821		\$1,203.64	\$1,203.64	3	\$618.00
29822		\$1,168.96	\$1,168.96	3	\$618.00
29823		\$1,274.78	\$1,274.78	3	\$618.00
29824		\$1,299.70	\$1,299.70	5	\$867.00
29825		\$1,191.31	\$1,191.31	3	\$618.00
29826		\$1,373.45	\$1,373.45	3	\$618.00
29827		\$2,218.16	\$2,218.16	5	\$867.00
29828		\$1,809.38	\$1,809.38	9	\$1,578.00
29830		\$916.97	\$916.97	3	\$618.00
29834		\$998.79	\$998.79	3	\$618.00
29835		\$1,018.93	\$1,018.93	3	\$618.00
29836		\$1,186.59	\$1,186.59	3	\$618.00
29837		\$1,075.73	\$1,075.73	3	\$618.00
29838		\$1,208.07	\$1,208.07	3	\$618.00
29840		\$889.85	\$889.85	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
29843		\$960.46	\$960.46	3	\$618.00
29844		\$1,005.82	\$1,005.82	3	\$618.00
29845		\$1,144.19	\$1,144.19	3	\$618.00
29846		\$1,055.00	\$1,055.00	3	\$618.00
29847		\$1,093.53	\$1,093.53	3	\$618.00
29848		\$903.00	\$903.00	9	\$1,578.00
29850		\$1,085.04	\$1,085.04	4	\$762.00
29851		\$1,913.07	\$1,913.07	4	\$762.00
29855		\$1,611.84	\$1,611.84	4	\$762.00
29856		\$2,076.12	\$2,076.12	4	\$762.00
29860		\$1,245.22	\$1,245.22	4	\$762.00
29861		\$1,375.57	\$1,375.57	4	\$762.00
29862		\$1,529.95	\$1,529.95	9	\$1,578.00
29863		\$1,526.23	\$1,526.23	4	\$762.00
29866		\$2,123.77	\$2,123.77	0	\$0.00
29867		\$2,538.64	\$2,538.64	0	\$0.00
29868		\$3,446.00	\$3,446.00	0	\$0.00
29870		\$817.22	\$817.22	3	\$618.00
29871		\$1,024.40	\$1,024.40	3	\$618.00
29873		\$1,014.73	\$1,014.73	3	\$618.00
29874		\$1,078.40	\$1,078.40	3	\$618.00
29875		\$1,003.41	\$1,003.41	4	\$762.00
29876		\$1,236.48	\$1,236.48	4	\$762.00
29877		\$1,163.42	\$1,163.42	4	\$762.00
29879		\$1,254.11	\$1,254.11	3	\$618.00
29880		\$1,314.10	\$1,314.10	4	\$762.00
29881		\$1,218.00	\$1,218.00	4	\$762.00
29882		\$1,308.43	\$1,308.43	3	\$618.00
29883		\$1,652.53	\$1,652.53	3	\$618.00
29884		\$1,158.87	\$1,158.87	3	\$618.00
29885		\$1,411.90	\$1,411.90	3	\$618.00
29886		\$1,188.79	\$1,188.79	3	\$618.00
29887		\$1,405.75	\$1,405.75	3	\$618.00
29888		\$2,019.92	\$2,019.92	3	\$618.00
29889		\$2,359.82	\$2,359.82	3	\$618.00
29891		\$1,313.70	\$1,313.70	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
29892		\$1,388.42	\$1,388.42	3	\$618.00
29893		\$936.63	\$769.37	9	\$1,578.00
29894		\$1,059.85	\$1,059.85	3	\$618.00
29895		\$1,038.83	\$1,038.83	3	\$618.00
29897		\$1,087.37	\$1,087.37	3	\$618.00
29898		\$1,211.81	\$1,211.81	3	\$618.00
29899		\$2,002.04	\$2,002.04	3	\$618.00
29900		\$920.92	\$920.92	3	\$618.00
29901		\$1,013.96	\$1,013.96	3	\$618.00
29902		\$1,087.01	\$1,087.01	3	\$618.00
29904		\$1,208.72	\$1,208.72	7	\$1,205.00
29905		\$1,299.64	\$1,299.64	7	\$1,205.00
29906		\$1,369.08	\$1,369.08	7	\$1,205.00
29907		\$1,684.68	\$1,684.68	9	\$1,578.00
29999		BR	BR	0	\$0.00
30000		\$436.76	\$226.93	0	\$0.00
30020		\$371.76	\$230.63	0	\$0.00
30100		\$232.60	\$139.26	0	\$0.00
30110		\$391.19	\$256.79	0	\$0.00
30115		\$669.86	\$669.86	2	\$541.00
30117		\$596.07	\$512.44	3	\$618.00
30118		\$1,361.85	\$1,361.85	3	\$618.00
30120		\$864.40	\$860.66	1	\$402.00
30124		\$488.30	\$488.30	0	\$0.00
30125		\$1,052.68	\$1,052.68	2	\$541.00
30130		\$547.55	\$547.55	3	\$618.00
30140		\$588.10	\$588.10	2	\$541.00
30150		\$1,357.95	\$1,357.95	3	\$618.00
30160		\$1,393.11	\$1,393.11	4	\$762.00
30200		\$194.74	\$124.55	0	\$0.00
30210		\$254.80	\$191.33	0	\$0.00
30220		\$469.26	\$246.00	3	\$618.00
30300		\$451.75	\$235.96	0	\$0.00
30310		\$405.84	\$405.84	1	\$402.00
30320		\$722.04	\$722.04	2	\$541.00
30400		\$1,529.16	\$1,529.16	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
30410		\$1,933.45	\$1,933.45	5	\$867.00
30420		\$2,285.08	\$2,285.08	5	\$867.00
30430		\$1,229.24	\$1,229.24	3	\$618.00
30435		\$1,812.60	\$1,812.60	5	\$867.00
30450		\$2,653.69	\$2,653.69	7	\$1,205.00
30460		\$0.00	\$0.00	0	\$0.00
30462		\$0.00	\$0.00	0	\$0.00
30465		\$1,572.38	\$1,572.38	9	\$1,578.00
30520		\$869.63	\$869.63	4	\$762.00
30540		\$1,077.12	\$1,077.12	5	\$867.00
30545		\$1,609.97	\$1,609.97	5	\$867.00
30560		\$478.71	\$268.88	2	\$541.00
30580		\$1,107.70	\$1,027.81	4	\$762.00
30600		\$1,009.52	\$949.04	4	\$762.00
30620		\$941.60	\$941.60	7	\$1,205.00
30630		\$1,066.66	\$1,066.66	7	\$1,205.00
30801		\$256.33	\$248.11	1	\$402.00
30802		\$376.23	\$365.78	1	\$402.00
30901		\$205.24	\$126.84	0	\$0.00
30903		\$342.34	\$168.36	1	\$402.00
30905		\$437.25	\$224.44	1	\$402.00
30906		\$504.67	\$297.08	1	\$402.00
30915		\$1,045.26	\$1,045.26	2	\$541.00
30920		\$1,391.53	\$1,391.53	3	\$618.00
30930		\$230.80	\$230.80	4	\$762.00
30999		BR	BR	0	\$0.00
31000		\$317.77	\$203.52	0	\$0.00
31002		\$410.89	\$410.89	0	\$0.00
31020		\$558.68	\$511.64	2	\$541.00
31030		\$926.41	\$860.70	3	\$618.00
31032		\$975.79	\$975.79	4	\$762.00
31040		\$1,271.45	\$1,271.45	0	\$0.00
31050		\$785.99	\$785.99	2	\$541.00
31051		\$1,045.06	\$1,045.06	4	\$762.00
31070		\$677.81	\$677.81	2	\$541.00
31075		\$1,315.20	\$1,315.20	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
31080		\$1,595.09	\$1,595.09	4	\$762.00
31081		\$1,876.08	\$1,876.08	4	\$762.00
31084		\$1,895.43	\$1,895.43	4	\$762.00
31085		\$1,996.87	\$1,996.87	4	\$762.00
31086		\$1,825.87	\$1,825.87	4	\$762.00
31087		\$1,862.35	\$1,862.35	4	\$762.00
31090		\$1,448.69	\$1,448.69	5	\$867.00
31200		\$787.59	\$787.59	2	\$541.00
31201		\$1,218.24	\$1,218.24	5	\$867.00
31205		\$1,424.83	\$1,424.83	3	\$618.00
31225		\$2,656.88	\$2,656.88	0	\$0.00
31230		\$2,989.98	\$2,989.98	0	\$0.00
31231		\$360.90	\$161.53	0	\$0.00
31233		\$522.38	\$298.37	2	\$541.00
31235		\$606.88	\$354.50	1	\$402.00
31237		\$658.15	\$394.56	2	\$541.00
31238		\$686.06	\$434.42	1	\$402.00
31239		\$1,343.07	\$1,343.07	4	\$762.00
31240		\$352.93	\$352.93	2	\$541.00
31254		\$608.16	\$608.16	3	\$618.00
31255		\$899.55	\$899.55	5	\$867.00
31256		\$438.26	\$438.26	3	\$618.00
31267		\$710.44	\$710.44	3	\$618.00
31276		\$1,134.11	\$1,134.11	3	\$618.00
31287		\$516.69	\$516.69	3	\$618.00
31288		\$599.70	\$599.70	3	\$618.00
31290		\$2,365.86	\$2,365.86	0	\$0.00
31291		\$2,518.90	\$2,518.90	0	\$0.00
31292		\$2,046.96	\$2,046.96	0	\$0.00
31293		\$2,216.94	\$2,216.94	0	\$0.00
31294		\$2,557.74	\$2,557.74	0	\$0.00
31299		BR	BR	0	\$0.00
31300		\$2,110.28	\$2,110.28	5	\$867.00
31320		\$995.02	\$995.02	2	\$541.00
31360		\$2,490.75	\$2,490.75	0	\$0.00
31365		\$3,365.38	\$3,365.38	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
31367		\$3,154.76	\$3,154.76	0	\$0.00
31368		\$3,865.03	\$3,865.03	0	\$0.00
31370		\$3,085.01	\$3,085.01	0	\$0.00
31375		\$2,860.48	\$2,860.48	0	\$0.00
31380		\$2,853.70	\$2,853.70	0	\$0.00
31382		\$2,976.59	\$2,976.59	0	\$0.00
31390		\$3,921.15	\$3,921.15	0	\$0.00
31395		\$4,521.07	\$4,521.07	0	\$0.00
31400		\$1,623.24	\$1,623.24	2	\$541.00
31420		\$1,599.01	\$1,599.01	2	\$541.00
31500		\$236.89	\$236.89	0	\$0.00
31502		\$168.12	\$74.04	0	\$0.00
31505		\$170.22	\$99.29	0	\$0.00
31510		\$421.40	\$260.11	2	\$541.00
31511		\$427.48	\$266.19	2	\$541.00
31512		\$426.42	\$280.81	2	\$541.00
31513		\$289.86	\$289.86	2	\$541.00
31515		\$432.11	\$233.48	1	\$402.00
31520		\$0.00	\$0.00	0	\$0.00
31525		\$512.80	\$349.27	1	\$402.00
31526		\$349.06	\$349.06	2	\$541.00
31527		\$417.23	\$417.23	1	\$402.00
31528		\$308.73	\$308.73	2	\$541.00
31529		\$353.89	\$353.89	2	\$541.00
31530		\$434.89	\$434.89	2	\$541.00
31531		\$475.93	\$475.93	3	\$618.00
31535		\$417.61	\$417.61	2	\$541.00
31536		\$472.09	\$472.09	3	\$618.00
31540		\$542.86	\$542.86	3	\$618.00
31541		\$593.56	\$593.56	4	\$762.00
31545		\$784.35	\$784.35	4	\$762.00
31546		\$1,198.61	\$1,198.61	4	\$762.00
31560		\$698.49	\$698.49	5	\$867.00
31561		\$759.43	\$759.43	5	\$867.00
31570		\$756.90	\$506.01	2	\$541.00
31571		\$558.30	\$558.30	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
31575		\$235.45	\$161.53	0	\$0.00
31576		\$438.71	\$264.73	2	\$541.00
31577		\$489.80	\$326.27	2	\$541.00
31578		\$559.83	\$356.72	2	\$541.00
31579		\$477.11	\$305.36	0	\$0.00
31580		\$1,880.88	\$1,880.88	5	\$867.00
31582		\$3,135.89	\$3,135.89	5	\$867.00
31584		\$2,756.21	\$2,756.21	0	\$0.00
31587		\$1,770.52	\$1,770.52	0	\$0.00
31588		\$2,093.35	\$2,093.35	5	\$867.00
31590		\$1,253.54	\$1,253.54	5	\$867.00
31595		\$1,281.67	\$1,281.67	2	\$541.00
31599		BR	BR	0	\$0.00
31600		\$829.80	\$829.80	0	\$0.00
31601		\$562.08	\$562.08	0	\$0.00
31603		\$484.81	\$484.81	1	\$402.00
31605		\$398.42	\$398.42	0	\$0.00
31610		\$1,304.95	\$1,304.95	0	\$0.00
31611		\$924.66	\$924.66	3	\$618.00
31612		\$160.07	\$102.57	1	\$402.00
31613		\$795.48	\$795.48	2	\$541.00
31614		\$1,187.62	\$1,187.62	2	\$541.00
31615		\$374.18	\$266.65	1	\$402.00
31620		\$537.70	\$160.04	2	\$541.00
31622		\$542.32	\$295.16	1	\$402.00
31623		\$616.59	\$303.72	2	\$541.00
31624		\$558.33	\$302.95	2	\$541.00
31625		\$680.31	\$371.17	2	\$541.00
31628		\$728.84	\$410.75	2	\$541.00
31629		\$366.63	\$366.63	2	\$541.00
31630		\$472.36	\$472.36	2	\$541.00
31631		\$518.34	\$518.34	2	\$541.00
31632		\$149.47	\$116.61	0	\$0.00
31633		\$184.08	\$146.00	0	\$0.00
31635		\$430.60	\$430.60	2	\$541.00
31636		\$494.65	\$494.65	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
31637		\$176.56	\$176.56	1	\$402.00
31638		\$549.16	\$549.16	2	\$541.00
31640		\$591.36	\$591.36	2	\$541.00
31641		\$576.59	\$576.59	2	\$541.00
31643		\$384.30	\$384.30	2	\$541.00
31645		\$348.73	\$348.73	1	\$402.00
31646		\$303.11	\$303.11	1	\$402.00
31656		\$247.43	\$247.43	1	\$402.00
31715		\$136.87	\$136.87	0	\$0.00
31717		\$389.11	\$238.28	1	\$402.00
31720		\$197.92	\$112.05	1	\$402.00
31725		\$298.97	\$205.63	0	\$0.00
31730		\$402.20	\$316.33	1	\$402.00
31750		\$1,972.29	\$1,972.29	5	\$867.00
31755		\$2,414.24	\$2,414.24	2	\$541.00
31760		\$2,655.94	\$2,655.94	0	\$0.00
31766		\$3,664.28	\$3,664.28	0	\$0.00
31770		\$2,704.52	\$2,704.52	0	\$0.00
31775		\$2,967.86	\$2,967.86	0	\$0.00
31780		\$2,344.40	\$2,344.40	0	\$0.00
31781		\$2,916.65	\$2,916.65	0	\$0.00
31785		\$2,234.00	\$2,234.00	0	\$0.00
31786		\$3,045.47	\$3,045.47	0	\$0.00
31800		\$1,003.12	\$1,003.12	0	\$0.00
31805		\$1,683.90	\$1,683.90	0	\$0.00
31820		\$798.09	\$751.04	1	\$402.00
31825		\$1,148.44	\$1,105.88	2	\$541.00
31830		\$810.83	\$780.22	2	\$541.00
31899		BR	BR	0	\$0.00
32035		\$1,193.35	\$1,193.35	0	\$0.00
32036		\$1,327.15	\$1,327.15	0	\$0.00
32095		\$1,130.24	\$1,130.24	0	\$0.00
32100		\$1,888.31	\$1,888.31	0	\$0.00
32110		\$2,723.49	\$2,723.49	0	\$0.00
32120		\$1,539.41	\$1,539.41	0	\$0.00
32124		\$1,652.73	\$1,652.73	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
32140		\$1,796.16	\$1,796.16	0	\$0.00
32141		\$1,796.50	\$1,796.50	0	\$0.00
32150		\$1,804.23	\$1,804.23	0	\$0.00
32151		\$1,827.35	\$1,827.35	0	\$0.00
32160		\$1,204.48	\$1,204.48	0	\$0.00
32200		\$1,954.95	\$1,954.95	0	\$0.00
32201		\$426.43	\$426.43	0	\$0.00
32215		\$1,503.45	\$1,503.45	0	\$0.00
32220		\$3,021.30	\$3,021.30	0	\$0.00
32225		\$1,798.56	\$1,798.56	0	\$0.00
32310		\$1,734.66	\$1,734.66	0	\$0.00
32320		\$2,981.23	\$2,981.23	0	\$0.00
32400		\$272.06	\$184.70	1	\$402.00
32402		\$1,041.43	\$1,041.43	0	\$0.00
32405		\$318.26	\$206.25	1	\$402.00
32420		\$241.51	\$241.51	1	\$402.00
32421		\$304.33	\$162.36	0	\$0.00
32422		\$393.38	\$258.03	0	\$0.00
32440		\$3,115.51	\$3,115.51	0	\$0.00
32442		\$3,392.07	\$3,392.07	0	\$0.00
32445		\$3,258.15	\$3,258.15	0	\$0.00
32480		\$2,929.00	\$2,929.00	0	\$0.00
32482		\$3,100.87	\$3,100.87	0	\$0.00
32484		\$2,667.44	\$2,667.44	0	\$0.00
32486		\$3,092.56	\$3,092.56	0	\$0.00
32488		\$3,288.80	\$3,288.80	0	\$0.00
32491		\$2,805.56	\$2,805.56	0	\$0.00
32500		\$2,765.87	\$2,765.87	0	\$0.00
32501		\$528.93	\$528.93	0	\$0.00
32503		\$3,825.49	\$3,825.49	0	\$0.00
32504		\$4,378.03	\$4,378.03	0	\$0.00
32540		\$2,003.59	\$2,003.59	0	\$0.00
32550		\$1,463.42	\$474.73	9	\$1,578.00
32551		\$366.83	\$366.83	0	\$0.00
32560		\$563.29	\$234.47	0	\$0.00
32601		\$658.71	\$658.71	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
32602		\$715.86	\$715.86	0	\$0.00
32603		\$905.33	\$905.33	0	\$0.00
32604		\$1,029.34	\$1,029.34	0	\$0.00
32605		\$833.04	\$833.04	0	\$0.00
32606		\$992.23	\$992.23	0	\$0.00
32650		\$1,440.75	\$1,440.75	0	\$0.00
32651		\$1,669.80	\$1,669.80	0	\$0.00
32652		\$2,397.81	\$2,397.81	0	\$0.00
32653		\$1,650.36	\$1,650.36	0	\$0.00
32654		\$1,649.52	\$1,649.52	0	\$0.00
32655		\$1,687.69	\$1,687.69	0	\$0.00
32656		\$1,723.06	\$1,723.06	0	\$0.00
32657		\$1,769.73	\$1,769.73	0	\$0.00
32658		\$1,567.46	\$1,567.46	0	\$0.00
32659		\$1,566.41	\$1,566.41	0	\$0.00
32660		\$2,231.07	\$2,231.07	0	\$0.00
32661		\$1,745.22	\$1,745.22	0	\$0.00
32662		\$2,102.03	\$2,102.03	0	\$0.00
32663		\$2,421.73	\$2,421.73	0	\$0.00
32664		\$1,820.30	\$1,820.30	0	\$0.00
32665		\$1,972.23	\$1,972.23	0	\$0.00
32800		\$1,746.43	\$1,746.43	0	\$0.00
32810		\$1,705.50	\$1,705.50	0	\$0.00
32815		\$2,857.32	\$2,857.32	0	\$0.00
32820		\$2,776.48	\$2,776.48	0	\$0.00
32850		BR	BR	0	\$0.00
32851		\$5,450.44	\$5,450.44	0	\$0.00
32852		\$6,085.50	\$6,085.50	0	\$0.00
32853		\$6,554.19	\$6,554.19	0	\$0.00
32854		\$7,057.08	\$7,057.08	0	\$0.00
32855		BR	BR	0	\$0.00
32856		BR	BR	0	\$0.00
32900		\$2,524.60	\$2,524.60	0	\$0.00
32905		\$2,587.75	\$2,587.75	0	\$0.00
32906		\$3,268.12	\$3,268.12	0	\$0.00
32940		\$2,424.74	\$2,424.74	0	\$0.00

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
32960		\$288.13	\$197.03	0	\$0.00
32997		\$660.41	\$660.41	0	\$0.00
32998		\$5,544.11	\$603.80	0	\$0.00
32999		BR	BR	0	\$0.00
33010		\$258.94	\$258.94	2	\$541.00
33011		\$261.19	\$261.19	2	\$541.00
33015		\$947.85	\$947.85	0	\$0.00
33020		\$1,611.26	\$1,611.26	0	\$0.00
33025		\$1,537.77	\$1,537.77	0	\$0.00
33030		\$2,363.85	\$2,363.85	0	\$0.00
33031		\$2,675.53	\$2,675.53	0	\$0.00
33050		\$1,844.06	\$1,844.06	0	\$0.00
33120		\$0.00	\$0.00	0	\$0.00
33130		\$0.00	\$0.00	0	\$0.00
33140		\$2,548.75	\$2,548.75	0	\$0.00
33141		\$542.13	\$542.13	0	\$0.00
33202		\$1,621.22	\$1,621.22	0	\$0.00
33203		\$1,662.52	\$1,662.52	0	\$0.00
33206		\$903.04	\$903.04	0	\$0.00
33207		\$1,031.12	\$1,031.12	0	\$0.00
33208		\$1,044.82	\$1,044.82	0	\$0.00
33210		\$366.46	\$366.46	0	\$0.00
33211		\$378.76	\$378.76	0	\$0.00
33212		\$723.47	\$723.47	3	\$618.00
33213		\$819.02	\$819.02	3	\$618.00
33214		\$1,022.57	\$1,022.57	0	\$0.00
33215		\$640.74	\$640.74	0	\$0.00
33216		\$803.34	\$803.34	0	\$0.00
33217		\$803.98	\$803.98	0	\$0.00
33218		\$784.33	\$784.33	0	\$0.00
33220		\$789.07	\$789.07	0	\$0.00
33222		\$745.30	\$745.30	2	\$541.00
33223		\$886.50	\$886.50	2	\$541.00
33224		\$1,038.66	\$1,038.66	0	\$0.00
33225		\$922.69	\$922.69	0	\$0.00
33226		\$1,000.07	\$1,000.07	0	\$0.00

Ohio Bureau of Workers' Compensation  
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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33233		\$520.36	\$520.36	0	\$0.00
33234		\$1,027.39	\$1,027.39	0	\$0.00
33235		\$1,301.19	\$1,301.19	0	\$0.00
33236		\$1,655.27	\$1,655.27	0	\$0.00
33237		\$1,777.24	\$1,777.24	0	\$0.00
33238		\$1,927.30	\$1,927.30	0	\$0.00
33240		\$984.75	\$984.75	0	\$0.00
33241		\$492.54	\$492.54	0	\$0.00
33243		\$2,823.51	\$2,823.51	0	\$0.00
33244		\$1,827.81	\$1,827.81	0	\$0.00
33249		\$1,814.71	\$1,814.71	0	\$0.00
33250		\$2,628.57	\$2,628.57	0	\$0.00
33251		\$3,000.52	\$3,000.52	0	\$0.00
33254		\$2,839.00	\$2,839.00	0	\$0.00
33255		\$3,422.46	\$3,422.46	0	\$0.00
33256		\$4,091.96	\$4,091.96	0	\$0.00
33257		\$1,234.52	\$1,234.52	0	\$0.00
33258		\$1,397.63	\$1,397.63	0	\$0.00
33259		\$1,837.04	\$1,837.04	0	\$0.00
33261		\$3,047.71	\$3,047.71	0	\$0.00
33265		\$2,839.00	\$2,839.00	0	\$0.00
33266		\$3,892.50	\$3,892.50	0	\$0.00
33282		\$667.17	\$667.17	0	\$0.00
33284		\$478.85	\$478.85	0	\$0.00
33300		\$2,244.32	\$2,244.32	0	\$0.00
33305		\$2,680.81	\$2,680.81	0	\$0.00
33310		\$2,337.46	\$2,337.46	0	\$0.00
33315		\$2,790.54	\$2,790.54	0	\$0.00
33320		\$2,064.37	\$2,064.37	0	\$0.00
33321		\$2,528.70	\$2,528.70	0	\$0.00
33322		\$2,584.26	\$2,584.26	0	\$0.00
33330		\$2,644.52	\$2,644.52	0	\$0.00
33332		\$2,860.76	\$2,860.76	0	\$0.00
33335		\$3,648.50	\$3,648.50	0	\$0.00
33400		\$3,629.81	\$3,629.81	0	\$0.00
33401		\$3,094.13	\$3,094.13	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33403		\$3,197.09	\$3,197.09	0	\$0.00
33404		\$3,571.45	\$3,571.45	0	\$0.00
33405		\$4,392.47	\$4,392.47	0	\$0.00
33406		\$4,666.68	\$4,666.68	0	\$0.00
33410		\$4,101.96	\$4,101.96	0	\$0.00
33411		\$4,550.52	\$4,550.52	0	\$0.00
33412		\$5,172.62	\$5,172.62	0	\$0.00
33413		\$5,279.23	\$5,279.23	0	\$0.00
33414		\$3,730.33	\$3,730.33	0	\$0.00
33415		\$3,285.76	\$3,285.76	0	\$0.00
33416		\$3,690.14	\$3,690.14	0	\$0.00
33417		\$3,531.67	\$3,531.67	0	\$0.00
33420		\$2,624.30	\$2,624.30	0	\$0.00
33422		\$3,301.82	\$3,301.82	0	\$0.00
33425		\$3,317.55	\$3,317.55	0	\$0.00
33426		\$4,156.33	\$4,156.33	0	\$0.00
33427		\$4,901.30	\$4,901.30	0	\$0.00
33430		\$4,212.74	\$4,212.74	0	\$0.00
33460		\$2,927.24	\$2,927.24	0	\$0.00
33463		\$3,215.29	\$3,215.29	0	\$0.00
33464		\$3,418.99	\$3,418.99	0	\$0.00
33465		\$3,508.01	\$3,508.01	0	\$0.00
33468		\$3,694.89	\$3,694.89	0	\$0.00
33470		\$2,669.95	\$2,669.95	0	\$0.00
33471		\$2,728.36	\$2,728.36	0	\$0.00
33472		\$2,872.29	\$2,872.29	0	\$0.00
33474		\$2,847.98	\$2,847.98	0	\$0.00
33475		\$3,916.18	\$3,916.18	0	\$0.00
33476		\$3,108.85	\$3,108.85	0	\$0.00
33478		\$3,343.99	\$3,343.99	0	\$0.00
33496		\$3,357.41	\$3,357.41	0	\$0.00
33500		\$3,080.58	\$3,080.58	0	\$0.00
33501		\$2,182.17	\$2,182.17	0	\$0.00
33502		\$2,665.62	\$2,665.62	0	\$0.00
33503		\$2,552.31	\$2,552.31	0	\$0.00
33504		\$3,060.11	\$3,060.11	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33505		\$3,179.34	\$3,179.34	0	\$0.00
33506		\$4,123.93	\$4,123.93	0	\$0.00
33507		\$3,695.25	\$3,695.25	0	\$0.00
33508		\$34.75	\$34.75	0	\$0.00
33510		\$3,716.73	\$3,716.73	0	\$0.00
33511		\$3,866.27	\$3,866.27	0	\$0.00
33512		\$4,079.37	\$4,079.37	0	\$0.00
33513		\$4,133.72	\$4,133.72	0	\$0.00
33514		\$4,245.41	\$4,245.41	0	\$0.00
33516		\$4,498.67	\$4,498.67	0	\$0.00
33517		\$290.36	\$290.36	0	\$0.00
33518		\$549.01	\$549.01	0	\$0.00
33519		\$805.40	\$805.40	0	\$0.00
33521		\$1,064.07	\$1,064.07	0	\$0.00
33522		\$1,321.20	\$1,321.20	0	\$0.00
33523		\$1,579.16	\$1,579.16	0	\$0.00
33530		\$662.55	\$662.55	0	\$0.00
33533		\$3,815.28	\$3,815.28	0	\$0.00
33534		\$4,109.74	\$4,109.74	0	\$0.00
33535		\$4,354.38	\$4,354.38	0	\$0.00
33536		\$4,546.24	\$4,546.24	0	\$0.00
33542		\$3,517.18	\$3,517.18	0	\$0.00
33545		\$4,403.53	\$4,403.53	0	\$0.00
33548		\$4,856.84	\$4,856.84	0	\$0.00
33572		\$502.69	\$502.69	0	\$0.00
33600		\$3,433.70	\$3,433.70	0	\$0.00
33602		\$3,419.72	\$3,419.72	0	\$0.00
33606		\$3,721.51	\$3,721.51	0	\$0.00
33608		\$3,821.07	\$3,821.07	0	\$0.00
33610		\$3,789.99	\$3,789.99	0	\$0.00
33611		\$3,969.60	\$3,969.60	0	\$0.00
33612		\$4,230.95	\$4,230.95	0	\$0.00
33615		\$4,040.27	\$4,040.27	0	\$0.00
33617		\$4,415.57	\$4,415.57	0	\$0.00
33619		\$5,427.27	\$5,427.27	0	\$0.00
33641		\$2,602.96	\$2,602.96	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33645		\$3,082.83	\$3,082.83	0	\$0.00
33647		\$3,543.86	\$3,543.86	0	\$0.00
33660		\$3,572.44	\$3,572.44	0	\$0.00
33665		\$3,562.30	\$3,562.30	0	\$0.00
33670		\$3,919.87	\$3,919.87	0	\$0.00
33675		\$4,507.03	\$4,507.03	0	\$0.00
33676		\$4,648.57	\$4,648.57	0	\$0.00
33677		\$4,832.51	\$4,832.51	0	\$0.00
33681		\$3,763.53	\$3,763.53	0	\$0.00
33684		\$3,646.47	\$3,646.47	0	\$0.00
33688		\$3,542.57	\$3,542.57	0	\$0.00
33690		\$2,499.29	\$2,499.29	0	\$0.00
33692		\$0.00	\$0.00	0	\$0.00
33694		\$0.00	\$0.00	0	\$0.00
33697		\$0.00	\$0.00	0	\$0.00
33702		\$3,288.55	\$3,288.55	0	\$0.00
33710		\$3,688.66	\$3,688.66	0	\$0.00
33720		\$0.00	\$0.00	0	\$0.00
33722		\$0.00	\$0.00	0	\$0.00
33724		\$3,245.68	\$3,245.68	0	\$0.00
33726		\$4,282.80	\$4,282.80	0	\$0.00
33730		\$0.00	\$0.00	0	\$0.00
33732		\$0.00	\$0.00	0	\$0.00
33735		\$0.00	\$0.00	0	\$0.00
33736		\$0.00	\$0.00	0	\$0.00
33737		\$0.00	\$0.00	0	\$0.00
33750		\$0.00	\$0.00	0	\$0.00
33755		\$0.00	\$0.00	0	\$0.00
33762		\$0.00	\$0.00	0	\$0.00
33764		\$0.00	\$0.00	0	\$0.00
33766		\$0.00	\$0.00	0	\$0.00
33767		\$0.00	\$0.00	0	\$0.00
33768		\$921.72	\$921.72	0	\$0.00
33770		\$0.00	\$0.00	0	\$0.00
33771		\$0.00	\$0.00	0	\$0.00
33774		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33775		\$0.00	\$0.00	0	\$0.00
33776		\$0.00	\$0.00	0	\$0.00
33777		\$0.00	\$0.00	0	\$0.00
33778		\$0.00	\$0.00	0	\$0.00
33779		\$0.00	\$0.00	0	\$0.00
33780		\$0.00	\$0.00	0	\$0.00
33781		\$0.00	\$0.00	0	\$0.00
33786		\$0.00	\$0.00	0	\$0.00
33788		\$0.00	\$0.00	0	\$0.00
33800		\$0.00	\$0.00	0	\$0.00
33802		\$0.00	\$0.00	0	\$0.00
33803		\$0.00	\$0.00	0	\$0.00
33813		\$0.00	\$0.00	0	\$0.00
33814		\$0.00	\$0.00	0	\$0.00
33820		\$0.00	\$0.00	0	\$0.00
33822		\$0.00	\$0.00	0	\$0.00
33824		\$0.00	\$0.00	0	\$0.00
33840		\$0.00	\$0.00	0	\$0.00
33845		\$0.00	\$0.00	0	\$0.00
33851		\$0.00	\$0.00	0	\$0.00
33852		\$0.00	\$0.00	0	\$0.00
33853		\$0.00	\$0.00	0	\$0.00
33860		\$0.00	\$0.00	0	\$0.00
33861		\$0.00	\$0.00	0	\$0.00
33863		\$0.00	\$0.00	0	\$0.00
33864		\$6,769.89	\$6,769.89	0	\$0.00
33870		\$0.00	\$0.00	0	\$0.00
33875		\$0.00	\$0.00	0	\$0.00
33877		\$0.00	\$0.00	0	\$0.00
33880		\$3,818.87	\$3,818.87	0	\$0.00
33881		\$3,278.77	\$3,278.77	0	\$0.00
33883		\$2,423.82	\$2,423.82	0	\$0.00
33884		\$905.42	\$905.42	0	\$0.00
33886		\$2,091.74	\$2,091.74	0	\$0.00
33889		\$1,809.82	\$1,809.82	0	\$0.00
33891		\$2,307.11	\$2,307.11	0	\$0.00

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2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
33910		\$3,024.08	\$3,024.08	0	\$0.00
33915		\$2,460.33	\$2,460.33	0	\$0.00
33916		\$3,120.15	\$3,120.15	0	\$0.00
33917		\$0.00	\$0.00	0	\$0.00
33920		\$0.00	\$0.00	0	\$0.00
33922		\$2,846.25	\$2,846.25	0	\$0.00
33924		\$0.00	\$0.00	0	\$0.00
33925		\$3,773.44	\$3,773.44	0	\$0.00
33926		\$5,109.33	\$5,109.33	0	\$0.00
33930		BR	BR	0	\$0.00
33933		BR	BR	0	\$0.00
33935		\$7,580.02	\$7,580.02	0	\$0.00
33940		BR	BR	0	\$0.00
33944		BR	BR	0	\$0.00
33945		\$5,322.47	\$5,322.47	0	\$0.00
33960		\$2,067.61	\$2,067.61	0	\$0.00
33961		\$1,252.93	\$1,252.93	0	\$0.00
33967		\$541.58	\$541.58	0	\$0.00
33968		\$73.31	\$73.31	0	\$0.00
33970		\$756.65	\$756.65	0	\$0.00
33971		\$1,281.88	\$1,281.88	0	\$0.00
33973		\$1,094.79	\$1,094.79	0	\$0.00
33974		\$1,837.72	\$1,837.72	0	\$0.00
33975		\$2,252.31	\$2,252.31	0	\$0.00
33976		\$2,599.90	\$2,599.90	0	\$0.00
33977		\$2,520.51	\$2,520.51	0	\$0.00
33978		\$2,782.59	\$2,782.59	0	\$0.00
33979		\$0.00	\$0.00	0	\$0.00
33980		\$0.00	\$0.00	0	\$0.00
33999		BR	BR	0	\$0.00
34001		\$1,637.60	\$1,637.60	0	\$0.00
34051		\$1,922.78	\$1,922.78	0	\$0.00
34101		\$1,278.04	\$1,278.04	3	\$618.00
34111		\$1,255.82	\$1,255.82	0	\$0.00
34151		\$2,895.91	\$2,895.91	0	\$0.00
34201		\$1,276.45	\$1,276.45	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
34203		\$2,011.98	\$2,011.98	0	\$0.00
34401		\$2,852.69	\$2,852.69	0	\$0.00
34421		\$1,489.21	\$1,489.21	0	\$0.00
34451		\$3,097.93	\$3,097.93	0	\$0.00
34471		\$1,275.22	\$1,275.22	0	\$0.00
34490		\$1,237.88	\$1,237.88	0	\$0.00
34501		\$0.00	\$0.00	0	\$0.00
34502		\$0.00	\$0.00	0	\$0.00
34510		\$0.00	\$0.00	0	\$0.00
34520		\$0.00	\$0.00	0	\$0.00
34530		\$0.00	\$0.00	0	\$0.00
34800		\$2,435.39	\$2,435.39	0	\$0.00
34802		\$2,676.50	\$2,676.50	0	\$0.00
34803		\$2,809.57	\$2,809.57	0	\$0.00
34804		\$2,676.50	\$2,676.50	0	\$0.00
34805		\$2,562.13	\$2,562.13	0	\$0.00
34806		\$225.19	\$225.19	0	\$0.00
34808		\$451.02	\$451.02	0	\$0.00
34812		\$737.53	\$737.53	0	\$0.00
34813		\$522.12	\$522.12	0	\$0.00
34820		\$1,064.96	\$1,064.96	0	\$0.00
34825		\$1,474.08	\$1,474.08	0	\$0.00
34826		\$451.76	\$451.76	0	\$0.00
34830		\$3,767.75	\$3,767.75	0	\$0.00
34831		\$3,866.56	\$3,866.56	0	\$0.00
34832		\$4,073.40	\$4,073.40	0	\$0.00
34833		\$1,335.59	\$1,335.59	0	\$0.00
34834		\$628.90	\$628.90	0	\$0.00
34900		\$1,999.89	\$1,999.89	0	\$0.00
35001		\$2,460.50	\$2,460.50	0	\$0.00
35002		\$2,528.81	\$2,528.81	0	\$0.00
35005		\$2,195.26	\$2,195.26	0	\$0.00
35011		\$2,115.59	\$2,115.59	0	\$0.00
35013		\$2,609.37	\$2,609.37	0	\$0.00
35021		\$2,394.46	\$2,394.46	0	\$0.00
35022		\$2,731.64	\$2,731.64	0	\$0.00

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2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35045		\$2,048.27	\$2,048.27	0	\$0.00
35081		\$3,325.20	\$3,325.20	0	\$0.00
35082		\$4,511.07	\$4,511.07	0	\$0.00
35091		\$4,141.97	\$4,141.97	0	\$0.00
35092		\$5,215.82	\$5,215.82	0	\$0.00
35102		\$3,630.90	\$3,630.90	0	\$0.00
35103		\$4,685.39	\$4,685.39	0	\$0.00
35111		\$2,895.09	\$2,895.09	0	\$0.00
35112		\$3,411.50	\$3,411.50	0	\$0.00
35121		\$3,526.38	\$3,526.38	0	\$0.00
35122		\$4,084.12	\$4,084.12	0	\$0.00
35131		\$2,939.80	\$2,939.80	0	\$0.00
35132		\$3,485.82	\$3,485.82	0	\$0.00
35141		\$2,369.69	\$2,369.69	0	\$0.00
35142		\$2,747.21	\$2,747.21	0	\$0.00
35151		\$2,684.06	\$2,684.06	0	\$0.00
35152		\$3,013.95	\$3,013.95	0	\$0.00
35180		\$0.00	\$0.00	0	\$0.00
35182		\$0.00	\$0.00	0	\$0.00
35184		\$0.00	\$0.00	0	\$0.00
35188		\$1,817.96	\$1,817.96	4	\$762.00
35189		\$3,261.57	\$3,261.57	0	\$0.00
35190		\$1,597.18	\$1,597.18	0	\$0.00
35201		\$1,958.02	\$1,958.02	0	\$0.00
35206		\$1,617.68	\$1,617.68	0	\$0.00
35207		\$1,460.85	\$1,460.85	4	\$762.00
35211		\$2,747.69	\$2,747.69	0	\$0.00
35216		\$2,313.45	\$2,313.45	0	\$0.00
35221		\$2,807.81	\$2,807.81	0	\$0.00
35226		\$1,764.96	\$1,764.96	0	\$0.00
35231		\$2,406.30	\$2,406.30	0	\$0.00
35236		\$2,033.10	\$2,033.10	0	\$0.00
35241		\$2,864.83	\$2,864.83	0	\$0.00
35246		\$3,101.86	\$3,101.86	0	\$0.00
35251		\$3,407.53	\$3,407.53	0	\$0.00
35256		\$2,177.36	\$2,177.36	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35261		\$2,106.02	\$2,106.02	0	\$0.00
35266		\$1,790.98	\$1,790.98	0	\$0.00
35271		\$2,734.87	\$2,734.87	0	\$0.00
35276		\$2,923.57	\$2,923.57	0	\$0.00
35281		\$3,222.83	\$3,222.83	0	\$0.00
35286		\$1,983.90	\$1,983.90	0	\$0.00
35301		\$2,288.02	\$2,288.02	0	\$0.00
35302		\$2,422.79	\$2,422.79	0	\$0.00
35303		\$2,663.45	\$2,663.45	0	\$0.00
35304		\$2,771.78	\$2,771.78	0	\$0.00
35305		\$2,663.45	\$2,663.45	0	\$0.00
35306		\$1,003.41	\$1,003.41	0	\$0.00
35311		\$3,208.73	\$3,208.73	0	\$0.00
35321		\$1,916.14	\$1,916.14	0	\$0.00
35331		\$3,122.22	\$3,122.22	0	\$0.00
35341		\$3,030.70	\$3,030.70	0	\$0.00
35351		\$2,716.71	\$2,716.71	0	\$0.00
35355		\$2,209.48	\$2,209.48	0	\$0.00
35361		\$3,314.22	\$3,314.22	0	\$0.00
35363		\$3,540.17	\$3,540.17	0	\$0.00
35371		\$1,786.18	\$1,786.18	0	\$0.00
35372		\$2,142.96	\$2,142.96	0	\$0.00
35390		\$362.07	\$362.07	0	\$0.00
35400		\$341.91	\$341.91	0	\$0.00
35450		\$1,161.96	\$1,161.96	0	\$0.00
35452		\$841.71	\$841.71	0	\$0.00
35454		\$742.94	\$742.94	0	\$0.00
35456		\$890.41	\$890.41	0	\$0.00
35458		\$1,135.13	\$1,135.13	0	\$0.00
35459		\$1,030.30	\$1,030.30	0	\$0.00
35460		\$730.23	\$730.23	0	\$0.00
35470		\$1,006.15	\$1,006.15	0	\$0.00
35471		\$1,164.20	\$1,164.20	0	\$0.00
35472		\$816.27	\$816.27	0	\$0.00
35473		\$720.58	\$720.58	0	\$0.00
35474		\$826.07	\$826.07	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35475		\$1,086.73	\$1,086.73	0	\$0.00
35476		\$709.21	\$709.21	0	\$0.00
35480		\$1,301.25	\$1,301.25	0	\$0.00
35481		\$925.72	\$925.72	0	\$0.00
35482		\$816.15	\$816.15	0	\$0.00
35483		\$966.90	\$966.90	0	\$0.00
35484		\$1,230.32	\$1,230.32	0	\$0.00
35485		\$1,138.05	\$1,138.05	0	\$0.00
35490		\$1,266.39	\$1,266.39	0	\$0.00
35491		\$884.64	\$884.64	0	\$0.00
35492		\$796.79	\$796.79	0	\$0.00
35493		\$957.94	\$957.94	0	\$0.00
35494		\$1,187.85	\$1,187.85	0	\$0.00
35495		\$1,114.45	\$1,114.45	0	\$0.00
35500		BR	BR	0	\$0.00
35501		\$2,333.99	\$2,333.99	0	\$0.00
35506		\$2,443.19	\$2,443.19	0	\$0.00
35508		\$2,356.03	\$2,356.03	0	\$0.00
35509		\$2,252.77	\$2,252.77	0	\$0.00
35510		\$2,710.30	\$2,710.30	0	\$0.00
35511		\$2,504.70	\$2,504.70	0	\$0.00
35512		\$2,658.53	\$2,658.53	0	\$0.00
35515		\$2,345.41	\$2,345.41	0	\$0.00
35516		\$1,953.47	\$1,953.47	0	\$0.00
35518		\$2,485.36	\$2,485.36	0	\$0.00
35521		\$2,624.05	\$2,624.05	0	\$0.00
35522		\$2,582.07	\$2,582.07	0	\$0.00
35523		\$2,745.69	\$2,745.69	0	\$0.00
35525		\$2,465.38	\$2,465.38	0	\$0.00
35526		\$3,450.64	\$3,450.64	0	\$0.00
35531		\$4,167.54	\$4,167.54	0	\$0.00
35533		\$3,270.29	\$3,270.29	0	\$0.00
35535		\$0.00	\$0.00	0	\$0.00
35536		\$3,678.69	\$3,678.69	0	\$0.00
35537		\$4,687.05	\$4,687.05	0	\$0.00
35538		\$5,237.70	\$5,237.70	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35539		\$4,922.49	\$4,922.49	0	\$0.00
35540		\$5,489.49	\$5,489.49	0	\$0.00
35548		\$2,606.85	\$2,606.85	0	\$0.00
35549		\$2,837.71	\$2,837.71	0	\$0.00
35551		\$3,216.74	\$3,216.74	0	\$0.00
35556		\$2,644.90	\$2,644.90	0	\$0.00
35558		\$2,505.83	\$2,505.83	0	\$0.00
35560		\$3,730.74	\$3,730.74	0	\$0.00
35563		\$2,820.33	\$2,820.33	0	\$0.00
35565		\$2,719.89	\$2,719.89	0	\$0.00
35566		\$3,224.71	\$3,224.71	0	\$0.00
35570		\$0.00	\$0.00	0	\$0.00
35571		\$2,882.09	\$2,882.09	0	\$0.00
35572		\$763.47	\$763.47	0	\$0.00
35583		\$2,732.97	\$2,732.97	0	\$0.00
35585		\$3,422.86	\$3,422.86	0	\$0.00
35587		\$2,983.11	\$2,983.11	0	\$0.00
35600		\$559.05	\$559.05	0	\$0.00
35601		\$2,191.70	\$2,191.70	0	\$0.00
35606		\$2,322.27	\$2,322.27	0	\$0.00
35612		\$1,966.86	\$1,966.86	0	\$0.00
35616		\$1,987.83	\$1,987.83	0	\$0.00
35621		\$2,357.05	\$2,357.05	0	\$0.00
35623		\$2,824.63	\$2,824.63	0	\$0.00
35626		\$3,300.45	\$3,300.45	0	\$0.00
35631		\$3,939.50	\$3,939.50	0	\$0.00
35633		\$0.00	\$0.00	0	\$0.00
35634		\$0.00	\$0.00	0	\$0.00
35636		\$3,437.55	\$3,437.55	0	\$0.00
35637		\$3,727.06	\$3,727.06	0	\$0.00
35638		\$3,786.63	\$3,786.63	0	\$0.00
35642		\$2,216.01	\$2,216.01	0	\$0.00
35645		\$2,156.14	\$2,156.14	0	\$0.00
35646		\$3,719.52	\$3,719.52	0	\$0.00
35647		\$3,355.94	\$3,355.94	0	\$0.00
35650		\$2,252.69	\$2,252.69	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35651		\$2,988.64	\$2,988.64	0	\$0.00
35654		\$2,934.56	\$2,934.56	0	\$0.00
35656		\$2,362.55	\$2,362.55	0	\$0.00
35661		\$2,280.76	\$2,280.76	0	\$0.00
35663		\$2,595.15	\$2,595.15	0	\$0.00
35665		\$2,501.80	\$2,501.80	0	\$0.00
35666		\$2,721.89	\$2,721.89	0	\$0.00
35671		\$2,357.70	\$2,357.70	0	\$0.00
35681		\$181.41	\$181.41	0	\$0.00
35682		\$815.24	\$815.24	0	\$0.00
35683		\$961.93	\$961.93	0	\$0.00
35685		\$439.45	\$439.45	0	\$0.00
35686		\$364.49	\$364.49	0	\$0.00
35691		\$2,223.45	\$2,223.45	0	\$0.00
35693		\$1,931.30	\$1,931.30	0	\$0.00
35694		\$2,332.71	\$2,332.71	0	\$0.00
35695		\$2,332.09	\$2,332.09	0	\$0.00
35697		\$341.16	\$341.16	0	\$0.00
35700		\$348.20	\$348.20	0	\$0.00
35701		\$1,104.57	\$1,104.57	0	\$0.00
35721		\$943.09	\$943.09	0	\$0.00
35741		\$1,026.58	\$1,026.58	0	\$0.00
35761		\$774.81	\$774.81	0	\$0.00
35800		\$963.88	\$963.88	0	\$0.00
35820		\$1,666.20	\$1,666.20	0	\$0.00
35840		\$1,252.49	\$1,252.49	0	\$0.00
35860		\$790.45	\$790.45	0	\$0.00
35870		\$2,681.37	\$2,681.37	0	\$0.00
35875		\$1,266.98	\$1,266.98	9	\$1,578.00
35876		\$2,059.60	\$2,059.60	9	\$1,578.00
35879		\$1,945.24	\$1,945.24	0	\$0.00
35881		\$2,181.61	\$2,181.61	0	\$0.00
35883		\$2,714.43	\$2,714.43	0	\$0.00
35884		\$2,883.56	\$2,883.56	0	\$0.00
35901		\$1,117.50	\$1,117.50	0	\$0.00
35903		\$1,271.29	\$1,271.29	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
35905		\$3,606.66	\$3,606.66	0	\$0.00
35907		\$3,975.11	\$3,975.11	0	\$0.00
36000		\$61.13	\$18.57	0	\$0.00
36002		\$379.61	\$236.24	0	\$0.00
36005		\$706.01	\$101.18	0	\$0.00
36010		\$262.65	\$262.65	0	\$0.00
36011		\$336.79	\$336.79	0	\$0.00
36012		\$375.44	\$375.44	0	\$0.00
36013		\$260.74	\$260.74	0	\$0.00
36014		\$322.13	\$322.13	0	\$0.00
36015		\$374.68	\$374.68	0	\$0.00
36100		\$334.16	\$334.16	0	\$0.00
36120		\$214.78	\$214.78	0	\$0.00
36140		\$214.80	\$214.80	0	\$0.00
36145		\$214.76	\$214.76	0	\$0.00
36160		\$277.24	\$277.24	0	\$0.00
36200		\$5,998.59	\$324.38	0	\$0.00
36215		\$502.01	\$502.01	0	\$0.00
36216		\$565.39	\$565.39	0	\$0.00
36217		\$679.58	\$679.58	0	\$0.00
36218		\$108.87	\$108.87	0	\$0.00
36245		\$509.52	\$509.52	0	\$0.00
36246		\$569.16	\$569.16	0	\$0.00
36247		\$676.59	\$676.59	0	\$0.00
36248		\$109.64	\$109.64	0	\$0.00
36260		\$1,216.31	\$1,216.31	3	\$618.00
36261		\$739.78	\$739.78	2	\$541.00
36262		\$561.45	\$561.45	1	\$402.00
36299		BR	BR	0	\$0.00
36400		\$0.00	\$0.00	0	\$0.00
36405		\$0.00	\$0.00	0	\$0.00
36406		\$0.00	\$0.00	0	\$0.00
36410		\$37.98	\$18.57	0	\$0.00
36415		\$5.94	\$5.94	0	\$0.00
36416		BR	BR	0	\$0.00
36420		\$0.00	\$0.00	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
36425		\$80.41	\$80.41	0	\$0.00
36430		\$78.51	\$78.51	0	\$0.00
36440		\$0.00	\$0.00	0	\$0.00
36450		\$0.00	\$0.00	0	\$0.00
36455		\$260.28	\$260.28	0	\$0.00
36460		\$0.00	\$0.00	0	\$0.00
36468		\$0.00	\$0.00	0	\$0.00
36469		\$0.00	\$0.00	0	\$0.00
36470		\$0.00	\$0.00	0	\$0.00
36471		\$0.00	\$0.00	0	\$0.00
36475		\$4,373.04	\$747.83	3	\$618.00
36476		\$865.92	\$365.84	3	\$618.00
36478		\$4,030.25	\$747.83	3	\$618.00
36479		\$874.08	\$365.84	3	\$618.00
36481		\$1,102.56	\$785.95	0	\$0.00
36500		\$379.12	\$379.12	0	\$0.00
36510		\$0.00	\$0.00	0	\$0.00
36511		\$192.08	\$192.08	0	\$0.00
36512		\$192.08	\$192.08	0	\$0.00
36513		\$192.08	\$192.08	0	\$0.00
36514		\$192.08	\$192.08	0	\$0.00
36515		\$195.06	\$195.06	0	\$0.00
36516		\$195.06	\$195.06	0	\$0.00
36522		\$0.00	\$0.00	0	\$0.00
36555		\$0.00	\$0.00	0	\$0.00
36556		\$580.08	\$258.25	1	\$402.00
36557		\$0.00	\$0.00	0	\$0.00
36558		\$1,428.95	\$603.09	2	\$541.00
36560		\$0.00	\$0.00	0	\$0.00
36561		\$2,698.79	\$727.49	3	\$618.00
36563		\$2,530.09	\$755.92	3	\$618.00
36565		\$2,176.84	\$727.49	3	\$618.00
36566		\$2,275.62	\$778.47	3	\$618.00
36568		\$0.00	\$0.00	0	\$0.00
36569		\$659.21	\$197.00	1	\$402.00
36570		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
36571		\$3,134.66	\$654.86	3	\$618.00
36575		\$347.64	\$116.90	2	\$541.00
36576		\$870.07	\$425.03	2	\$541.00
36578		\$1,106.36	\$482.12	2	\$541.00
36580		\$552.90	\$145.20	1	\$402.00
36581		\$1,305.52	\$450.54	2	\$541.00
36582		\$2,442.12	\$656.75	3	\$618.00
36583		\$1,436.49	\$662.15	3	\$618.00
36584		\$577.90	\$147.05	1	\$402.00
36585		\$3,070.20	\$615.78	3	\$618.00
36589		\$354.79	\$301.78	1	\$402.00
36590		\$761.11	\$410.15	1	\$402.00
36591		\$40.59	\$40.59	0	\$0.00
36592		\$50.15	\$50.15	0	\$0.00
36593		\$92.43	\$92.43	0	\$0.00
36595		\$1,715.45	\$410.96	0	\$0.00
36596		\$393.23	\$99.77	0	\$0.00
36597		\$336.59	\$131.99	0	\$0.00
36598		\$257.96	\$257.96	0	\$0.00
36600		\$63.13	\$33.26	0	\$0.00
36620		\$112.37	\$112.37	0	\$0.00
36625		\$218.23	\$218.23	0	\$0.00
36640		\$257.07	\$257.07	1	\$402.00
36660		\$149.13	\$149.13	0	\$0.00
36680		\$137.98	\$137.98	0	\$0.00
36800		\$340.32	\$340.32	3	\$618.00
36810		\$471.60	\$471.60	3	\$618.00
36815		\$315.80	\$315.80	3	\$618.00
36818		\$1,503.77	\$1,503.77	3	\$618.00
36819		\$1,711.03	\$1,711.03	3	\$618.00
36820		\$1,711.03	\$1,711.03	3	\$618.00
36821		\$1,135.15	\$1,135.15	3	\$618.00
36822		\$801.19	\$801.19	0	\$0.00
36823		\$2,545.28	\$2,545.28	0	\$0.00
36825		\$1,247.58	\$1,247.58	4	\$762.00
36830		\$1,448.95	\$1,448.95	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
36831		\$991.15	\$991.15	9	\$1,578.00
36832		\$1,276.83	\$1,276.83	4	\$762.00
36833		\$1,440.50	\$1,440.50	4	\$762.00
36834		\$1,227.65	\$1,227.65	3	\$618.00
36835		\$953.15	\$953.15	4	\$762.00
36838		\$2,532.70	\$2,532.70	0	\$0.00
36860		\$355.14	\$267.03	2	\$541.00
36861		\$321.17	\$321.17	3	\$618.00
36870		\$3,952.00	\$659.04	9	\$1,578.00
37140		\$2,736.62	\$2,736.62	0	\$0.00
37145		\$2,966.13	\$2,966.13	0	\$0.00
37160		\$2,577.20	\$2,577.20	0	\$0.00
37180		\$2,933.60	\$2,933.60	0	\$0.00
37181		\$3,149.19	\$3,149.19	0	\$0.00
37182		\$1,929.58	\$1,929.58	0	\$0.00
37183		\$893.30	\$893.30	0	\$0.00
37184		\$6,033.71	\$975.44	0	\$0.00
37185		\$1,969.38	\$357.58	0	\$0.00
37186		\$4,069.21	\$536.39	0	\$0.00
37187		\$5,868.61	\$907.02	0	\$0.00
37188		\$5,066.91	\$655.13	0	\$0.00
37195		\$631.80	\$631.80	0	\$0.00
37200		\$485.11	\$485.11	0	\$0.00
37201		\$600.25	\$600.25	0	\$0.00
37202		\$705.98	\$705.98	0	\$0.00
37203		\$602.58	\$602.58	0	\$0.00
37204		\$1,940.49	\$1,940.49	0	\$0.00
37205		\$964.46	\$964.46	0	\$0.00
37206		\$450.11	\$450.11	0	\$0.00
37207		\$962.48	\$962.48	0	\$0.00
37208		\$466.28	\$466.28	0	\$0.00
37209		\$242.57	\$242.57	0	\$0.00
37210		\$0.00	\$0.00	0	\$0.00
37215		\$2,238.55	\$2,238.55	0	\$0.00
37216		\$2,156.17	\$2,156.17	0	\$0.00
37250		\$234.64	\$234.64	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
37251		\$179.08	\$179.08	0	\$0.00
37500		\$1,421.10	\$1,421.10	3	\$618.00
37501		BR	BR	0	\$0.00
37565		\$1,311.77	\$1,311.77	0	\$0.00
37600		\$1,412.26	\$1,412.26	0	\$0.00
37605		\$1,610.66	\$1,610.66	0	\$0.00
37606		\$905.30	\$905.30	0	\$0.00
37607		\$808.29	\$808.29	3	\$618.00
37609		\$605.95	\$400.61	2	\$541.00
37615		\$806.61	\$806.61	0	\$0.00
37616		\$2,052.74	\$2,052.74	0	\$0.00
37617		\$2,563.56	\$2,563.56	0	\$0.00
37618		\$694.44	\$694.44	0	\$0.00
37620		\$1,318.78	\$1,318.78	0	\$0.00
37650		\$1,008.65	\$1,008.65	2	\$541.00
37660		\$2,418.37	\$2,418.37	0	\$0.00
37700		\$537.97	\$537.97	2	\$541.00
37718		\$845.89	\$845.89	3	\$618.00
37722		\$1,008.78	\$1,008.78	3	\$618.00
37735		\$1,340.49	\$1,340.49	3	\$618.00
37760		\$1,318.50	\$1,318.50	3	\$618.00
37765		\$948.49	\$948.49	0	\$0.00
37766		\$1,153.87	\$1,153.87	0	\$0.00
37780		\$551.07	\$551.07	3	\$618.00
37785		\$721.32	\$534.64	3	\$618.00
37788		\$2,535.01	\$2,535.01	0	\$0.00
37790		\$1,043.51	\$1,043.51	3	\$618.00
37799		BR	BR	0	\$0.00
38100		\$1,715.19	\$1,715.19	0	\$0.00
38101		\$1,811.47	\$1,811.47	0	\$0.00
38102		\$541.86	\$541.86	0	\$0.00
38115		\$1,862.59	\$1,862.59	0	\$0.00
38120		\$2,039.86	\$2,039.86	0	\$0.00
38129		BR	BR	0	\$0.00
38200		\$282.67	\$282.67	0	\$0.00
38204		BR	BR	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
38205		\$166.58	\$166.58	0	\$0.00
38206		\$166.58	\$166.58	0	\$0.00
38207		BR	BR	0	\$0.00
38208		BR	BR	0	\$0.00
38209		BR	BR	0	\$0.00
38210		BR	BR	0	\$0.00
38211		BR	BR	0	\$0.00
38212		BR	BR	0	\$0.00
38213		BR	BR	0	\$0.00
38214		BR	BR	0	\$0.00
38215		BR	BR	0	\$0.00
38220		\$383.12	\$118.79	0	\$0.00
38221		\$419.99	\$150.43	0	\$0.00
38230		\$562.83	\$562.83	0	\$0.00
38240		\$243.15	\$243.15	0	\$0.00
38241		\$243.15	\$243.15	0	\$0.00
38242		\$188.22	\$188.22	0	\$0.00
38300		\$504.52	\$325.31	1	\$402.00
38305		\$951.95	\$829.49	2	\$541.00
38308		\$981.44	\$829.11	2	\$541.00
38380		\$1,071.96	\$1,071.96	0	\$0.00
38381		\$1,647.46	\$1,647.46	0	\$0.00
38382		\$1,315.58	\$1,315.58	0	\$0.00
38500		\$603.50	\$475.81	2	\$541.00
38505		\$258.01	\$155.71	1	\$402.00
38510		\$960.94	\$798.90	2	\$541.00
38520		\$870.97	\$870.97	2	\$541.00
38525		\$769.53	\$769.53	2	\$541.00
38530		\$1,010.15	\$1,010.15	2	\$541.00
38542		\$843.68	\$843.68	2	\$541.00
38550		\$902.83	\$902.83	3	\$618.00
38555		\$1,868.85	\$1,868.85	4	\$762.00
38562		\$1,351.12	\$1,351.12	0	\$0.00
38564		\$1,341.30	\$1,341.30	0	\$0.00
38570		\$1,099.51	\$1,099.51	9	\$1,578.00
38571		\$1,637.81	\$1,637.81	9	\$1,578.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
38572		\$1,950.96	\$1,950.96	9	\$1,578.00
38589		BR	BR	0	\$0.00
38700		\$1,306.68	\$1,306.68	0	\$0.00
38720		\$1,986.28	\$1,986.28	0	\$0.00
38724		\$2,104.67	\$2,104.67	0	\$0.00
38740		\$1,220.48	\$1,220.48	2	\$541.00
38745		\$1,567.60	\$1,567.60	4	\$762.00
38746		\$549.02	\$549.02	0	\$0.00
38747		\$551.90	\$551.90	0	\$0.00
38760		\$1,556.57	\$1,556.57	2	\$541.00
38765		\$2,366.30	\$2,366.30	0	\$0.00
38770		\$1,560.01	\$1,560.01	0	\$0.00
38780		\$2,073.29	\$2,073.29	0	\$0.00
38790		\$915.63	\$168.18	0	\$0.00
38792		\$78.06	\$78.06	0	\$0.00
38794		\$616.84	\$616.84	0	\$0.00
38999		BR	BR	0	\$0.00
39000		\$877.68	\$877.68	0	\$0.00
39010		\$1,529.92	\$1,529.92	0	\$0.00
39200		\$1,703.18	\$1,703.18	0	\$0.00
39220		\$2,166.84	\$2,166.84	0	\$0.00
39400		\$846.79	\$846.79	0	\$0.00
39499		BR	BR	0	\$0.00
39501		\$1,638.36	\$1,638.36	0	\$0.00
39502		\$1,964.27	\$1,964.27	0	\$0.00
39503		\$0.00	\$0.00	0	\$0.00
39520		\$2,015.32	\$2,015.32	0	\$0.00
39530		\$1,884.12	\$1,884.12	0	\$0.00
39531		\$1,997.02	\$1,997.02	0	\$0.00
39540		\$1,629.85	\$1,629.85	0	\$0.00
39541		\$1,756.42	\$1,756.42	0	\$0.00
39545		\$1,734.20	\$1,734.20	0	\$0.00
39560		\$1,529.66	\$1,529.66	0	\$0.00
39561		\$2,235.52	\$2,235.52	0	\$0.00
39599		BR	BR	0	\$0.00
40490		\$239.55	\$146.24	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
40500		\$820.45	\$730.84	2	\$541.00
40510		\$915.38	\$761.55	2	\$541.00
40520		\$954.17	\$780.94	2	\$541.00
40525		\$1,170.83	\$1,170.83	2	\$541.00
40527		\$1,377.45	\$1,377.45	2	\$541.00
40530		\$959.06	\$854.52	2	\$541.00
40650		\$730.85	\$599.43	3	\$618.00
40652		\$859.39	\$763.06	3	\$618.00
40654		\$997.61	\$907.26	3	\$618.00
40700		\$0.00	\$0.00	0	\$0.00
40701		\$0.00	\$0.00	0	\$0.00
40702		\$0.00	\$0.00	0	\$0.00
40720		\$0.00	\$0.00	0	\$0.00
40761		\$0.00	\$0.00	0	\$0.00
40799		BR	BR	0	\$0.00
40800		\$266.33	\$185.69	0	\$0.00
40801		\$453.46	\$366.84	2	\$541.00
40804		\$297.19	\$188.92	0	\$0.00
40805		\$480.83	\$373.30	0	\$0.00
40806		\$129.55	\$97.44	0	\$0.00
40808		\$253.60	\$161.75	0	\$0.00
40810		\$289.97	\$201.85	0	\$0.00
40812		\$439.22	\$329.45	0	\$0.00
40814		\$647.10	\$537.33	2	\$541.00
40816		\$681.59	\$565.85	2	\$541.00
40818		\$591.09	\$467.89	1	\$402.00
40819		\$535.14	\$423.88	1	\$402.00
40820		\$311.50	\$283.87	0	\$0.00
40830		\$382.74	\$340.92	0	\$0.00
40831		\$483.89	\$443.56	1	\$402.00
40840		\$1,399.90	\$1,307.31	2	\$541.00
40842		\$1,394.36	\$1,274.89	3	\$618.00
40843		\$1,839.53	\$1,667.79	3	\$618.00
40844		\$2,437.21	\$2,281.89	5	\$867.00
40845		\$2,775.03	\$2,601.05	5	\$867.00
40899		BR	BR	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
41000		\$295.90	\$215.26	0	\$0.00
41005		\$308.46	\$228.56	1	\$402.00
41006		\$606.13	\$535.19	1	\$402.00
41007		\$576.45	\$509.99	1	\$402.00
41008		\$625.98	\$547.57	1	\$402.00
41009		\$669.32	\$593.16	1	\$402.00
41010		\$0.00	\$0.00	0	\$0.00
41015		\$740.15	\$641.58	1	\$402.00
41016		\$753.95	\$650.16	1	\$402.00
41017		\$751.04	\$659.19	1	\$402.00
41018		\$866.67	\$750.93	1	\$402.00
41019		\$986.13	\$986.13	6	\$1,008.00
41100		\$329.96	\$244.84	0	\$0.00
41105		\$304.55	\$218.68	0	\$0.00
41108		\$255.44	\$174.05	0	\$0.00
41110		\$317.58	\$227.97	0	\$0.00
41112		\$551.23	\$434.74	2	\$541.00
41113		\$617.12	\$494.66	2	\$541.00
41114		\$1,378.51	\$1,192.58	2	\$541.00
41115		\$0.00	\$0.00	0	\$0.00
41116		\$524.79	\$415.03	1	\$402.00
41120		\$1,395.82	\$1,395.82	5	\$867.00
41130		\$1,571.85	\$1,571.85	0	\$0.00
41135		\$3,065.87	\$3,065.87	0	\$0.00
41140		\$3,363.58	\$3,363.58	0	\$0.00
41145		\$3,977.31	\$3,977.31	0	\$0.00
41150		\$3,112.75	\$3,112.75	0	\$0.00
41153		\$3,207.94	\$3,207.94	0	\$0.00
41155		\$3,696.45	\$3,696.45	0	\$0.00
41250		\$395.23	\$285.46	2	\$541.00
41251		\$464.50	\$339.80	2	\$541.00
41252		\$567.07	\$424.45	2	\$541.00
41500		\$586.13	\$586.13	1	\$402.00
41510		\$0.00	\$0.00	0	\$0.00
41512		\$0.00	\$0.00	0	\$0.00
41520		\$537.02	\$472.06	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
41530		\$0.00	\$0.00	0	\$0.00
41599		BR	BR	0	\$0.00
41800		\$300.68	\$208.83	1	\$402.00
41805		\$311.38	\$282.25	0	\$0.00
41806		\$501.84	\$466.75	0	\$0.00
41820		\$427.85	\$427.85	0	\$0.00
41821		\$96.03	\$96.03	0	\$0.00
41822		\$511.06	\$301.99	0	\$0.00
41823		\$722.91	\$592.99	0	\$0.00
41825		\$357.19	\$288.49	0	\$0.00
41826		\$485.51	\$413.83	0	\$0.00
41827		\$712.79	\$579.13	2	\$541.00
41828		\$591.35	\$512.20	0	\$0.00
41830		\$653.52	\$551.97	0	\$0.00
41850		\$213.59	\$213.59	0	\$0.00
41870		\$534.73	\$534.73	0	\$0.00
41872		\$567.91	\$485.03	0	\$0.00
41874		\$615.28	\$509.25	0	\$0.00
41899		BR	BR	0	\$0.00
42000		\$310.61	\$199.35	2	\$541.00
42100		\$282.52	\$213.82	0	\$0.00
42104		\$347.17	\$255.33	0	\$0.00
42106		\$458.63	\$390.68	0	\$0.00
42107		\$832.19	\$690.31	2	\$541.00
42120		\$939.25	\$939.25	4	\$762.00
42140		\$323.21	\$314.99	2	\$541.00
42145		\$1,176.00	\$1,176.00	5	\$867.00
42160		\$423.18	\$352.99	0	\$0.00
42180		\$468.31	\$372.73	1	\$402.00
42182		\$642.57	\$552.96	2	\$541.00
42200		\$0.00	\$0.00	0	\$0.00
42205		\$0.00	\$0.00	0	\$0.00
42210		\$0.00	\$0.00	0	\$0.00
42215		\$0.00	\$0.00	0	\$0.00
42220		\$0.00	\$0.00	0	\$0.00
42225		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
42226		\$0.00	\$0.00	0	\$0.00
42227		\$0.00	\$0.00	0	\$0.00
42235		\$1,061.76	\$1,061.76	5	\$867.00
42260		\$1,536.63	\$1,401.48	4	\$762.00
42280		\$281.86	\$196.74	0	\$0.00
42281		\$384.08	\$306.42	0	\$0.00
42299		BR	BR	0	\$0.00
42300		\$387.08	\$301.96	1	\$402.00
42305		\$887.45	\$887.45	2	\$541.00
42310		\$308.05	\$247.56	1	\$402.00
42320		\$464.00	\$357.22	1	\$402.00
42330		\$435.12	\$327.59	0	\$0.00
42335		\$572.73	\$532.41	0	\$0.00
42340		\$776.80	\$711.83	2	\$541.00
42400		\$198.48	\$120.07	0	\$0.00
42405		\$592.10	\$464.41	2	\$541.00
42408		\$765.39	\$689.97	3	\$618.00
42409		\$504.46	\$470.12	3	\$618.00
42410		\$1,297.43	\$1,297.43	3	\$618.00
42415		\$2,277.40	\$2,277.40	7	\$1,205.00
42420		\$2,618.72	\$2,618.72	7	\$1,205.00
42425		\$1,786.27	\$1,786.27	7	\$1,205.00
42426		\$2,809.19	\$2,809.19	0	\$0.00
42440		\$970.56	\$970.56	3	\$618.00
42450		\$817.93	\$710.41	2	\$541.00
42500		\$774.20	\$678.62	3	\$618.00
42505		\$1,042.33	\$925.10	4	\$762.00
42507		\$928.35	\$928.35	3	\$618.00
42508		\$1,296.32	\$1,296.32	4	\$762.00
42509		\$1,645.06	\$1,645.06	4	\$762.00
42510		\$1,145.75	\$1,145.75	4	\$762.00
42550		\$1,078.20	\$133.62	0	\$0.00
42600		\$846.26	\$746.95	1	\$402.00
42650		\$153.64	\$119.29	0	\$0.00
42660		\$205.65	\$157.12	0	\$0.00
42665		\$481.05	\$437.00	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
42699		BR	BR	0	\$0.00
42700		\$344.12	\$267.20	1	\$402.00
42720		\$838.00	\$745.41	1	\$402.00
42725		\$1,509.85	\$1,509.85	2	\$541.00
42800		\$285.04	\$223.06	0	\$0.00
42802		\$460.30	\$275.87	1	\$402.00
42804		\$403.97	\$239.69	1	\$402.00
42806		\$444.03	\$278.27	2	\$541.00
42808		\$433.96	\$339.87	2	\$541.00
42809		\$331.37	\$256.70	0	\$0.00
42810		\$641.26	\$530.00	3	\$618.00
42815		\$1,006.80	\$1,006.80	5	\$867.00
42820		\$0.00	\$0.00	0	\$0.00
42821		\$0.00	\$0.00	0	\$0.00
42825		\$0.00	\$0.00	0	\$0.00
42826		\$0.00	\$0.00	0	\$0.00
42830		\$0.00	\$0.00	0	\$0.00
42831		\$0.00	\$0.00	0	\$0.00
42835		\$0.00	\$0.00	0	\$0.00
42836		\$0.00	\$0.00	0	\$0.00
42842		\$0.00	\$0.00	0	\$0.00
42844		\$0.00	\$0.00	0	\$0.00
42845		\$0.00	\$0.00	0	\$0.00
42860		\$0.00	\$0.00	0	\$0.00
42870		\$0.00	\$0.00	0	\$0.00
42890		\$1,794.06	\$1,794.06	7	\$1,205.00
42892		\$2,157.01	\$2,157.01	7	\$1,205.00
42894		\$3,065.85	\$3,065.85	0	\$0.00
42900		\$722.42	\$722.42	1	\$402.00
42950		\$1,181.46	\$1,181.46	2	\$541.00
42953		\$1,329.62	\$1,329.62	0	\$0.00
42955		\$1,052.19	\$1,052.19	2	\$541.00
42960		\$348.19	\$348.19	1	\$402.00
42961		\$837.12	\$837.12	0	\$0.00
42962		\$1,034.62	\$1,034.62	2	\$541.00
42970		\$728.96	\$728.96	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
42971		\$899.09	\$899.09	0	\$0.00
42972		\$1,022.21	\$1,022.21	3	\$618.00
42999		BR	BR	0	\$0.00
43020		\$1,116.71	\$1,116.71	0	\$0.00
43030		\$1,089.75	\$1,089.75	0	\$0.00
43045		\$2,543.69	\$2,543.69	0	\$0.00
43100		\$1,255.15	\$1,255.15	0	\$0.00
43101		\$2,009.80	\$2,009.80	0	\$0.00
43107		\$4,674.34	\$4,674.34	0	\$0.00
43108		\$4,066.19	\$4,066.19	0	\$0.00
43112		\$5,059.15	\$5,059.15	0	\$0.00
43113		\$4,262.27	\$4,262.27	0	\$0.00
43116		\$3,927.91	\$3,927.91	0	\$0.00
43117		\$4,637.50	\$4,637.50	0	\$0.00
43118		\$3,933.83	\$3,933.83	0	\$0.00
43121		\$3,517.20	\$3,517.20	0	\$0.00
43122		\$4,631.00	\$4,631.00	0	\$0.00
43123		\$3,986.98	\$3,986.98	0	\$0.00
43124		\$3,365.56	\$3,365.56	0	\$0.00
43130		\$1,578.19	\$1,578.19	0	\$0.00
43135		\$2,015.38	\$2,015.38	0	\$0.00
43200		\$435.84	\$215.56	1	\$402.00
43201		\$527.95	\$268.84	1	\$402.00
43202		\$566.08	\$230.06	1	\$402.00
43204		\$426.38	\$426.38	1	\$402.00
43205		\$427.16	\$427.16	1	\$402.00
43215		\$310.30	\$310.30	1	\$402.00
43216		\$290.15	\$290.15	1	\$402.00
43217		\$754.85	\$332.22	1	\$402.00
43219		\$334.84	\$334.84	1	\$402.00
43220		\$247.97	\$247.97	1	\$402.00
43226		\$271.95	\$271.95	1	\$402.00
43227		\$407.87	\$407.87	2	\$541.00
43228		\$434.74	\$434.74	2	\$541.00
43231		\$366.15	\$366.15	2	\$541.00
43232		\$510.37	\$510.37	2	\$541.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
43234		\$564.29	\$235.74	1	\$402.00
43235		\$580.55	\$278.88	1	\$402.00
43236		\$719.02	\$334.47	2	\$541.00
43237		\$451.86	\$451.86	2	\$541.00
43238		\$559.24	\$559.24	2	\$541.00
43239		\$659.11	\$329.07	2	\$541.00
43240		\$766.74	\$766.74	2	\$541.00
43241		\$300.50	\$300.50	2	\$541.00
43242		\$805.50	\$805.50	2	\$541.00
43243		\$512.81	\$512.81	2	\$541.00
43244		\$563.02	\$563.02	2	\$541.00
43245		\$365.34	\$365.34	2	\$541.00
43246		\$490.43	\$490.43	2	\$541.00
43247		\$386.19	\$386.19	2	\$541.00
43248		\$360.68	\$360.68	2	\$541.00
43249		\$333.67	\$333.67	2	\$541.00
43250		\$366.12	\$366.12	2	\$541.00
43251		\$420.93	\$420.93	2	\$541.00
43255		\$537.56	\$537.56	2	\$541.00
43256		\$492.72	\$492.72	3	\$618.00
43257		\$626.07	\$626.07	3	\$618.00
43258		\$512.02	\$512.02	3	\$618.00
43259		\$577.75	\$577.75	3	\$618.00
43260		\$661.89	\$661.89	2	\$541.00
43261		\$695.85	\$695.85	2	\$541.00
43262		\$817.83	\$817.83	2	\$541.00
43263		\$803.17	\$803.17	2	\$541.00
43264		\$980.75	\$980.75	2	\$541.00
43265		\$1,097.39	\$1,097.39	2	\$541.00
43267		\$817.83	\$817.83	2	\$541.00
43268		\$825.30	\$825.30	2	\$541.00
43269		\$897.44	\$897.44	2	\$541.00
43271		\$817.09	\$817.09	2	\$541.00
43272		\$817.83	\$817.83	2	\$541.00
43273		\$0.00	\$0.00	0	\$0.00
43279		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
43280		\$2,054.24	\$2,054.24	0	\$0.00
43289		BR	BR	0	\$0.00
43300		\$1,276.01	\$1,276.01	0	\$0.00
43305		\$2,285.33	\$2,285.33	0	\$0.00
43310		\$3,082.37	\$3,082.37	0	\$0.00
43312		\$3,398.69	\$3,398.69	0	\$0.00
43313		\$0.00	\$0.00	0	\$0.00
43314		\$0.00	\$0.00	0	\$0.00
43320		\$2,382.76	\$2,382.76	0	\$0.00
43324		\$2,418.83	\$2,418.83	0	\$0.00
43325		\$2,372.88	\$2,372.88	0	\$0.00
43326		\$2,391.60	\$2,391.60	0	\$0.00
43330		\$2,320.81	\$2,320.81	0	\$0.00
43331		\$2,462.59	\$2,462.59	0	\$0.00
43340		\$2,335.20	\$2,335.20	0	\$0.00
43341		\$2,556.63	\$2,556.63	0	\$0.00
43350		\$1,964.20	\$1,964.20	0	\$0.00
43351		\$2,285.27	\$2,285.27	0	\$0.00
43352		\$1,927.57	\$1,927.57	0	\$0.00
43360		\$4,171.27	\$4,171.27	0	\$0.00
43361		\$4,728.86	\$4,728.86	0	\$0.00
43400		\$2,450.80	\$2,450.80	0	\$0.00
43401		\$2,593.60	\$2,593.60	0	\$0.00
43405		\$2,418.20	\$2,418.20	0	\$0.00
43410		\$1,718.00	\$1,718.00	0	\$0.00
43415		\$2,988.67	\$2,988.67	0	\$0.00
43420		\$1,754.77	\$1,754.77	0	\$0.00
43425		\$2,554.76	\$2,554.76	0	\$0.00
43450		\$302.85	\$168.44	1	\$402.00
43453		\$575.88	\$183.12	1	\$402.00
43456		\$1,249.49	\$299.69	2	\$541.00
43458		\$748.69	\$353.68	2	\$541.00
43460		\$426.54	\$426.54	0	\$0.00
43496		BR	BR	0	\$0.00
43499		BR	BR	0	\$0.00
43500		\$1,313.22	\$1,313.22	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
43501		\$2,329.29	\$2,329.29	0	\$0.00
43502		\$2,681.07	\$2,681.07	0	\$0.00
43510		\$1,594.42	\$1,594.42	0	\$0.00
43520		\$1,243.07	\$1,243.07	0	\$0.00
43600		\$236.09	\$236.09	1	\$402.00
43605		\$1,416.66	\$1,416.66	0	\$0.00
43610		\$1,706.23	\$1,706.23	0	\$0.00
43611		\$2,086.82	\$2,086.82	0	\$0.00
43620		\$3,437.00	\$3,437.00	0	\$0.00
43621		\$3,512.71	\$3,512.71	0	\$0.00
43622		\$3,707.37	\$3,707.37	0	\$0.00
43631		\$2,631.77	\$2,631.77	0	\$0.00
43632		\$2,633.28	\$2,633.28	0	\$0.00
43633		\$2,690.42	\$2,690.42	0	\$0.00
43634		\$2,914.98	\$2,914.98	0	\$0.00
43635		\$232.35	\$232.35	0	\$0.00
43640		\$2,011.08	\$2,011.08	0	\$0.00
43641		\$2,040.36	\$2,040.36	0	\$0.00
43644		\$0.00	\$0.00	0	\$0.00
43645		\$0.00	\$0.00	0	\$0.00
43647		\$0.00	\$0.00	0	\$0.00
43648		\$0.00	\$0.00	0	\$0.00
43651		\$1,241.79	\$1,241.79	0	\$0.00
43652		\$1,466.50	\$1,466.50	0	\$0.00
43653		\$990.96	\$990.96	9	\$1,578.00
43659		BR	BR	0	\$0.00
43752		\$74.09	\$74.09	0	\$0.00
43760		\$216.00	\$125.65	1	\$402.00
43761		\$224.47	\$224.47	2	\$541.00
43770		\$0.00	\$0.00	0	\$0.00
43771		\$0.00	\$0.00	0	\$0.00
43772		\$0.00	\$0.00	0	\$0.00
43773		\$0.00	\$0.00	0	\$0.00
43774		\$0.00	\$0.00	0	\$0.00
43800		\$1,608.07	\$1,608.07	0	\$0.00
43810		\$1,708.55	\$1,708.55	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
43820		\$1,788.85	\$1,788.85	0	\$0.00
43825		\$2,238.96	\$2,238.96	0	\$0.00
43830		\$1,172.48	\$1,172.48	0	\$0.00
43831		\$0.00	\$0.00	0	\$0.00
43832		\$1,835.83	\$1,835.83	0	\$0.00
43840		\$1,832.87	\$1,832.87	0	\$0.00
43842		\$2,187.09	\$2,187.09	0	\$0.00
43843		\$2,201.94	\$2,201.94	0	\$0.00
43845		\$0.00	\$0.00	0	\$0.00
43846		\$2,831.63	\$2,831.63	0	\$0.00
43847		\$3,142.16	\$3,142.16	0	\$0.00
43848		\$3,425.25	\$3,425.25	0	\$0.00
43850		\$2,845.93	\$2,845.93	0	\$0.00
43855		\$2,999.59	\$2,999.59	0	\$0.00
43860		\$2,884.36	\$2,884.36	0	\$0.00
43865		\$3,053.42	\$3,053.42	0	\$0.00
43870		\$1,160.35	\$1,160.35	1	\$402.00
43880		\$2,844.88	\$2,844.88	0	\$0.00
43881		\$0.00	\$0.00	0	\$0.00
43882		\$0.00	\$0.00	0	\$0.00
43886		\$0.00	\$0.00	0	\$0.00
43887		\$0.00	\$0.00	0	\$0.00
43888		\$0.00	\$0.00	0	\$0.00
43999		BR	BR	0	\$0.00
44005		\$1,899.84	\$1,899.84	0	\$0.00
44010		\$1,483.78	\$1,483.78	0	\$0.00
44015		\$293.38	\$293.38	0	\$0.00
44020		\$1,648.23	\$1,648.23	0	\$0.00
44021		\$1,655.21	\$1,655.21	0	\$0.00
44025		\$1,678.38	\$1,678.38	0	\$0.00
44050		\$1,648.26	\$1,648.26	0	\$0.00
44055		\$2,492.34	\$2,492.34	0	\$0.00
44100		\$249.15	\$249.15	1	\$402.00
44110		\$1,408.02	\$1,408.02	0	\$0.00
44111		\$1,688.14	\$1,688.14	0	\$0.00
44120		\$1,992.23	\$1,992.23	0	\$0.00

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
44121		\$502.49	\$502.49	0	\$0.00
44125		\$2,050.93	\$2,050.93	0	\$0.00
44126		\$0.00	\$0.00	0	\$0.00
44127		\$0.00	\$0.00	0	\$0.00
44128		\$0.00	\$0.00	0	\$0.00
44130		\$1,711.26	\$1,711.26	0	\$0.00
44132		BR	BR	0	\$0.00
44133		BR	BR	0	\$0.00
44135		BR	BR	0	\$0.00
44136		BR	BR	0	\$0.00
44137		BR	BR	0	\$0.00
44139		\$250.11	\$250.11	0	\$0.00
44140		\$2,483.97	\$2,483.97	0	\$0.00
44141		\$2,461.98	\$2,461.98	0	\$0.00
44143		\$2,786.29	\$2,786.29	0	\$0.00
44144		\$2,577.86	\$2,577.86	0	\$0.00
44145		\$3,076.37	\$3,076.37	0	\$0.00
44146		\$3,322.12	\$3,322.12	0	\$0.00
44147		\$2,427.58	\$2,427.58	0	\$0.00
44150		\$2,965.89	\$2,965.89	0	\$0.00
44151		\$3,290.98	\$3,290.98	0	\$0.00
44155		\$3,386.09	\$3,386.09	0	\$0.00
44156		\$3,735.06	\$3,735.06	0	\$0.00
44157		\$4,240.92	\$4,240.92	0	\$0.00
44158		\$4,351.42	\$4,351.42	0	\$0.00
44160		\$2,204.80	\$2,204.80	0	\$0.00
44180		\$1,744.70	\$1,744.70	0	\$0.00
44186		\$1,225.09	\$1,225.09	0	\$0.00
44187		\$2,022.41	\$2,022.41	0	\$0.00
44188		\$2,219.72	\$2,219.72	0	\$0.00
44202		\$2,587.65	\$2,587.65	0	\$0.00
44203		\$500.99	\$500.99	0	\$0.00
44204		\$2,936.56	\$2,936.56	0	\$0.00
44205		\$2,601.15	\$2,601.15	0	\$0.00
44206		\$3,140.67	\$3,140.67	0	\$0.00
44207		\$3,409.84	\$3,409.84	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
44208		\$3,690.77	\$3,690.77	0	\$0.00
44210		\$3,271.87	\$3,271.87	0	\$0.00
44211		\$4,045.64	\$4,045.64	0	\$0.00
44212		\$3,780.71	\$3,780.71	0	\$0.00
44213		\$400.86	\$400.86	0	\$0.00
44227		\$3,142.29	\$3,142.29	0	\$0.00
44238		BR	BR	0	\$0.00
44300		\$1,437.91	\$1,437.91	0	\$0.00
44310		\$1,850.49	\$1,850.49	0	\$0.00
44312		\$976.49	\$976.49	1	\$402.00
44314		\$1,758.21	\$1,758.21	0	\$0.00
44316		\$2,416.23	\$2,416.23	0	\$0.00
44320		\$2,069.48	\$2,069.48	0	\$0.00
44322		\$1,697.22	\$1,697.22	0	\$0.00
44340		\$977.01	\$977.01	3	\$618.00
44345		\$1,824.00	\$1,824.00	0	\$0.00
44346		\$1,990.89	\$1,990.89	0	\$0.00
44360		\$299.01	\$299.01	2	\$541.00
44361		\$328.34	\$328.34	2	\$541.00
44363		\$395.59	\$395.59	2	\$541.00
44364		\$424.84	\$424.84	2	\$541.00
44365		\$378.48	\$378.48	2	\$541.00
44366		\$495.10	\$495.10	2	\$541.00
44369		\$505.23	\$505.23	2	\$541.00
44370		\$541.99	\$541.99	9	\$1,578.00
44372		\$498.94	\$498.94	2	\$541.00
44373		\$398.58	\$398.58	2	\$541.00
44376		\$589.32	\$589.32	2	\$541.00
44377		\$618.62	\$618.62	2	\$541.00
44378		\$793.09	\$793.09	2	\$541.00
44379		\$837.62	\$837.62	9	\$1,578.00
44380		\$132.23	\$132.23	1	\$402.00
44382		\$155.42	\$155.42	1	\$402.00
44383		\$337.51	\$337.51	9	\$1,578.00
44385		\$527.75	\$224.59	1	\$402.00
44386		\$671.49	\$263.04	1	\$402.00

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HCPSC	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
44388		\$625.43	\$323.76	1	\$402.00
44389		\$751.95	\$356.95	1	\$402.00
44390		\$828.39	\$431.89	1	\$402.00
44391		\$1,017.55	\$487.39	1	\$402.00
44392		\$814.20	\$432.64	1	\$402.00
44393		\$923.82	\$543.00	1	\$402.00
44394		\$955.23	\$499.74	1	\$402.00
44397		\$547.07	\$547.07	1	\$402.00
44500		\$66.71	\$66.71	0	\$0.00
44602		\$1,828.24	\$1,828.24	0	\$0.00
44603		\$2,129.25	\$2,129.25	0	\$0.00
44604		\$1,865.59	\$1,865.59	0	\$0.00
44605		\$2,297.63	\$2,297.63	0	\$0.00
44615		\$1,872.66	\$1,872.66	0	\$0.00
44620		\$1,449.06	\$1,449.06	0	\$0.00
44625		\$1,767.10	\$1,767.10	0	\$0.00
44626		\$2,946.44	\$2,946.44	0	\$0.00
44640		\$2,466.82	\$2,466.82	0	\$0.00
44650		\$2,563.40	\$2,563.40	0	\$0.00
44660		\$2,397.92	\$2,397.92	0	\$0.00
44661		\$2,791.51	\$2,791.51	0	\$0.00
44680		\$1,811.77	\$1,811.77	0	\$0.00
44700		\$1,868.40	\$1,868.40	0	\$0.00
44701		\$339.72	\$339.72	0	\$0.00
44715		BR	BR	0	\$0.00
44720		\$550.94	\$550.94	0	\$0.00
44721		\$805.91	\$805.91	0	\$0.00
44799		BR	BR	0	\$0.00
44800		\$1,384.62	\$1,384.62	0	\$0.00
44820		\$1,450.12	\$1,450.12	0	\$0.00
44850		\$1,304.25	\$1,304.25	0	\$0.00
44899		BR	BR	0	\$0.00
44900		\$1,221.94	\$1,221.94	0	\$0.00
44901		\$362.26	\$362.26	0	\$0.00
44950		\$0.00	\$0.00	0	\$0.00
44955		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
44960		\$0.00	\$0.00	0	\$0.00
44970		\$0.00	\$0.00	0	\$0.00
44979		\$0.00	\$0.00	0	\$0.00
45000		\$610.06	\$610.06	1	\$402.00
45005		\$537.45	\$300.00	2	\$541.00
45020		\$653.41	\$653.41	2	\$541.00
45100		<del>\$496.58</del>	<del>\$496.58</del>	1	<del>\$402.00</del>
45108		\$631.25	\$631.25	2	\$541.00
45110		\$3,326.09	\$3,326.09	0	\$0.00
45111		\$1,972.85	\$1,972.85	0	\$0.00
45112		\$3,481.45	\$3,481.45	0	\$0.00
45113		\$3,530.38	\$3,530.38	0	\$0.00
45114		\$3,161.73	\$3,161.73	0	\$0.00
45116		\$2,855.22	\$2,855.22	0	\$0.00
45119		\$3,537.97	\$3,537.97	0	\$0.00
45120		\$0.00	\$0.00	0	\$0.00
45121		\$0.00	\$0.00	0	\$0.00
45123		\$1,915.64	\$1,915.64	0	\$0.00
45126		<del>\$5,276.74</del>	<del>\$5,276.74</del>	0	\$0.00
45130		\$1,893.25	\$1,893.25	0	\$0.00
45135		\$2,276.54	\$2,276.54	0	\$0.00
45136		\$3,315.70	\$3,315.70	0	\$0.00
45150		\$708.34	\$708.34	2	\$541.00
45160		<del>\$1,792.17</del>	<del>\$1,792.17</del>	2	<del>\$541.00</del>
45170		<del>\$1,372.32</del>	<del>\$1,372.32</del>	2	<del>\$541.00</del>
45190		<del>\$1,179.30</del>	<del>\$1,179.30</del>	9	<del>\$1,578.00</del>
45300		<del>\$146.29</del>	<del>\$57.43</del>	0	\$0.00
45303		\$1,493.57	\$66.62	0	\$0.00
45305		<del>\$282.20</del>	<del>\$126.14</del>	1	<del>\$402.00</del>
45307		\$314.94	\$124.53	1	\$402.00
45308		\$223.46	\$112.20	1	\$402.00
45309		\$382.17	\$235.82	1	\$402.00
45315		\$339.80	\$176.27	1	\$402.00
45317		\$314.76	\$186.32	1	\$402.00
45320		\$356.11	\$195.56	1	\$402.00
45321		\$150.76	\$150.76	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
45327		\$190.36	\$190.36	1	\$402.00
45330		\$246.09	\$118.41	0	\$0.00
45331		\$317.73	\$143.00	1	\$402.00
45332		\$519.42	\$212.52	1	\$402.00
45333		\$508.23	\$213.29	1	\$402.00
45334		\$315.93	\$315.93	1	\$402.00
45335		\$369.24	\$160.16	1	\$402.00
45337		\$276.57	\$276.57	1	\$402.00
45338		\$578.17	\$275.01	1	\$402.00
45339		\$511.51	\$359.19	1	\$402.00
45340		\$638.35	\$191.82	1	\$402.00
45341		\$305.89	\$305.89	1	\$402.00
45342		\$458.11	\$458.11	1	\$402.00
45345		\$331.50	\$331.50	1	\$402.00
45355		\$403.27	\$403.27	1	\$402.00
45378		\$763.68	\$425.43	2	\$541.00
45379		\$962.09	\$527.51	2	\$541.00
45380		\$899.15	\$498.17	2	\$541.00
45381		\$962.57	\$473.48	2	\$541.00
45382		\$1,203.06	\$634.82	2	\$541.00
45383		\$1,079.84	\$656.46	2	\$541.00
45384		\$894.16	\$529.02	2	\$541.00
45385		\$1,021.82	\$595.45	2	\$541.00
45386		\$1,409.64	\$512.85	2	\$541.00
45387		\$667.84	\$667.84	1	\$402.00
45391		\$581.21	\$581.21	2	\$541.00
45392		\$733.74	\$733.74	2	\$541.00
45395		\$3,703.82	\$3,703.82	0	\$0.00
45397		\$4,027.30	\$4,027.30	0	\$0.00
45400		\$2,163.83	\$2,163.83	0	\$0.00
45402		\$2,936.34	\$2,936.34	0	\$0.00
45499		\$0.00	\$0.00	0	\$0.00
45500		\$889.64	\$889.64	2	\$541.00
45505		\$927.11	\$927.11	2	\$541.00
45520		\$111.02	\$60.99	0	\$0.00
45540		\$1,889.78	\$1,889.78	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
45541		\$1,573.79	\$1,573.79	0	\$0.00
45550		\$2,633.03	\$2,633.03	0	\$0.00
45560		\$1,276.23	\$1,276.23	2	\$541.00
45562		\$1,832.88	\$1,832.88	0	\$0.00
45563		\$2,794.30	\$2,794.30	0	\$0.00
45800		\$2,052.46	\$2,052.46	0	\$0.00
45805		\$2,474.27	\$2,474.27	0	\$0.00
45820		\$2,122.90	\$2,122.90	0	\$0.00
45825		\$2,488.25	\$2,488.25	0	\$0.00
45900		\$333.48	\$333.48	1	\$402.00
45905		\$300.24	\$300.24	1	\$402.00
45910		\$355.71	\$355.71	1	\$402.00
45915		\$617.55	\$347.99	1	\$402.00
45990		\$213.81	\$213.81	2	\$541.00
45999		BR	BR	0	\$0.00
46020		\$416.70	\$385.34	3	\$618.00
46030		\$207.59	\$159.05	1	\$402.00
46040		\$829.88	\$669.34	3	\$618.00
46045		\$593.79	\$593.79	2	\$541.00
46050		\$296.30	\$167.12	1	\$402.00
46060		\$738.41	\$738.41	2	\$541.00
46070		\$0.00	\$0.00	0	\$0.00
46080		<del>\$395.19</del>	<del>\$300.36</del>	3	<del>\$618.00</del>
46083		\$309.00	\$191.02	0	\$0.00
46200		\$568.78	\$476.19	2	\$541.00
46210		\$595.20	\$392.85	2	\$541.00
46211		\$749.53	\$586.75	2	\$541.00
46220		\$305.88	\$204.33	1	\$402.00
46221		\$291.81	\$254.48	0	\$0.00
46230		\$449.94	\$317.02	1	\$402.00
46250		\$710.34	\$527.40	3	\$618.00
46255		\$813.00	\$606.16	3	\$618.00
46257		\$694.26	\$694.26	3	\$618.00
46258		\$753.76	\$753.76	3	\$618.00
46260		\$802.34	\$802.34	3	\$618.00
46261		\$889.97	\$889.97	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
46262		\$938.60	\$938.60	4	\$762.00
46270		\$674.49	\$501.26	3	\$618.00
46275		\$720.78	\$584.88	3	\$618.00
46280		\$760.29	\$760.29	4	\$762.00
46285		\$621.23	\$527.15	1	\$402.00
46288		\$891.42	\$891.42	4	\$762.00
46320		\$298.59	\$202.26	0	\$0.00
46500		\$346.32	\$182.79	0	\$0.00
46505		\$462.13	\$382.42	0	\$0.00
46600		\$163.12	\$72.02	0	\$0.00
46604		\$818.63	\$157.80	0	\$0.00
46606		\$360.64	\$103.77	0	\$0.00
46608		\$466.23	\$180.99	1	\$402.00
46610		\$422.22	\$160.88	1	\$402.00
46611		\$408.32	\$214.18	1	\$402.00
46612		\$591.69	\$274.34	1	\$402.00
46614		\$341.05	\$234.27	0	\$0.00
46615		\$419.71	\$311.44	2	\$541.00
46700		\$1,081.19	\$1,081.19	3	\$618.00
46705		\$0.00	\$0.00	0	\$0.00
46706		\$295.38	\$295.38	0	\$0.00
46710		\$1,945.57	\$1,945.57	0	\$0.00
46712		\$4,084.87	\$4,084.87	0	\$0.00
46715		\$0.00	\$0.00	0	\$0.00
46716		\$0.00	\$0.00	0	\$0.00
46730		\$0.00	\$0.00	0	\$0.00
46735		\$0.00	\$0.00	0	\$0.00
46740		\$0.00	\$0.00	0	\$0.00
46742		\$0.00	\$0.00	0	\$0.00
46744		\$0.00	\$0.00	0	\$0.00
46746		\$0.00	\$0.00	0	\$0.00
46748		\$0.00	\$0.00	0	\$0.00
46750		\$1,246.64	\$1,246.64	3	\$618.00
46751		\$0.00	\$0.00	0	\$0.00
46753		\$990.21	\$990.21	3	\$618.00
46754		\$456.65	\$309.55	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
46760		\$1,737.13	\$1,737.13	2	\$541.00
46761		\$1,612.58	\$1,612.58	3	\$618.00
46762		\$1,472.49	\$1,472.49	7	\$1,205.00
46900		\$427.30	\$220.46	0	\$0.00
46910		\$360.69	\$240.47	0	\$0.00
46916		\$384.47	\$259.02	0	\$0.00
46917		\$855.79	\$244.24	1	\$402.00
46922		\$410.77	\$242.01	1	\$402.00
46924		\$870.18	\$335.54	1	\$402.00
46930		\$0.00	\$0.00	0	\$0.00
46937		\$426.21	\$311.96	2	\$541.00
46938		\$717.40	\$603.15	2	\$541.00
46940		\$345.91	\$277.96	0	\$0.00
46942		\$310.54	\$247.81	0	\$0.00
46945		\$426.38	\$300.93	0	\$0.00
46946		\$538.83	\$360.37	2	\$541.00
46947		\$670.29	\$670.29	0	\$0.00
46999		BR	BR	0	\$0.00
47000		\$401.04	\$203.91	1	\$402.00
47001		\$213.07	\$213.07	0	\$0.00
47010		\$1,947.48	\$1,947.48	0	\$0.00
47011		\$394.74	\$394.74	0	\$0.00
47015		\$1,821.60	\$1,821.60	0	\$0.00
47100		\$1,435.36	\$1,435.36	0	\$0.00
47120		\$4,121.22	\$4,121.22	0	\$0.00
47122		\$6,244.70	\$6,244.70	0	\$0.00
47125		\$5,595.99	\$5,595.99	0	\$0.00
47130		\$6,056.07	\$6,056.07	0	\$0.00
47133		BR	BR	0	\$0.00
47135		\$9,501.47	\$9,501.47	0	\$0.00
47136		\$8,040.64	\$8,040.64	0	\$0.00
47140		\$6,354.85	\$6,354.85	0	\$0.00
47141		\$7,678.71	\$7,678.71	0	\$0.00
47142		\$8,454.33	\$8,454.33	0	\$0.00
47143		BR	BR	0	\$0.00
47144		BR	BR	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
47145		BR	BR	0	\$0.00
47146		\$690.78	\$690.78	0	\$0.00
47147		\$805.91	\$805.91	0	\$0.00
47300		\$1,809.78	\$1,809.78	0	\$0.00
47350		\$2,307.55	\$2,307.55	0	\$0.00
47360		\$3,128.52	\$3,128.52	0	\$0.00
47361		\$5,351.22	\$5,351.22	0	\$0.00
47362		\$2,214.22	\$2,214.22	0	\$0.00
47370		\$2,226.48	\$2,226.48	0	\$0.00
47371		\$2,227.23	\$2,227.23	0	\$0.00
47379		BR	BR	0	\$0.00
47380		\$2,574.70	\$2,574.70	0	\$0.00
47381		\$2,615.96	\$2,615.96	0	\$0.00
47382		\$1,744.84	\$1,744.84	0	\$0.00
47399		BR	BR	0	\$0.00
47400		\$3,713.26	\$3,713.26	0	\$0.00
47420		\$2,365.65	\$2,365.65	0	\$0.00
47425		\$2,356.29	\$2,356.29	0	\$0.00
47460		\$2,150.69	\$2,150.69	0	\$0.00
47480		\$1,369.18	\$1,369.18	0	\$0.00
47490		\$1,030.82	\$1,030.82	0	\$0.00
47500		\$208.60	\$208.60	0	\$0.00
47505		\$255.10	\$81.12	0	\$0.00
47510		\$1,018.77	\$1,018.77	2	\$541.00
47511		\$1,241.79	\$1,241.79	9	\$1,578.00
47525		\$698.49	\$698.49	1	\$402.00
47530		\$807.17	\$807.17	1	\$402.00
47550		\$339.65	\$339.65	0	\$0.00
47552		\$688.63	\$688.63	2	\$541.00
47553		\$716.30	\$716.30	3	\$618.00
47554		\$1,026.84	\$1,026.84	3	\$618.00
47555		\$846.82	\$846.82	3	\$618.00
47556		\$950.39	\$950.39	9	\$1,578.00
47560		\$562.34	\$562.34	3	\$618.00
47561		\$608.15	\$608.15	3	\$618.00
47562		\$1,343.10	\$1,343.10	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
47563		\$1,439.54	\$1,439.54	0	\$0.00
47564		\$1,688.42	\$1,688.42	0	\$0.00
47570		\$1,501.65	\$1,501.65	0	\$0.00
47579		BR	BR	0	\$0.00
47600		\$1,628.05	\$1,628.05	0	\$0.00
47605		\$1,750.09	\$1,750.09	0	\$0.00
47610		\$2,212.42	\$2,212.42	0	\$0.00
47612		\$2,204.79	\$2,204.79	0	\$0.00
47620		\$2,412.46	\$2,412.46	0	\$0.00
47630		\$1,111.52	\$1,111.52	3	\$618.00
47700		\$0.00	\$0.00	0	\$0.00
47701		\$3,310.62	\$3,310.62	0	\$0.00
47711		\$2,726.60	\$2,726.60	0	\$0.00
47712		\$3,539.34	\$3,539.34	0	\$0.00
47715		\$2,246.66	\$2,246.66	0	\$0.00
47720		\$1,930.03	\$1,930.03	0	\$0.00
47721		\$2,285.93	\$2,285.93	0	\$0.00
47740		\$2,217.92	\$2,217.92	0	\$0.00
47741		\$2,530.74	\$2,530.74	0	\$0.00
47760		\$3,034.04	\$3,034.04	0	\$0.00
47765		\$2,955.96	\$2,955.96	0	\$0.00
47780		\$3,117.82	\$3,117.82	0	\$0.00
47785		\$3,651.63	\$3,651.63	0	\$0.00
47800		\$2,753.62	\$2,753.62	0	\$0.00
47801		\$1,867.74	\$1,867.74	0	\$0.00
47802		\$2,580.06	\$2,580.06	0	\$0.00
47900		\$2,371.58	\$2,371.58	0	\$0.00
47999		BR	BR	0	\$0.00
48000		\$3,174.19	\$3,174.19	0	\$0.00
48001		\$3,981.32	\$3,981.32	0	\$0.00
48020		\$1,899.41	\$1,899.41	0	\$0.00
48100		\$1,475.35	\$1,475.35	0	\$0.00
48102		\$1,062.01	\$566.19	1	\$402.00
48105		\$5,453.09	\$5,453.09	0	\$0.00
48120		\$1,876.77	\$1,876.77	0	\$0.00
48140		\$2,700.46	\$2,700.46	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
48145		\$2,820.21	\$2,820.21	0	\$0.00
48146		\$3,185.02	\$3,185.02	0	\$0.00
48148		\$2,074.39	\$2,074.39	0	\$0.00
48150		\$5,619.25	\$5,619.25	0	\$0.00
48152		\$5,156.47	\$5,156.47	0	\$0.00
48153		\$5,615.06	\$5,615.06	0	\$0.00
48154		\$5,190.60	\$5,190.60	0	\$0.00
48155		\$3,018.86	\$3,018.86	0	\$0.00
48160		\$4,384.44	\$4,384.44	0	\$0.00
48400		\$209.33	\$209.33	0	\$0.00
48500		\$1,869.56	\$1,869.56	0	\$0.00
48510		\$1,777.49	\$1,777.49	0	\$0.00
48511		\$425.65	\$425.65	0	\$0.00
48520		\$1,849.86	\$1,849.86	0	\$0.00
48540		\$2,315.32	\$2,315.32	0	\$0.00
48545		\$2,166.17	\$2,166.17	0	\$0.00
48547		\$3,013.26	\$3,013.26	0	\$0.00
48548		\$3,176.64	\$3,176.64	0	\$0.00
48550		BR	BR	0	\$0.00
48551		BR	BR	0	\$0.00
48552		\$472.39	\$472.39	0	\$0.00
48554		\$4,265.94	\$4,265.94	0	\$0.00
48556		\$1,985.66	\$1,985.66	0	\$0.00
48999		BR	BR	0	\$0.00
49000		\$1,423.61	\$1,423.61	0	\$0.00
49002		\$1,295.31	\$1,295.31	0	\$0.00
49010		\$1,513.17	\$1,513.17	0	\$0.00
49020		\$2,667.73	\$2,667.73	0	\$0.00
49021		\$360.75	\$360.75	0	\$0.00
49040		\$1,615.95	\$1,615.95	0	\$0.00
49041		\$427.18	\$427.18	0	\$0.00
49060		\$1,866.57	\$1,866.57	0	\$0.00
49061		\$394.74	\$394.74	0	\$0.00
49062		\$1,395.45	\$1,395.45	0	\$0.00
49080		\$419.98	\$145.19	2	\$541.00
49081		\$301.67	\$146.35	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
49180		\$391.47	\$185.38	1	\$402.00
49203		\$2,329.07	\$2,329.07	0	\$0.00
49204		\$2,976.45	\$2,976.45	0	\$0.00
49205		\$3,409.68	\$3,409.68	0	\$0.00
49215		\$3,893.68	\$3,893.68	0	\$0.00
49220		\$1,799.85	\$1,799.85	0	\$0.00
49250		\$1,054.46	\$1,054.46	4	\$762.00
49255		\$1,400.00	\$1,400.00	0	\$0.00
49320		\$642.98	\$642.98	3	\$618.00
49321		\$669.49	\$669.49	4	\$762.00
49322		\$721.38	\$721.38	4	\$762.00
49323		\$1,158.52	\$1,158.52	0	\$0.00
49324		\$754.28	\$754.28	0	\$0.00
49325		\$812.99	\$812.99	0	\$0.00
49326		\$376.02	\$376.02	0	\$0.00
49329		BR	BR	0	\$0.00
49400		\$215.08	\$215.08	0	\$0.00
49402		\$1,634.59	\$1,634.59	2	\$541.00
49419		\$835.13	\$835.13	0	\$0.00
49420		\$268.58	\$268.58	1	\$402.00
49421		\$721.53	\$721.53	1	\$402.00
49422		\$762.98	\$762.98	1	\$402.00
49423		\$169.47	\$169.47	0	\$0.00
49424		\$96.06	\$96.06	0	\$0.00
49425		\$1,417.43	\$1,417.43	0	\$0.00
49426		\$1,196.49	\$1,196.49	2	\$541.00
49427		\$109.95	\$109.95	0	\$0.00
49428		\$746.71	\$746.71	0	\$0.00
49429		\$906.25	\$906.25	0	\$0.00
49435		\$242.14	\$242.14	0	\$0.00
49436		\$352.76	\$352.76	0	\$0.00
49440		\$2,211.79	\$503.66	1	\$402.00
49441		\$2,613.70	\$546.58	1	\$402.00
49442		\$2,131.84	\$454.60	0	\$0.00
49446		\$2,168.86	\$359.94	1	\$402.00
49450		\$1,506.94	\$146.02	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
49451		\$1,602.38	\$201.00	0	\$0.00
49452		\$1,967.29	\$313.60	0	\$0.00
49460		\$1,592.12	\$102.47	0	\$0.00
49465		\$336.68	\$67.44	0	\$0.00
49491		\$0.00	\$0.00	0	\$0.00
49492		\$0.00	\$0.00	0	\$0.00
49495		\$0.00	\$0.00	0	\$0.00
49496		\$0.00	\$0.00	0	\$0.00
49500		\$0.00	\$0.00	0	\$0.00
49501		\$0.00	\$0.00	0	\$0.00
49505		\$960.36	\$942.44	4	\$762.00
49507		\$1,161.71	\$1,161.71	9	\$1,578.00
49520		\$1,164.20	\$1,164.20	7	\$1,205.00
49521		\$1,424.35	\$1,424.35	9	\$1,578.00
49525		\$1,046.04	\$1,046.04	4	\$762.00
49540		\$1,251.31	\$1,251.31	2	\$541.00
49550		\$1,053.74	\$1,053.74	5	\$867.00
49553		\$1,146.32	\$1,146.32	9	\$1,578.00
49555		\$1,100.77	\$1,100.77	5	\$867.00
49557		\$1,335.49	\$1,335.49	9	\$1,578.00
49560		\$1,383.29	\$1,383.29	4	\$762.00
49561		\$1,680.55	\$1,680.55	9	\$1,578.00
49565		\$1,388.52	\$1,388.52	4	\$762.00
49566		\$1,699.03	\$1,699.03	9	\$1,578.00
49568		\$552.65	\$552.65	7	\$1,205.00
49570		\$728.67	\$728.67	4	\$762.00
49572		\$840.70	\$840.70	9	\$1,578.00
49580		\$0.00	\$0.00	0	\$0.00
49582		\$0.00	\$0.00	0	\$0.00
49585		\$785.09	\$785.09	4	\$762.00
49587		\$932.60	\$932.60	9	\$1,578.00
49590		\$1,043.70	\$1,043.70	3	\$618.00
49600		\$0.00	\$0.00	0	\$0.00
49605		\$0.00	\$0.00	0	\$0.00
49606		\$0.00	\$0.00	0	\$0.00
49610		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
49611		\$0.00	\$0.00	0	\$0.00
49650		\$789.20	\$789.20	4	\$762.00
49651		\$1,025.70	\$1,025.70	7	\$1,205.00
49652		\$1,570.46	\$1,570.46	0	\$0.00
49653		\$1,959.45	\$1,959.45	0	\$0.00
49654		\$1,802.30	\$1,802.30	0	\$0.00
49655		\$2,170.29	\$2,170.29	0	\$0.00
49656		\$1,809.91	\$1,809.91	0	\$0.00
49657		\$2,616.31	\$2,616.31	0	\$0.00
49659		BR	BR	0	\$0.00
49900		\$1,540.07	\$1,540.07	0	\$0.00
49904		\$2,897.43	\$2,897.43	0	\$0.00
49905		\$737.09	\$737.09	0	\$0.00
49906		BR	BR	0	\$0.00
49999		BR	BR	0	\$0.00
50010		\$1,335.27	\$1,335.27	0	\$0.00
50020		\$1,877.44	\$1,877.44	0	\$0.00
50021		\$359.24	\$359.24	0	\$0.00
50040		\$1,870.94	\$1,870.94	0	\$0.00
50045		\$1,812.05	\$1,812.05	0	\$0.00
50060		\$2,211.58	\$2,211.58	0	\$0.00
50065		\$2,195.04	\$2,195.04	0	\$0.00
50070		\$2,324.98	\$2,324.98	0	\$0.00
50075		\$2,876.95	\$2,876.95	0	\$0.00
50080		\$1,813.52	\$1,813.52	0	\$0.00
50081		\$2,594.69	\$2,594.69	0	\$0.00
50100		\$1,999.21	\$1,999.21	0	\$0.00
50120		\$1,859.13	\$1,859.13	0	\$0.00
50125		\$1,920.30	\$1,920.30	0	\$0.00
50130		\$1,996.07	\$1,996.07	0	\$0.00
50135		\$2,201.52	\$2,201.52	0	\$0.00
50200		\$283.41	\$283.41	1	\$402.00
50205		\$1,361.38	\$1,361.38	0	\$0.00
50220		\$2,000.31	\$2,000.31	0	\$0.00
50225		\$2,318.08	\$2,318.08	0	\$0.00
50230		\$2,505.35	\$2,505.35	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
50234		\$2,548.35	\$2,548.35	0	\$0.00
50236		\$2,929.77	\$2,929.77	0	\$0.00
50240		\$2,626.09	\$2,626.09	0	\$0.00
50250		\$2,364.42	\$2,364.42	0	\$0.00
50280		\$1,829.06	\$1,829.06	0	\$0.00
50290		\$1,749.17	\$1,749.17	0	\$0.00
50300		\$1,925.22	\$1,925.22	0	\$0.00
50320		\$2,640.42	\$2,640.42	0	\$0.00
50323		BR	BR	0	\$0.00
50325		BR	BR	0	\$0.00
50327		\$438.95	\$438.95	0	\$0.00
50328		\$384.47	\$384.47	0	\$0.00
50329		\$367.34	\$367.34	0	\$0.00
50340		\$1,572.31	\$1,572.31	0	\$0.00
50360		\$3,913.32	\$3,913.32	0	\$0.00
50365		\$4,592.12	\$4,592.12	0	\$0.00
50370		\$1,748.97	\$1,748.97	0	\$0.00
50380		\$2,783.31	\$2,783.31	0	\$0.00
50382		\$3,134.35	\$599.31	0	\$0.00
50384		\$3,026.06	\$545.63	0	\$0.00
50385		\$2,623.59	\$522.63	4	\$762.00
50386		\$1,700.48	\$394.00	0	\$0.00
50387		\$1,515.06	\$216.91	0	\$0.00
50389		\$1,035.58	\$119.72	0	\$0.00
50390		\$208.60	\$208.60	1	\$402.00
50391		\$283.07	\$212.59	0	\$0.00
50392		\$359.24	\$359.24	1	\$402.00
50393		\$442.67	\$442.67	1	\$402.00
50394		\$252.14	\$81.89	0	\$0.00
50395		\$360.00	\$360.00	1	\$402.00
50396		\$235.95	\$235.95	1	\$402.00
50398		\$209.79	\$155.28	1	\$402.00
50400		\$2,209.43	\$2,209.43	0	\$0.00
50405		\$2,778.58	\$2,778.58	0	\$0.00
50500		\$2,313.99	\$2,313.99	0	\$0.00
50520		\$2,114.31	\$2,114.31	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
50525		\$2,636.32	\$2,636.32	0	\$0.00
50526		\$2,835.26	\$2,835.26	0	\$0.00
50540		\$0.00	\$0.00	0	\$0.00
50541		\$1,819.01	\$1,819.01	0	\$0.00
50542		\$2,293.64	\$2,293.64	0	\$0.00
50543		\$2,881.63	\$2,881.63	0	\$0.00
50544		\$2,508.86	\$2,508.86	0	\$0.00
50545		\$2,693.12	\$2,693.12	0	\$0.00
50546		\$2,343.08	\$2,343.08	0	\$0.00
50547		\$2,957.04	\$2,957.04	0	\$0.00
50548		\$2,719.82	\$2,719.82	0	\$0.00
50549		BR	BR	0	\$0.00
50551		\$838.50	\$601.05	1	\$402.00
50553		\$1,894.99	\$644.26	1	\$402.00
50555		\$1,988.00	\$701.43	1	\$402.00
50557		\$2,054.79	\$709.98	1	\$402.00
50561		\$1,962.70	\$814.27	1	\$402.00
50562		\$1,215.69	\$1,215.69	0	\$0.00
50570		\$1,023.63	\$1,023.63	0	\$0.00
50572		\$1,113.21	\$1,113.21	0	\$0.00
50574		\$1,183.51	\$1,183.51	0	\$0.00
50575		\$1,501.06	\$1,501.06	0	\$0.00
50576		\$1,178.95	\$1,178.95	0	\$0.00
50580		\$1,271.64	\$1,271.64	0	\$0.00
50590		\$1,571.60	\$1,137.77	0	\$0.00
50592		\$11,596.58	\$787.78	0	\$0.00
50593		\$0.00	\$0.00	0	\$0.00
50600		\$1,849.82	\$1,849.82	0	\$0.00
50605		\$1,833.85	\$1,833.85	0	\$0.00
50610		\$1,882.39	\$1,882.39	0	\$0.00
50620		\$1,760.65	\$1,760.65	0	\$0.00
50630		\$1,738.21	\$1,738.21	0	\$0.00
50650		\$2,017.45	\$2,017.45	0	\$0.00
50660		\$2,250.64	\$2,250.64	0	\$0.00
50684		\$1,215.38	\$81.89	0	\$0.00
50686		\$469.12	\$174.18	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
50688		\$227.43	\$227.43	1	\$402.00
50690		\$1,283.98	\$123.60	0	\$0.00
50700		\$1,812.24	\$1,812.24	0	\$0.00
50715		\$2,315.14	\$2,315.14	0	\$0.00
50722		\$2,010.80	\$2,010.80	0	\$0.00
50725		\$2,196.72	\$2,196.72	0	\$0.00
50727		\$1,077.03	\$1,077.03	0	\$0.00
50728		\$1,523.47	\$1,523.47	0	\$0.00
50740		\$2,170.48	\$2,170.48	0	\$0.00
50750		\$2,254.34	\$2,254.34	0	\$0.00
50760		\$2,147.55	\$2,147.55	0	\$0.00
50770		\$2,254.36	\$2,254.36	0	\$0.00
50780		\$2,131.56	\$2,131.56	0	\$0.00
50782		\$2,348.27	\$2,348.27	0	\$0.00
50783		\$2,428.41	\$2,428.41	0	\$0.00
50785		\$2,361.74	\$2,361.74	0	\$0.00
50800		\$1,741.30	\$1,741.30	0	\$0.00
50810		\$2,445.55	\$2,445.55	0	\$0.00
50815		\$2,346.30	\$2,346.30	0	\$0.00
50820		\$2,518.25	\$2,518.25	0	\$0.00
50825		\$3,237.63	\$3,237.63	0	\$0.00
50830		\$3,588.95	\$3,588.95	0	\$0.00
50840		\$2,344.19	\$2,344.19	0	\$0.00
50845		\$2,409.98	\$2,409.98	0	\$0.00
50860		\$1,807.11	\$1,807.11	0	\$0.00
50900		\$1,628.53	\$1,628.53	0	\$0.00
50920		\$1,703.89	\$1,703.89	0	\$0.00
50930		\$2,217.95	\$2,217.95	0	\$0.00
50940		\$1,725.11	\$1,725.11	0	\$0.00
50945		\$1,951.98	\$1,951.98	0	\$0.00
50947		\$2,815.35	\$2,815.35	9	\$1,578.00
50948		\$2,566.87	\$2,566.87	9	\$1,578.00
50949		BR	BR	0	\$0.00
50951		\$890.15	\$627.31	1	\$402.00
50953		\$1,916.02	\$669.02	1	\$402.00
50955		\$2,026.10	\$725.35	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
50957		\$1,936.67	\$728.51	1	\$402.00
50961		\$2,412.66	\$648.20	1	\$402.00
50970		\$767.88	\$767.88	1	\$402.00
50972		\$741.53	\$741.53	1	\$402.00
50974		\$982.71	\$982.71	1	\$402.00
50976		\$971.06	\$971.06	1	\$402.00
50980		\$735.46	\$735.46	1	\$402.00
51020		\$861.18	\$861.18	4	\$762.00
51030		\$873.34	\$873.34	4	\$762.00
51040		\$584.03	\$584.03	4	\$762.00
51045		\$877.18	\$877.18	4	\$762.00
51050		\$858.92	\$858.92	4	\$762.00
51060		\$1,086.90	\$1,086.90	0	\$0.00
51065		\$1,074.94	\$1,074.94	4	\$762.00
51080		\$771.84	\$771.84	1	\$402.00
51100		\$133.22	\$85.41	0	\$0.00
51101		\$265.27	\$113.73	0	\$0.00
51102		\$708.04	\$532.96	2	\$541.00
51500		\$1,251.88	\$1,251.88	4	\$762.00
51520		\$1,138.55	\$1,138.55	4	\$762.00
51525		\$1,635.45	\$1,635.45	0	\$0.00
51530		\$1,481.29	\$1,481.29	0	\$0.00
51535		\$1,532.90	\$1,532.90	0	\$0.00
51550		\$1,831.40	\$1,831.40	0	\$0.00
51555		\$2,440.52	\$2,440.52	0	\$0.00
51565		\$2,497.95	\$2,497.95	0	\$0.00
51570		\$2,779.97	\$2,779.97	0	\$0.00
51575		\$3,462.93	\$3,462.93	0	\$0.00
51580		\$3,552.60	\$3,552.60	0	\$0.00
51585		\$3,988.62	\$3,988.62	0	\$0.00
51590		\$3,690.37	\$3,690.37	0	\$0.00
51595		\$4,173.80	\$4,173.80	0	\$0.00
51596		\$4,457.15	\$4,457.15	0	\$0.00
51597		\$4,345.81	\$4,345.81	0	\$0.00
51600		\$509.38	\$93.47	0	\$0.00
51605		\$865.51	\$79.98	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
51610		\$216.54	\$132.16	0	\$0.00
51700		\$197.28	\$94.23	0	\$0.00
51701		\$166.09	\$56.32	0	\$0.00
51702		\$218.36	\$61.55	0	\$0.00
51703		\$352.50	\$165.82	0	\$0.00
51705		\$260.51	\$131.33	0	\$0.00
51710		\$382.44	\$182.32	1	\$402.00
51715		\$614.57	\$415.20	3	\$618.00
51720		\$297.51	\$216.12	0	\$0.00
51725		\$564.79	\$564.79	0	\$0.00
51725	TC	\$401.05	\$401.05	0	\$0.00
51725	26	\$163.74	\$163.74	0	\$0.00
51726		\$737.27	\$737.27	1	\$402.00
51726	TC	\$551.91	\$551.91	0	\$0.00
51726	26	\$185.36	\$185.36	0	\$0.00
51736		\$97.06	\$97.06	0	\$0.00
51736	TC	\$30.63	\$30.63	0	\$0.00
51736	26	\$66.43	\$66.43	0	\$0.00
51741		\$157.94	\$157.94	0	\$0.00
51741	TC	\$35.13	\$35.13	0	\$0.00
51741	26	\$122.80	\$122.80	0	\$0.00
51772		\$577.14	\$577.14	1	\$402.00
51772	TC	\$399.58	\$399.58	0	\$0.00
51772	26	\$177.57	\$177.57	0	\$0.00
51784		\$441.66	\$441.66	0	\$0.00
51784	TC	\$275.61	\$275.61	0	\$0.00
51784	26	\$166.05	\$166.05	0	\$0.00
51785		\$479.72	\$479.72	1	\$402.00
51785	TC	\$314.44	\$314.44	0	\$0.00
51785	26	\$165.28	\$165.28	0	\$0.00
51792		\$556.04	\$556.04	0	\$0.00
51792	TC	\$431.08	\$431.08	0	\$0.00
51792	26	\$124.96	\$124.96	0	\$0.00
51795		\$709.83	\$709.83	0	\$0.00
51795	TC	\$543.78	\$543.78	0	\$0.00
51795	26	\$166.05	\$166.05	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
51797		\$586.78	\$586.78	0	\$0.00
51797	TC	\$413.02	\$413.02	0	\$0.00
51797	26	\$173.76	\$173.76	0	\$0.00
51798		\$33.00	\$33.00	0	\$0.00
51800		\$2,042.34	\$2,042.34	0	\$0.00
51820		\$2,164.07	\$2,164.07	0	\$0.00
51840		\$1,333.74	\$1,333.74	0	\$0.00
51841		\$1,590.82	\$1,590.82	0	\$0.00
51845		\$1,180.45	\$1,180.45	0	\$0.00
51860		\$1,462.28	\$1,462.28	0	\$0.00
51865		\$1,776.88	\$1,776.88	0	\$0.00
51880		\$955.11	\$955.11	1	\$402.00
51900		\$1,558.12	\$1,558.12	0	\$0.00
51920		\$1,430.86	\$1,430.86	0	\$0.00
51925		\$2,004.54	\$2,004.54	0	\$0.00
51940		\$3,323.97	\$3,323.97	0	\$0.00
51960		\$2,662.57	\$2,662.57	0	\$0.00
51980		\$1,366.35	\$1,366.35	0	\$0.00
51990		\$1,532.17	\$1,532.17	0	\$0.00
51992		\$1,645.46	\$1,645.46	0	\$0.00
51999		\$0.00	\$0.00	0	\$0.00
52000		\$421.64	\$223.76	1	\$402.00
52001		\$842.42	\$593.77	2	\$541.00
52005		\$646.97	\$265.41	2	\$541.00
52007		\$338.64	\$338.64	2	\$541.00
52010		\$337.15	\$337.15	2	\$541.00
52204		\$472.24	\$266.90	2	\$541.00
52214		\$409.07	\$409.07	2	\$541.00
52224		\$348.02	\$348.02	2	\$541.00
52234		\$507.18	\$507.18	2	\$541.00
52235		\$596.76	\$596.76	3	\$618.00
52240		\$1,057.13	\$1,057.13	3	\$618.00
52250		\$500.00	\$500.00	4	\$762.00
52260		\$434.48	\$434.48	2	\$541.00
52265		\$528.03	\$329.41	0	\$0.00
52270		\$374.25	\$374.25	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
52275		\$517.16	\$517.16	2	\$541.00
52276		\$551.10	\$551.10	3	\$618.00
52277		\$684.50	\$684.50	2	\$541.00
52281		\$790.35	\$313.95	2	\$541.00
52282		\$700.98	\$700.98	9	\$1,578.00
52283		\$613.77	\$415.89	2	\$541.00
52285		\$609.58	\$402.00	2	\$541.00
52290		\$506.29	\$506.29	2	\$541.00
52300		\$585.82	\$585.82	2	\$541.00
52301		\$615.05	\$615.05	3	\$618.00
52305		\$581.32	\$581.32	2	\$541.00
52310		\$499.17	\$311.00	2	\$541.00
52315		\$572.01	\$572.01	2	\$541.00
52317		\$731.25	\$731.25	1	\$402.00
52318		\$998.48	\$998.48	2	\$541.00
52320		\$514.92	\$514.92	5	\$867.00
52325		\$670.99	\$670.99	4	\$762.00
52327		\$570.46	\$570.46	2	\$541.00
52330		\$551.99	\$551.99	2	\$541.00
52332		\$314.80	\$314.80	2	\$541.00
52334		\$534.04	\$534.04	3	\$618.00
52341		\$667.48	\$667.48	3	\$618.00
52342		\$719.28	\$719.28	3	\$618.00
52343		\$795.74	\$795.74	3	\$618.00
52344		\$853.53	\$853.53	3	\$618.00
52345		\$906.83	\$906.83	3	\$618.00
52346		\$1,017.34	\$1,017.34	3	\$618.00
52351		\$650.54	\$650.54	3	\$618.00
52352		\$762.46	\$762.46	4	\$762.00
52353		\$880.63	\$880.63	4	\$762.00
52354		\$814.16	\$814.16	4	\$762.00
52355		\$974.06	\$974.06	4	\$762.00
52400		\$0.00	\$0.00	0	\$0.00
52402		\$573.87	\$573.87	0	\$0.00
52450		\$917.52	\$917.52	3	\$618.00
52500		\$1,004.10	\$1,004.10	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
52601		\$1,419.11	\$1,419.11	4	\$762.00
52630		\$846.70	\$846.70	2	\$541.00
52640		\$776.43	\$776.43	2	\$541.00
52647		\$6,635.05	\$1,206.51	9	\$1,578.00
52648		\$1,297.69	\$1,297.69	9	\$1,578.00
52649		\$0.00	\$0.00	0	\$0.00
52700		\$808.46	\$808.46	2	\$541.00
53000		\$307.62	\$307.62	1	\$402.00
53010		\$530.50	\$530.50	1	\$402.00
53020		\$380.46	\$198.26	1	\$402.00
53025		\$383.37	\$132.48	0	\$0.00
53040		\$1,387.26	\$1,010.92	2	\$541.00
53060		\$336.68	\$336.68	0	\$0.00
53080		\$991.14	\$991.14	3	\$618.00
53085		\$1,434.82	\$1,434.82	0	\$0.00
53200		\$541.74	\$290.85	1	\$402.00
53210		\$1,507.32	\$1,507.32	5	\$867.00
53215		\$1,806.95	\$1,806.95	5	\$867.00
53220		\$877.18	\$877.18	2	\$541.00
53230		\$1,164.99	\$1,164.99	2	\$541.00
53235		\$1,222.90	\$1,222.90	3	\$618.00
53240		\$814.73	\$814.73	2	\$541.00
53250		\$746.21	\$746.21	2	\$541.00
53260		\$500.65	\$389.39	2	\$541.00
53265		\$399.51	\$399.51	2	\$541.00
53270		\$401.67	\$401.67	2	\$541.00
53275		\$549.43	\$549.43	2	\$541.00
53400		\$1,531.25	\$1,531.25	3	\$618.00
53405		\$1,696.34	\$1,696.34	2	\$541.00
53410		\$1,913.14	\$1,913.14	2	\$541.00
53415		\$2,180.63	\$2,180.63	0	\$0.00
53420		\$1,665.81	\$1,665.81	3	\$618.00
53425		\$1,862.20	\$1,862.20	2	\$541.00
53430		\$1,902.37	\$1,902.37	2	\$541.00
53431		\$2,283.42	\$2,283.42	2	\$541.00
53440		\$1,580.94	\$1,580.94	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
53442		\$1,365.88	\$1,365.88	1	\$402.00
53444		\$1,567.81	\$1,567.81	2	\$541.00
53445		\$1,717.88	\$1,717.88	1	\$402.00
53446		\$1,254.73	\$1,254.73	1	\$402.00
53447		\$1,610.51	\$1,610.51	1	\$402.00
53448		\$2,460.46	\$2,460.46	0	\$0.00
53449		\$1,172.02	\$1,172.02	1	\$402.00
53450		\$768.77	\$768.77	1	\$402.00
53460		\$882.06	\$882.06	1	\$402.00
53500		\$1,485.01	\$1,485.01	0	\$0.00
53502		\$951.93	\$951.93	2	\$541.00
53505		\$936.90	\$936.90	2	\$541.00
53510		\$1,239.97	\$1,239.97	2	\$541.00
53515		\$1,566.64	\$1,566.64	2	\$541.00
53520		\$1,070.61	\$1,070.61	2	\$541.00
53600		\$188.76	\$133.50	0	\$0.00
53601		\$179.73	\$110.28	0	\$0.00
53605		\$138.26	\$138.26	2	\$541.00
53620		\$288.82	\$181.30	0	\$0.00
53621		\$272.17	\$150.45	0	\$0.00
53660		\$160.86	\$83.95	0	\$0.00
53661		\$161.64	\$83.24	0	\$0.00
53665		\$83.40	\$83.40	1	\$402.00
53850		\$8,200.64	\$1,112.18	0	\$0.00
53852		\$7,817.60	\$1,175.67	0	\$0.00
53899		BR	BR	0	\$0.00
54000		\$0.00	\$0.00	2	\$541.00
54001		\$508.19	\$297.62	2	\$541.00
54015		\$638.90	\$638.90	4	\$762.00
54050		\$229.93	\$181.40	0	\$0.00
54055		\$221.65	\$161.91	0	\$0.00
54056		\$288.16	\$205.27	0	\$0.00
54057		\$169.48	\$169.48	1	\$402.00
54060		\$453.47	\$270.52	1	\$402.00
54065		\$330.51	\$330.51	1	\$402.00
54100		\$373.43	\$218.86	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
54105		\$439.68	\$439.68	1	\$402.00
54110		\$0.00	\$0.00	0	\$0.00
54111		\$0.00	\$0.00	0	\$0.00
54112		\$0.00	\$0.00	0	\$0.00
54115		\$1,156.36	\$850.96	1	\$402.00
54120		\$1,252.93	\$1,252.93	2	\$541.00
54125		\$1,635.32	\$1,635.32	0	\$0.00
54130		\$2,361.71	\$2,361.71	0	\$0.00
54135		\$3,030.70	\$3,030.70	0	\$0.00
54150		\$0.00	\$0.00	0	\$0.00
54160		\$0.00	\$0.00	0	\$0.00
54161		\$391.82	\$391.82	2	\$541.00
54162		\$0.00	\$0.00	0	\$0.00
54163		\$0.00	\$0.00	0	\$0.00
54164		\$0.00	\$0.00	0	\$0.00
54200		\$0.00	\$0.00	0	\$0.00
54205		\$0.00	\$0.00	0	\$0.00
54220		\$499.30	\$274.54	1	\$402.00
54230		\$195.97	\$159.38	0	\$0.00
54231		\$277.68	\$237.36	0	\$0.00
54235		\$172.26	\$143.14	0	\$0.00
54240		\$191.49	\$191.49	0	\$0.00
54240	TC	\$50.14	\$50.14	0	\$0.00
54240	26	\$141.35	\$141.35	0	\$0.00
54250		\$256.69	\$256.69	0	\$0.00
54250	TC	\$17.96	\$17.96	0	\$0.00
54250	26	\$238.73	\$238.73	0	\$0.00
54300		\$0.00	\$0.00	0	\$0.00
54304		\$0.00	\$0.00	0	\$0.00
54308		\$0.00	\$0.00	0	\$0.00
54312		\$0.00	\$0.00	0	\$0.00
54316		\$0.00	\$0.00	0	\$0.00
54318		\$0.00	\$0.00	0	\$0.00
54322		\$0.00	\$0.00	0	\$0.00
54324		\$0.00	\$0.00	0	\$0.00
54326		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
54328		\$0.00	\$0.00	0	\$0.00
54332		\$0.00	\$0.00	0	\$0.00
54336		\$0.00	\$0.00	0	\$0.00
54340		\$0.00	\$0.00	0	\$0.00
54344		\$0.00	\$0.00	0	\$0.00
54348		\$0.00	\$0.00	0	\$0.00
54352		\$0.00	\$0.00	0	\$0.00
54360		\$0.00	\$0.00	0	\$0.00
54380		\$0.00	\$0.00	0	\$0.00
54385		\$0.00	\$0.00	0	\$0.00
54390		\$0.00	\$0.00	0	\$0.00
54400		\$1,085.13	\$1,085.13	3	\$618.00
54401		\$1,296.59	\$1,296.59	3	\$618.00
54405		\$1,574.47	\$1,574.47	3	\$618.00
54406		\$1,421.92	\$1,421.92	3	\$618.00
54408		\$1,499.69	\$1,499.69	3	\$618.00
54410		\$1,796.29	\$1,796.29	3	\$618.00
54411		\$1,852.20	\$1,852.20	0	\$0.00
54415		\$1,006.98	\$1,006.98	3	\$618.00
54416		\$1,305.23	\$1,305.23	3	\$618.00
54417		\$1,622.12	\$1,622.12	0	\$0.00
54420		\$1,384.39	\$1,384.39	4	\$762.00
54430		\$1,240.86	\$1,240.86	0	\$0.00
54435		\$791.08	\$791.08	4	\$762.00
54440		\$1,176.17	\$1,176.17	4	\$762.00
54450		\$176.50	\$128.71	1	\$402.00
54500		\$155.54	\$152.55	1	\$402.00
54505		\$434.32	\$434.32	1	\$402.00
54512		\$1,032.24	\$1,032.24	2	\$541.00
54520		\$652.78	\$652.78	3	\$618.00
54522		\$1,166.24	\$1,166.24	3	\$618.00
54530		\$1,042.64	\$1,042.64	4	\$762.00
54535		\$1,449.18	\$1,449.18	0	\$0.00
54550		\$0.00	\$0.00	0	\$0.00
54560		\$0.00	\$0.00	0	\$0.00
54600		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
54620		\$0.00	\$0.00	0	\$0.00
54640		\$868.72	\$868.72	4	\$762.00
54650		\$0.00	\$0.00	0	\$0.00
54660		\$661.36	\$661.36	2	\$541.00
54670		\$807.85	\$807.85	3	\$618.00
54680		\$1,544.47	\$1,544.47	3	\$618.00
54690		\$1,325.18	\$1,325.18	9	\$1,578.00
54692		\$0.00	\$0.00	0	\$0.00
54699		BR	BR	0	\$0.00
54700		\$435.01	\$435.01	2	\$541.00
54800		\$265.25	\$262.26	1	\$402.00
54830		\$683.19	\$683.19	3	\$618.00
54840		\$0.00	\$0.00	0	\$0.00
54860		\$781.35	\$781.35	3	\$618.00
54861		\$1,070.59	\$1,070.59	4	\$762.00
54865		\$796.66	\$796.66	2	\$541.00
54900		\$0.00	\$0.00	0	\$0.00
54901		\$0.00	\$0.00	0	\$0.00
55000		\$279.20	\$168.69	0	\$0.00
55040		\$672.68	\$672.68	3	\$618.00
55041		\$953.06	\$953.06	5	\$867.00
55060		\$699.41	\$699.41	4	\$762.00
55100		\$463.94	\$299.67	1	\$402.00
55110		\$716.44	\$716.44	2	\$541.00
55120		\$859.87	\$652.29	2	\$541.00
55150		\$903.39	\$903.39	1	\$402.00
55175		\$669.99	\$669.99	1	\$402.00
55180		\$1,311.80	\$1,311.80	2	\$541.00
55200		\$0.00	\$0.00	0	\$0.00
55250		\$0.00	\$0.00	0	\$0.00
55300		\$0.00	\$0.00	0	\$0.00
55400		\$0.00	\$0.00	0	\$0.00
55450		\$0.00	\$0.00	0	\$0.00
55500		\$712.49	\$712.49	3	\$618.00
55520		\$769.55	\$769.55	4	\$762.00
55530		\$705.10	\$705.10	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
55535		\$809.13	\$809.13	4	\$762.00
55540		\$955.58	\$955.58	5	\$867.00
55550		\$804.05	\$804.05	9	\$1,578.00
55559		BR	BR	0	\$0.00
55600		\$787.53	\$787.53	0	\$0.00
55605		\$997.93	\$997.93	0	\$0.00
55650		\$1,387.20	\$1,387.20	0	\$0.00
55680		\$660.80	\$660.80	1	\$402.00
55700		\$457.40	\$184.86	2	\$541.00
55705		\$553.25	\$553.25	2	\$541.00
55706		\$0.00	\$0.00	0	\$0.00
55720		\$933.17	\$933.17	1	\$402.00
55725		\$1,070.56	\$1,070.56	2	\$541.00
55801		\$2,039.73	\$2,039.73	0	\$0.00
55810		\$2,536.99	\$2,536.99	0	\$0.00
55812		\$3,134.23	\$3,134.23	0	\$0.00
55815		\$3,447.21	\$3,447.21	0	\$0.00
55821		\$1,662.56	\$1,662.56	0	\$0.00
55831		\$1,811.61	\$1,811.61	0	\$0.00
55840		\$2,601.63	\$2,601.63	0	\$0.00
55842		\$2,784.68	\$2,784.68	0	\$0.00
55845		\$3,213.31	\$3,213.31	0	\$0.00
55860		\$1,684.84	\$1,684.84	0	\$0.00
55862		\$2,136.76	\$2,136.76	0	\$0.00
55865		\$2,611.21	\$2,611.21	0	\$0.00
55866		\$3,406.04	\$3,406.04	0	\$0.00
55870		\$331.83	\$295.99	0	\$0.00
55873		\$2,287.31	\$2,287.31	0	\$0.00
55875		\$0.00	\$0.00	0	\$0.00
55876		\$0.00	\$0.00	0	\$0.00
55899		BR	BR	0	\$0.00
55920		\$0.00	\$0.00	0	\$0.00
55970		\$0.00	\$0.00	0	\$0.00
55980		\$0.00	\$0.00	0	\$0.00
56405		\$226.31	\$212.12	0	\$0.00
56420		\$294.82	\$202.22	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
56440		\$376.32	\$376.32	2	\$541.00
56441		\$307.36	\$276.75	1	\$402.00
56442		\$0.00	\$0.00	0	\$0.00
56501		\$269.20	\$228.88	0	\$0.00
56515		\$425.10	\$370.59	3	\$618.00
56605		\$178.01	\$130.22	0	\$0.00
56606		\$86.42	\$64.76	0	\$0.00
56620		\$1,028.10	\$1,028.10	5	\$867.00
56625		\$1,152.45	\$1,152.45	7	\$1,205.00
56630		\$1,619.50	\$1,619.50	0	\$0.00
56631		\$2,108.57	\$2,108.57	0	\$0.00
56632		\$2,514.10	\$2,514.10	0	\$0.00
56633		\$2,116.31	\$2,116.31	0	\$0.00
56634		\$2,302.14	\$2,302.14	0	\$0.00
56637		\$2,780.10	\$2,780.10	0	\$0.00
56640		\$2,760.07	\$2,760.07	0	\$0.00
56700		\$350.51	\$350.51	1	\$402.00
56740		\$575.88	\$575.88	3	\$618.00
56800		\$502.61	\$502.61	3	\$618.00
56805		\$0.00	\$0.00	0	\$0.00
56810		\$533.41	\$533.41	5	\$867.00
56820		\$229.42	\$173.41	0	\$0.00
56821		\$307.57	\$239.62	0	\$0.00
57000		\$388.72	\$388.72	1	\$402.00
57010		\$814.37	\$814.37	2	\$541.00
57020		\$202.64	\$175.76	2	\$541.00
57022		\$0.00	\$0.00	0	\$0.00
57023		\$588.18	\$588.18	1	\$402.00
57061		\$236.09	\$195.76	0	\$0.00
57065		\$403.13	\$357.58	1	\$402.00
57100		\$186.56	\$138.77	0	\$0.00
57105		\$295.19	\$248.89	2	\$541.00
57106		\$873.77	\$873.77	0	\$0.00
57107		\$2,789.64	\$2,789.64	0	\$0.00
57109		\$3,141.31	\$3,141.31	0	\$0.00
57110		\$1,796.87	\$1,796.87	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
57111		\$3,305.71	\$3,305.71	0	\$0.00
57112		\$3,377.91	\$3,377.91	0	\$0.00
57120		\$996.51	\$996.51	0	\$0.00
57130		\$376.31	\$329.27	2	\$541.00
57135		\$403.30	\$357.00	2	\$541.00
57150		\$131.97	\$64.76	0	\$0.00
57155		\$0.00	\$0.00	0	\$0.00
57160		\$160.07	\$107.05	0	\$0.00
57170		\$0.00	\$0.00	0	\$0.00
57180		\$305.98	\$238.03	1	\$402.00
57200		\$564.05	\$564.05	1	\$402.00
57210		\$709.68	\$709.68	2	\$541.00
57220		\$611.71	\$611.71	3	\$618.00
57230		\$743.43	\$743.43	3	\$618.00
57240		\$812.20	\$812.20	5	\$867.00
57250		\$752.09	\$752.09	5	\$867.00
57260		\$1,086.25	\$1,086.25	5	\$867.00
57265		\$1,446.30	\$1,446.30	7	\$1,205.00
57267		\$581.58	\$581.58	7	\$1,205.00
57268		\$906.68	\$906.68	3	\$618.00
57270		\$1,525.17	\$1,525.17	0	\$0.00
57280		\$1,861.46	\$1,861.46	0	\$0.00
57282		\$1,171.26	\$1,171.26	0	\$0.00
57283		\$1,374.69	\$1,374.69	0	\$0.00
57284		\$1,638.48	\$1,638.48	0	\$0.00
57285		\$0.00	\$0.00	0	\$0.00
57287		\$1,318.54	\$1,318.54	0	\$0.00
57288		\$1,540.35	\$1,540.35	5	\$867.00
57289		\$1,446.68	\$1,446.68	5	\$867.00
57291		\$1,064.87	\$1,064.87	5	\$867.00
57292		\$1,666.99	\$1,666.99	0	\$0.00
57295		\$987.22	\$987.22	0	\$0.00
57296		\$1,917.83	\$1,917.83	0	\$0.00
57300		\$982.16	\$982.16	3	\$618.00
57305		\$1,667.15	\$1,667.15	0	\$0.00
57307		\$1,917.15	\$1,917.15	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
57308		\$1,246.78	\$1,246.78	0	\$0.00
57310		\$862.99	\$862.99	0	\$0.00
57311		\$985.98	\$985.98	0	\$0.00
57320		\$1,013.92	\$1,013.92	0	\$0.00
57330		\$1,476.79	\$1,476.79	0	\$0.00
57335		\$0.00	\$0.00	0	\$0.00
57400		\$282.38	\$282.38	2	\$541.00
57410		\$302.06	\$216.19	2	\$541.00
57415		\$295.42	\$295.42	2	\$541.00
57420		\$240.22	\$184.21	0	\$0.00
57421		\$326.76	\$255.82	0	\$0.00
57423		\$0.00	\$0.00	0	\$0.00
57425		\$1,860.94	\$1,860.94	0	\$0.00
57452		\$233.90	\$173.41	0	\$0.00
57454		\$327.95	\$268.97	0	\$0.00
57455		\$301.38	\$232.69	0	\$0.00
57456		\$284.47	\$218.01	0	\$0.00
57460		\$707.07	\$337.45	0	\$0.00
57461		\$773.41	\$399.31	0	\$0.00
57500		\$288.05	\$120.05	0	\$0.00
57505		\$211.77	\$183.40	0	\$0.00
57510		\$284.01	\$243.68	0	\$0.00
57511		\$304.17	\$269.82	0	\$0.00
57513		\$308.66	\$272.82	2	\$541.00
57520		\$725.00	\$563.71	2	\$541.00
57522		\$625.41	\$496.98	2	\$541.00
57530		\$679.20	\$679.20	3	\$618.00
57531		\$3,410.16	\$3,410.16	0	\$0.00
57540		\$1,536.84	\$1,536.84	0	\$0.00
57545		\$1,642.16	\$1,642.16	0	\$0.00
57550		\$773.77	\$773.77	3	\$618.00
57555		\$1,167.91	\$1,167.91	0	\$0.00
57556		\$1,094.01	\$1,094.01	5	\$867.00
57558		\$0.00	\$0.00	0	\$0.00
57700		\$542.43	\$542.43	1	\$402.00
57720		\$598.37	\$598.37	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
57800		\$126.07	\$104.41	0	\$0.00
58100		\$226.46	\$179.42	0	\$0.00
58110		\$108.45	\$90.73	0	\$0.00
58120		\$460.06	\$427.21	2	\$541.00
58140		\$1,807.73	\$1,807.73	0	\$0.00
58145		\$1,064.49	\$1,064.49	5	\$867.00
58146		\$2,273.95	\$2,273.95	0	\$0.00
58150		\$1,898.27	\$1,898.27	0	\$0.00
58152		\$2,487.94	\$2,487.94	0	\$0.00
58180		\$1,897.64	\$1,897.64	0	\$0.00
58200		\$2,643.60	\$2,643.60	0	\$0.00
58210		\$3,526.85	\$3,526.85	0	\$0.00
58240		\$4,688.48	\$4,688.48	0	\$0.00
58260		\$1,630.62	\$1,630.62	0	\$0.00
58262		\$1,838.84	\$1,838.84	0	\$0.00
58263		\$1,989.94	\$1,989.94	0	\$0.00
58267		\$2,098.51	\$2,098.51	0	\$0.00
58270		\$1,770.50	\$1,770.50	0	\$0.00
58275		\$1,953.71	\$1,953.71	0	\$0.00
58280		\$2,090.27	\$2,090.27	0	\$0.00
58285		\$2,672.92	\$2,672.92	0	\$0.00
58290		\$2,261.49	\$2,261.49	0	\$0.00
58291		\$2,492.86	\$2,492.86	0	\$0.00
58292		\$2,645.45	\$2,645.45	0	\$0.00
58293		\$2,754.81	\$2,754.81	0	\$0.00
58294		\$2,431.99	\$2,431.99	0	\$0.00
58300		\$0.00	\$0.00	0	\$0.00
58301		\$0.00	\$0.00	0	\$0.00
58321		\$0.00	\$0.00	0	\$0.00
58322		\$0.00	\$0.00	0	\$0.00
58323		\$0.00	\$0.00	0	\$0.00
58340		\$538.60	\$124.18	0	\$0.00
58345		\$578.42	\$578.42	0	\$0.00
58346		\$0.00	\$0.00	0	\$0.00
58350		\$201.58	\$157.52	3	\$618.00
58353		\$3,085.81	\$465.62	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
58356		\$1,073.88	\$763.00	0	\$0.00
58400		\$853.68	\$853.68	0	\$0.00
58410		\$1,580.18	\$1,580.18	0	\$0.00
58520		\$1,490.16	\$1,490.16	0	\$0.00
58540		\$1,782.82	\$1,782.82	0	\$0.00
58541		\$0.00	\$0.00	0	\$0.00
58542		\$0.00	\$0.00	0	\$0.00
58543		\$0.00	\$0.00	0	\$0.00
58544		\$0.00	\$0.00	0	\$0.00
58545		\$1,813.68	\$1,813.68	9	\$1,578.00
58546		\$2,290.35	\$2,290.35	9	\$1,578.00
58548		\$0.00	\$0.00	0	\$0.00
58550		\$1,790.58	\$1,790.58	9	\$1,578.00
58552		\$1,789.09	\$1,789.09	0	\$0.00
58553		\$2,266.72	\$2,266.72	0	\$0.00
58554		\$2,289.12	\$2,289.12	0	\$0.00
58555		\$449.09	\$400.55	1	\$402.00
58558		\$570.06	\$570.06	3	\$618.00
58559		\$733.54	\$733.54	2	\$541.00
58560		\$833.70	\$833.70	3	\$618.00
58561		\$1,185.99	\$1,185.99	3	\$618.00
58562		\$618.76	\$618.76	3	\$618.00
58563		\$735.04	\$735.04	4	\$762.00
58565		\$4,324.30	\$936.52	4	\$762.00
58570		\$0.00	\$0.00	0	\$0.00
58571		\$0.00	\$0.00	0	\$0.00
58572		\$0.00	\$0.00	0	\$0.00
58573		\$0.00	\$0.00	0	\$0.00
58578		BR	BR	0	\$0.00
58579		BR	BR	0	\$0.00
58600		\$0.00	\$0.00	0	\$0.00
58605		\$0.00	\$0.00	0	\$0.00
58611		\$0.00	\$0.00	0	\$0.00
58615		\$0.00	\$0.00	0	\$0.00
58660		\$1,381.91	\$1,381.91	5	\$867.00
58661		\$1,351.15	\$1,351.15	5	\$867.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
58662		\$1,462.84	\$1,462.84	5	\$867.00
58670		\$734.44	\$734.44	3	\$618.00
58671		\$735.95	\$735.95	3	\$618.00
58672		\$1,583.21	\$1,583.21	5	\$867.00
58673		\$1,697.08	\$1,697.08	5	\$867.00
58679		BR	BR	0	\$0.00
58700		\$1,449.89	\$1,449.89	0	\$0.00
58720		\$1,429.20	\$1,429.20	0	\$0.00
58740		\$1,685.77	\$1,685.77	0	\$0.00
58750		\$1,852.75	\$1,852.75	0	\$0.00
58752		\$1,826.59	\$1,826.59	0	\$0.00
58760		\$1,654.54	\$1,654.54	0	\$0.00
58770		\$1,742.72	\$1,742.72	0	\$0.00
58800		\$694.62	\$581.87	3	\$618.00
58805		\$776.50	\$776.50	0	\$0.00
58820		\$607.39	\$607.39	3	\$618.00
58822		\$1,268.36	\$1,268.36	0	\$0.00
58823		\$364.54	\$364.54	0	\$0.00
58825		\$1,351.31	\$1,351.31	0	\$0.00
58900		\$791.07	\$791.07	0	\$0.00
58920		\$1,371.45	\$1,371.45	0	\$0.00
58925		\$1,420.24	\$1,420.24	0	\$0.00
58940		\$946.76	\$946.76	0	\$0.00
58943		\$2,269.85	\$2,269.85	0	\$0.00
58950		\$2,112.41	\$2,112.41	0	\$0.00
58951		\$2,749.47	\$2,749.47	0	\$0.00
58952		\$3,090.92	\$3,090.92	0	\$0.00
58953		\$0.00	\$0.00	0	\$0.00
58954		\$0.00	\$0.00	0	\$0.00
58956		\$2,719.52	\$2,719.52	0	\$0.00
58957		\$0.00	\$0.00	0	\$0.00
58958		\$0.00	\$0.00	0	\$0.00
58960		\$1,846.75	\$1,846.75	0	\$0.00
58970		\$0.00	\$0.00	0	\$0.00
58974		\$0.00	\$0.00	0	\$0.00
58976		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
58999		BR	BR	0	\$0.00
59000		\$0.00	\$0.00	0	\$0.00
59001		\$0.00	\$0.00	0	\$0.00
59012		\$0.00	\$0.00	0	\$0.00
59015		\$0.00	\$0.00	0	\$0.00
59020		\$0.00	\$0.00	0	\$0.00
59020	TC	\$0.00	\$0.00	0	\$0.00
59020	26	\$0.00	\$0.00	0	\$0.00
59025		\$0.00	\$0.00	0	\$0.00
59025	TC	\$0.00	\$0.00	0	\$0.00
59025	26	\$0.00	\$0.00	0	\$0.00
59030		\$0.00	\$0.00	0	\$0.00
59050		\$0.00	\$0.00	0	\$0.00
59051		\$0.00	\$0.00	0	\$0.00
59070		\$0.00	\$0.00	0	\$0.00
59072		\$0.00	\$0.00	0	\$0.00
59074		\$0.00	\$0.00	0	\$0.00
59076		\$0.00	\$0.00	0	\$0.00
59100		\$0.00	\$0.00	0	\$0.00
59120		\$0.00	\$0.00	0	\$0.00
59121		\$0.00	\$0.00	0	\$0.00
59130		\$0.00	\$0.00	0	\$0.00
59135		\$0.00	\$0.00	0	\$0.00
59136		\$0.00	\$0.00	0	\$0.00
59140		\$0.00	\$0.00	0	\$0.00
59150		\$0.00	\$0.00	0	\$0.00
59151		\$0.00	\$0.00	0	\$0.00
59160		\$0.00	\$0.00	0	\$0.00
59200		\$0.00	\$0.00	0	\$0.00
59300		\$0.00	\$0.00	0	\$0.00
59320		\$0.00	\$0.00	0	\$0.00
59325		\$0.00	\$0.00	0	\$0.00
59350		\$0.00	\$0.00	0	\$0.00
59400		\$0.00	\$0.00	0	\$0.00
59409		\$0.00	\$0.00	0	\$0.00
59410		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
59412		\$0.00	\$0.00	0	\$0.00
59414		\$0.00	\$0.00	0	\$0.00
59425		\$0.00	\$0.00	0	\$0.00
59426		\$0.00	\$0.00	0	\$0.00
59430		\$0.00	\$0.00	0	\$0.00
59510		\$0.00	\$0.00	0	\$0.00
59514		\$0.00	\$0.00	0	\$0.00
59515		\$0.00	\$0.00	0	\$0.00
59525		\$0.00	\$0.00	0	\$0.00
59610		\$0.00	\$0.00	0	\$0.00
59612		\$0.00	\$0.00	0	\$0.00
59614		\$0.00	\$0.00	0	\$0.00
59618		\$0.00	\$0.00	0	\$0.00
59620		\$0.00	\$0.00	0	\$0.00
59622		\$0.00	\$0.00	0	\$0.00
59812		\$0.00	\$0.00	0	\$0.00
59820		\$0.00	\$0.00	0	\$0.00
59821		\$0.00	\$0.00	0	\$0.00
59830		\$0.00	\$0.00	0	\$0.00
59840		\$0.00	\$0.00	0	\$0.00
59841		\$0.00	\$0.00	0	\$0.00
59850		\$0.00	\$0.00	0	\$0.00
59851		\$0.00	\$0.00	0	\$0.00
59852		\$0.00	\$0.00	0	\$0.00
59855		\$0.00	\$0.00	0	\$0.00
59856		\$0.00	\$0.00	0	\$0.00
59857		\$0.00	\$0.00	0	\$0.00
59866		\$0.00	\$0.00	0	\$0.00
59870		\$0.00	\$0.00	0	\$0.00
59871		\$0.00	\$0.00	0	\$0.00
59897		\$0.00	\$0.00	0	\$0.00
59898		\$0.00	\$0.00	0	\$0.00
59899		\$0.00	\$0.00	0	\$0.00
60000		\$314.04	\$304.33	1	\$402.00
60100		\$233.25	\$166.05	0	\$0.00
60200		\$1,281.15	\$1,281.15	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
60210		\$1,373.47	\$1,373.47	0	\$0.00
60212		\$1,972.57	\$1,972.57	0	\$0.00
60220		\$1,487.41	\$1,487.41	0	\$0.00
60225		\$1,791.79	\$1,791.79	0	\$0.00
60240		\$1,969.67	\$1,969.67	0	\$0.00
60252		\$2,523.16	\$2,523.16	0	\$0.00
60254		\$3,361.53	\$3,361.53	0	\$0.00
60260		\$2,152.02	\$2,152.02	0	\$0.00
60270		\$2,526.93	\$2,526.93	0	\$0.00
60271		\$2,089.97	\$2,089.97	0	\$0.00
60280		\$862.10	\$862.10	4	\$762.00
60281		\$1,175.67	\$1,175.67	4	\$762.00
60300		\$0.00	\$0.00	0	\$0.00
60500		\$1,976.47	\$1,976.47	0	\$0.00
60502		\$2,479.91	\$2,479.91	0	\$0.00
60505		\$2,694.01	\$2,694.01	0	\$0.00
60512		\$508.43	\$508.43	0	\$0.00
60520		\$2,093.21	\$2,093.21	0	\$0.00
60521		\$2,373.97	\$2,373.97	0	\$0.00
60522		\$2,875.02	\$2,875.02	0	\$0.00
60540		\$2,029.58	\$2,029.58	0	\$0.00
60545		\$2,353.81	\$2,353.81	0	\$0.00
60600		\$2,378.67	\$2,378.67	0	\$0.00
60605		\$2,739.23	\$2,739.23	0	\$0.00
60650		\$2,339.04	\$2,339.04	0	\$0.00
60659		BR	BR	0	\$0.00
60699		BR	BR	0	\$0.00
61000		\$0.00	\$0.00	0	\$0.00
61001		\$0.00	\$0.00	0	\$0.00
61020		\$243.98	\$243.98	1	\$402.00
61026		\$258.69	\$258.69	1	\$402.00
61050		\$225.04	\$225.04	1	\$402.00
61055		\$283.10	\$283.10	1	\$402.00
61070		\$155.59	\$155.59	1	\$402.00
61105		\$795.16	\$795.16	0	\$0.00
61107		\$732.62	\$732.62	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
61108		\$1,520.43	\$1,520.43	0	\$0.00
61120		\$1,301.42	\$1,301.42	0	\$0.00
61140		\$2,274.39	\$2,274.39	0	\$0.00
61150		\$2,475.11	\$2,475.11	0	\$0.00
61151		\$1,783.67	\$1,783.67	0	\$0.00
61154		\$2,164.22	\$2,164.22	0	\$0.00
61156		\$2,327.21	\$2,327.21	0	\$0.00
61210		\$841.14	\$841.14	0	\$0.00
61215		\$775.49	\$775.49	3	\$618.00
61250		\$1,514.45	\$1,514.45	0	\$0.00
61253		\$1,753.18	\$1,753.18	0	\$0.00
61304		\$3,076.72	\$3,076.72	0	\$0.00
61305		\$3,710.86	\$3,710.86	0	\$0.00
61312		\$3,506.85	\$3,506.85	0	\$0.00
61313		\$3,525.46	\$3,525.46	0	\$0.00
61314		\$3,239.17	\$3,239.17	0	\$0.00
61315		\$3,880.39	\$3,880.39	0	\$0.00
61316		\$190.93	\$190.93	0	\$0.00
61320		\$3,585.59	\$3,585.59	0	\$0.00
61321		\$3,927.45	\$3,927.45	0	\$0.00
61322		\$3,842.75	\$3,842.75	0	\$0.00
61323		\$3,972.63	\$3,972.63	0	\$0.00
61330		\$3,090.32	\$3,090.32	0	\$0.00
61332		\$3,682.38	\$3,682.38	0	\$0.00
61333		\$3,558.84	\$3,558.84	0	\$0.00
61334		\$2,504.83	\$2,504.83	0	\$0.00
61340		\$2,629.26	\$2,629.26	0	\$0.00
61343		\$4,143.17	\$4,143.17	0	\$0.00
61345		\$3,762.13	\$3,762.13	0	\$0.00
61440		\$3,660.12	\$3,660.12	0	\$0.00
61450		\$3,569.37	\$3,569.37	0	\$0.00
61458		\$3,781.96	\$3,781.96	0	\$0.00
61460		\$3,922.11	\$3,922.11	0	\$0.00
61470		\$3,502.29	\$3,502.29	0	\$0.00
61480		\$3,726.01	\$3,726.01	0	\$0.00
61490		\$3,574.17	\$3,574.17	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
61500		\$2,512.35	\$2,512.35	0	\$0.00
61501		\$2,094.11	\$2,094.11	0	\$0.00
61510		\$4,007.35	\$4,007.35	0	\$0.00
61512		\$4,874.09	\$4,874.09	0	\$0.00
61514		\$3,528.96	\$3,528.96	0	\$0.00
61516		\$3,448.64	\$3,448.64	0	\$0.00
61517		\$157.28	\$157.28	0	\$0.00
61518		\$5,192.56	\$5,192.56	0	\$0.00
61519		\$5,681.38	\$5,681.38	0	\$0.00
61520		\$7,488.45	\$7,488.45	0	\$0.00
61521		\$6,105.80	\$6,105.80	0	\$0.00
61522		\$4,020.96	\$4,020.96	0	\$0.00
61524		\$3,813.21	\$3,813.21	0	\$0.00
61526		\$6,905.80	\$6,905.80	0	\$0.00
61530		\$5,876.04	\$5,876.04	0	\$0.00
61531		\$2,091.59	\$2,091.59	0	\$0.00
61533		\$2,757.16	\$2,757.16	0	\$0.00
61534		\$2,928.79	\$2,928.79	0	\$0.00
61535		\$1,677.51	\$1,677.51	0	\$0.00
61536		\$4,874.59	\$4,874.59	0	\$0.00
61537		\$3,528.62	\$3,528.62	0	\$0.00
61538		\$3,740.22	\$3,740.22	0	\$0.00
61539		\$4,448.87	\$4,448.87	0	\$0.00
61540		\$4,258.72	\$4,258.72	0	\$0.00
61541		\$3,976.78	\$3,976.78	0	\$0.00
61542		\$4,358.29	\$4,358.29	0	\$0.00
61543		\$4,073.45	\$4,073.45	0	\$0.00
61544		\$3,483.01	\$3,483.01	0	\$0.00
61545		\$6,056.45	\$6,056.45	0	\$0.00
61546		\$4,315.75	\$4,315.75	0	\$0.00
61548		\$2,976.65	\$2,976.65	0	\$0.00
61550		\$1,773.61	\$1,773.61	0	\$0.00
61552		\$2,295.53	\$2,295.53	0	\$0.00
61556		\$2,920.79	\$2,920.79	0	\$0.00
61557		\$3,202.15	\$3,202.15	0	\$0.00
61558		\$3,304.28	\$3,304.28	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
61559		\$4,642.24	\$4,642.24	0	\$0.00
61563		\$3,652.42	\$3,652.42	0	\$0.00
61564		\$4,666.51	\$4,666.51	0	\$0.00
61566		\$4,217.66	\$4,217.66	0	\$0.00
61567		\$4,818.67	\$4,818.67	0	\$0.00
61570		\$3,389.61	\$3,389.61	0	\$0.00
61571		\$3,679.44	\$3,679.44	0	\$0.00
61575		\$4,620.52	\$4,620.52	0	\$0.00
61576		\$6,743.22	\$6,743.22	0	\$0.00
61580		\$4,535.26	\$4,535.26	0	\$0.00
61581		\$4,752.16	\$4,752.16	0	\$0.00
61582		\$5,085.89	\$5,085.89	0	\$0.00
61583		\$5,341.97	\$5,341.97	0	\$0.00
61584		\$5,139.30	\$5,139.30	0	\$0.00
61585		\$5,568.18	\$5,568.18	0	\$0.00
61586		\$3,966.21	\$3,966.21	0	\$0.00
61590		\$5,815.42	\$5,815.42	0	\$0.00
61591		\$6,122.81	\$6,122.81	0	\$0.00
61592		\$5,785.27	\$5,785.27	0	\$0.00
61595		\$4,278.58	\$4,278.58	0	\$0.00
61596		\$5,016.76	\$5,016.76	0	\$0.00
61597		\$5,304.08	\$5,304.08	0	\$0.00
61598		\$4,784.33	\$4,784.33	0	\$0.00
61600		\$3,799.90	\$3,799.90	0	\$0.00
61601		\$4,209.69	\$4,209.69	0	\$0.00
61605		\$4,183.22	\$4,183.22	0	\$0.00
61606		\$5,549.39	\$5,549.39	0	\$0.00
61607		\$5,146.05	\$5,146.05	0	\$0.00
61608		\$6,050.82	\$6,050.82	0	\$0.00
61609		\$1,325.30	\$1,325.30	0	\$0.00
61610		\$3,623.59	\$3,623.59	0	\$0.00
61611		\$1,008.00	\$1,008.00	0	\$0.00
61612		\$3,500.24	\$3,500.24	0	\$0.00
61613		\$5,930.08	\$5,930.08	0	\$0.00
61615		\$4,643.14	\$4,643.14	0	\$0.00
61616		\$6,185.16	\$6,185.16	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
61618		\$2,382.17	\$2,382.17	0	\$0.00
61619		\$2,853.13	\$2,853.13	0	\$0.00
61623		\$1,139.18	\$1,139.18	0	\$0.00
61624		\$2,194.39	\$2,194.39	0	\$0.00
61626		\$1,786.49	\$1,786.49	0	\$0.00
61630		BR	BR	0	\$0.00
61635		BR	BR	0	\$0.00
61640		BR	BR	0	\$0.00
61641		BR	BR	0	\$0.00
61642		BR	BR	0	\$0.00
61680		\$0.00	\$0.00	0	\$0.00
61682		\$0.00	\$0.00	0	\$0.00
61684		\$0.00	\$0.00	0	\$0.00
61686		\$0.00	\$0.00	0	\$0.00
61690		\$0.00	\$0.00	0	\$0.00
61692		\$0.00	\$0.00	0	\$0.00
61697		\$6,996.79	\$6,996.79	0	\$0.00
61698		\$6,702.04	\$6,702.04	0	\$0.00
61700		\$6,968.13	\$6,968.13	0	\$0.00
61702		\$6,629.85	\$6,629.85	0	\$0.00
61703		\$2,485.43	\$2,485.43	0	\$0.00
61705		\$4,885.10	\$4,885.10	0	\$0.00
61708		\$4,088.92	\$4,088.92	0	\$0.00
61710		\$3,557.72	\$3,557.72	0	\$0.00
61711		\$5,004.37	\$5,004.37	0	\$0.00
61720		\$2,382.70	\$2,382.70	0	\$0.00
61735		\$2,892.60	\$2,892.60	0	\$0.00
61750		\$2,561.35	\$2,561.35	0	\$0.00
61751		\$2,518.70	\$2,518.70	0	\$0.00
61760		\$2,816.27	\$2,816.27	0	\$0.00
61770		\$2,970.62	\$2,970.62	0	\$0.00
61790		\$1,462.53	\$1,462.53	3	\$618.00
61791		\$2,090.45	\$2,090.45	3	\$618.00
61795		\$542.18	\$542.18	2	\$541.00
61796		\$0.00	\$0.00	0	\$0.00
61797		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
61798		\$0.00	\$0.00	0	\$0.00
61799		\$0.00	\$0.00	0	\$0.00
61800		\$0.00	\$0.00	0	\$0.00
61850		\$1,750.22	\$1,750.22	0	\$0.00
61860		\$2,908.05	\$2,908.05	0	\$0.00
61863		\$2,143.12	\$2,143.12	0	\$0.00
61864		\$608.26	\$608.26	0	\$0.00
61867		\$3,192.17	\$3,192.17	0	\$0.00
61868		\$1,010.74	\$1,010.74	0	\$0.00
61870		\$2,059.55	\$2,059.55	0	\$0.00
61875		\$2,042.86	\$2,042.86	0	\$0.00
61880		\$957.24	\$957.24	0	\$0.00
61885		\$971.23	\$971.23	2	\$541.00
61886		\$1,255.10	\$1,255.10	3	\$618.00
61888		\$783.69	\$783.69	1	\$402.00
62000		\$1,472.96	\$1,472.96	0	\$0.00
62005		\$2,138.37	\$2,138.37	0	\$0.00
62010		\$2,799.87	\$2,799.87	0	\$0.00
62100		\$3,056.23	\$3,056.23	0	\$0.00
62115		\$0.00	\$0.00	0	\$0.00
62116		\$0.00	\$0.00	0	\$0.00
62117		\$0.00	\$0.00	0	\$0.00
62120		\$0.00	\$0.00	0	\$0.00
62121		\$0.00	\$0.00	0	\$0.00
62140		\$1,920.67	\$1,920.67	0	\$0.00
62141		\$2,108.29	\$2,108.29	0	\$0.00
62142		\$1,562.97	\$1,562.97	0	\$0.00
62143		\$1,860.01	\$1,860.01	0	\$0.00
62145		\$2,639.85	\$2,639.85	0	\$0.00
62146		\$2,253.77	\$2,253.77	0	\$0.00
62147		\$2,695.79	\$2,695.79	0	\$0.00
62148		\$257.27	\$257.27	0	\$0.00
62160		\$366.18	\$366.18	0	\$0.00
62161		\$2,614.58	\$2,614.58	0	\$0.00
62162		\$3,374.28	\$3,374.28	0	\$0.00
62163		\$2,135.29	\$2,135.29	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
62164		\$3,638.91	\$3,638.91	0	\$0.00
62165		\$2,834.14	\$2,834.14	0	\$0.00
62180		\$2,965.33	\$2,965.33	0	\$0.00
62190		\$1,598.45	\$1,598.45	0	\$0.00
62192		\$1,756.96	\$1,756.96	0	\$0.00
62194		\$650.21	\$650.21	1	\$402.00
62200		\$2,586.37	\$2,586.37	0	\$0.00
62201		\$2,104.40	\$2,104.40	0	\$0.00
62220		\$1,849.32	\$1,849.32	0	\$0.00
62223		\$1,863.17	\$1,863.17	0	\$0.00
62225		\$832.78	\$832.78	1	\$402.00
62230		\$1,505.35	\$1,505.35	2	\$541.00
62252		\$183.66	\$183.66	0	\$0.00
62252	TC	\$82.92	\$82.92	0	\$0.00
62252	26	\$100.74	\$100.74	0	\$0.00
62256		\$993.49	\$993.49	0	\$0.00
62258		\$2,058.59	\$2,058.59	0	\$0.00
62263		\$1,425.98	\$697.94	1	\$402.00
62264		\$961.30	\$478.18	1	\$402.00
62267		\$507.55	\$344.04	0	\$0.00
62268		\$1,195.33	\$559.14	1	\$402.00
62269		\$1,338.18	\$568.32	1	\$402.00
62270		\$321.37	\$130.22	1	\$402.00
62272		\$391.75	\$164.75	1	\$402.00
62273		\$390.07	\$224.30	1	\$402.00
62280		\$464.44	\$286.51	1	\$402.00
62281		\$424.52	\$279.09	1	\$402.00
62282		\$523.43	\$254.05	1	\$402.00
62284		\$496.13	\$174.30	0	\$0.00
62287		\$1,106.13	\$1,106.13	9	\$1,578.00
62290		\$492.74	\$224.58	1	\$402.00
62291		\$432.31	\$210.85	1	\$402.00
62292		\$652.52	\$652.52	0	\$0.00
62294		\$917.29	\$917.29	3	\$618.00
62310		\$339.50	\$127.18	1	\$402.00
62311		\$323.72	\$104.66	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
62318		\$380.24	\$134.71	1	\$402.00
62319		\$337.00	\$123.72	1	\$402.00
62350		\$898.07	\$898.07	2	\$541.00
62351		\$1,478.15	\$1,478.15	0	\$0.00
62355		\$711.33	\$711.33	2	\$541.00
62360		\$432.17	\$432.17	2	\$541.00
62361		\$765.81	\$765.81	2	\$541.00
62362		\$961.11	\$961.11	2	\$541.00
62365		\$749.56	\$749.56	2	\$541.00
62367		BR	BR	0	\$0.00
62367	TC	BR	BR	0	\$0.00
62367	26	\$50.28	\$50.28	0	\$0.00
62368		BR	BR	0	\$0.00
62368	TC	BR	BR	0	\$0.00
62368	26	\$77.39	\$77.39	0	\$0.00
63001		\$2,227.54	\$2,227.54	8	\$1,187.00
63003		\$2,257.75	\$2,257.75	8	\$1,187.00
63005		\$2,149.59	\$2,149.59	8	\$1,187.00
63011		\$1,885.03	\$1,885.03	8	\$1,187.00
63012		\$2,207.47	\$2,207.47	8	\$1,187.00
63015		\$2,755.25	\$2,755.25	8	\$1,187.00
63016		\$2,715.43	\$2,715.43	8	\$1,187.00
63017		\$2,288.93	\$2,288.93	8	\$1,187.00
63020		\$2,146.84	\$2,146.84	8	\$1,187.00
63030		\$1,768.99	\$1,768.99	8	\$1,187.00
63035		\$416.84	\$416.84	8	\$1,187.00
63040		\$2,638.84	\$2,638.84	8	\$1,187.00
63042		\$2,497.02	\$2,497.02	8	\$1,187.00
63043		BR	BR	8	\$1,187.00
63044		BR	BR	8	\$1,187.00
63045		\$2,357.94	\$2,357.94	8	\$1,187.00
63046		\$2,260.76	\$2,260.76	8	\$1,187.00
63047		\$2,118.66	\$2,118.66	8	\$1,187.00
63048		\$432.94	\$432.94	8	\$1,187.00
63050		\$2,878.02	\$2,878.02	0	\$0.00
63051		\$3,275.81	\$3,275.81	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
63055		\$3,077.04	\$3,077.04	0	\$0.00
63056		\$2,835.30	\$2,835.30	0	\$0.00
63057		\$682.29	\$682.29	0	\$0.00
63064		\$3,436.96	\$3,436.96	0	\$0.00
63066		\$437.53	\$437.53	0	\$0.00
63075		\$2,764.19	\$2,764.19	0	\$0.00
63076		\$541.40	\$541.40	0	\$0.00
63077		\$2,941.57	\$2,941.57	0	\$0.00
63078		\$424.62	\$424.62	0	\$0.00
63081		\$3,335.52	\$3,335.52	0	\$0.00
63082		\$582.92	\$582.92	0	\$0.00
63085		\$3,686.10	\$3,686.10	0	\$0.00
63086		\$418.44	\$418.44	0	\$0.00
63087		\$4,768.46	\$4,768.46	0	\$0.00
63088		\$571.48	\$571.48	0	\$0.00
63090		\$3,785.03	\$3,785.03	0	\$0.00
63091		\$386.30	\$386.30	0	\$0.00
63101		\$4,380.99	\$4,380.99	0	\$0.00
63102		\$4,380.99	\$4,380.99	0	\$0.00
63103		\$512.94	\$512.94	0	\$0.00
63170		\$2,810.05	\$2,810.05	0	\$0.00
63172		\$2,510.39	\$2,510.39	0	\$0.00
63173		\$3,072.67	\$3,072.67	0	\$0.00
63180		\$2,618.60	\$2,618.60	0	\$0.00
63182		\$2,756.20	\$2,756.20	0	\$0.00
63185		\$1,984.55	\$1,984.55	0	\$0.00
63190		\$2,400.11	\$2,400.11	0	\$0.00
63191		\$2,493.63	\$2,493.63	0	\$0.00
63194		\$2,758.81	\$2,758.81	0	\$0.00
63195		\$2,627.16	\$2,627.16	0	\$0.00
63196		\$3,186.15	\$3,186.15	0	\$0.00
63197		\$2,982.89	\$2,982.89	0	\$0.00
63198		\$3,113.86	\$3,113.86	0	\$0.00
63199		\$3,756.71	\$3,756.71	0	\$0.00
63200		\$2,689.21	\$2,689.21	0	\$0.00
63250		\$5,382.43	\$5,382.43	0	\$0.00

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
63251		\$5,646.77	\$5,646.77	0	\$0.00
63252		\$5,598.45	\$5,598.45	0	\$0.00
63265		\$3,037.19	\$3,037.19	0	\$0.00
63266		\$3,142.42	\$3,142.42	0	\$0.00
63267		\$2,554.80	\$2,554.80	0	\$0.00
63268		\$2,518.70	\$2,518.70	0	\$0.00
63270		\$3,751.44	\$3,751.44	0	\$0.00
63271		\$3,782.80	\$3,782.80	0	\$0.00
63272		\$3,546.23	\$3,546.23	0	\$0.00
63273		\$3,440.37	\$3,440.37	0	\$0.00
63275		\$3,314.20	\$3,314.20	0	\$0.00
63276		\$3,283.42	\$3,283.42	0	\$0.00
63277		\$2,935.52	\$2,935.52	0	\$0.00
63278		\$2,903.20	\$2,903.20	0	\$0.00
63280		\$3,971.96	\$3,971.96	0	\$0.00
63281		\$3,925.84	\$3,925.84	0	\$0.00
63282		\$3,702.06	\$3,702.06	0	\$0.00
63283		\$3,524.32	\$3,524.32	0	\$0.00
63285		\$4,979.89	\$4,979.89	0	\$0.00
63286		\$4,925.84	\$4,925.84	0	\$0.00
63287		\$5,088.74	\$5,088.74	0	\$0.00
63290		\$5,167.63	\$5,167.63	0	\$0.00
63295		\$653.57	\$653.57	0	\$0.00
63300		\$3,420.04	\$3,420.04	0	\$0.00
63301		\$3,778.76	\$3,778.76	0	\$0.00
63302		\$3,838.96	\$3,838.96	0	\$0.00
63303		\$4,125.22	\$4,125.22	0	\$0.00
63304		\$4,099.68	\$4,099.68	0	\$0.00
63305		\$4,340.73	\$4,340.73	0	\$0.00
63306		\$4,066.78	\$4,066.78	0	\$0.00
63307		\$4,115.04	\$4,115.04	0	\$0.00
63308		\$697.63	\$697.63	0	\$0.00
63600		\$1,614.77	\$1,614.77	2	\$541.00
63610		\$4,928.04	\$892.11	1	\$402.00
63615		\$2,225.02	\$2,225.02	0	\$0.00
63620		\$0.00	\$0.00	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
63621		\$0.00	\$0.00	0	\$0.00
63650		\$814.39	\$814.39	2	\$541.00
63655		\$1,491.98	\$1,491.98	8	\$1,187.00
63660		\$814.97	\$814.97	1	\$402.00
63685		\$952.37	\$952.37	2	\$541.00
63688		\$754.94	\$754.94	1	\$402.00
63700		\$0.00	\$0.00	0	\$0.00
63702		\$0.00	\$0.00	0	\$0.00
63704		\$0.00	\$0.00	0	\$0.00
63706		\$0.00	\$0.00	0	\$0.00
63707		\$1,635.98	\$1,635.98	0	\$0.00
63709		\$2,048.68	\$2,048.68	0	\$0.00
63710		\$2,016.72	\$2,016.72	0	\$0.00
63740		\$1,638.98	\$1,638.98	0	\$0.00
63741		\$1,100.11	\$1,100.11	0	\$0.00
63744		\$1,167.79	\$1,167.79	3	\$618.00
63746		\$894.66	\$894.66	2	\$541.00
64400		\$157.09	\$76.69	0	\$0.00
64402		\$151.64	\$92.42	0	\$0.00
64405		\$145.56	\$90.20	0	\$0.00
64408		\$153.00	\$107.74	0	\$0.00
64410		\$203.58	\$96.22	1	\$402.00
64412		\$197.93	\$81.70	0	\$0.00
64413		\$168.38	\$97.13	0	\$0.00
64415		\$219.10	\$98.26	1	\$402.00
64416		\$214.96	\$214.95	0	\$0.00
64417		\$229.61	\$98.66	1	\$402.00
64418		\$200.91	\$88.25	0	\$0.00
64420		\$235.25	\$80.23	1	\$402.00
64421		\$352.45	\$112.69	1	\$402.00
64425		\$177.86	\$117.68	1	\$402.00
64430		\$0.00	\$0.00	0	\$0.00
64435		\$0.00	\$0.00	0	\$0.00
64445		\$211.40	\$97.78	0	\$0.00
64446		\$225.46	\$225.46	0	\$0.00
64447		\$105.40	\$105.04	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
64448		\$204.68	\$204.68	0	\$0.00
64449		\$202.27	\$202.47	0	\$0.00
64450		\$131.77	\$88.98	1	\$402.00
64455		\$68.49	\$55.25	0	\$0.00
64470		\$336.49	\$127.54	1	\$402.00
64472		\$164.28	\$85.33	1	\$402.00
64475		\$297.91	\$99.56	1	\$402.00
64476		\$140.91	\$64.36	1	\$402.00
64479		\$462.48	\$153.88	1	\$402.00
64480		\$199.51	\$105.63	1	\$402.00
64483		\$469.96	\$133.91	1	\$402.00
64484		\$208.17	\$89.74	1	\$402.00
64505		\$132.65	\$96.55	0	\$0.00
64508		\$204.30	\$84.42	0	\$0.00
64510		\$222.35	\$83.69	1	\$402.00
64517		\$249.64	\$159.61	2	\$541.00
64520		\$295.36	\$93.15	1	\$402.00
64530		\$277.59	\$108.12	1	\$402.00
64550		\$0.00	\$0.00	0	\$0.00
64553		\$401.88	\$335.43	1	\$402.00
64555		\$422.52	\$278.41	0	\$0.00
64560		\$399.82	\$299.01	0	\$0.00
64561		\$772.50	\$772.50	3	\$618.00
64565		\$397.55	\$239.99	0	\$0.00
64573		\$1,114.14	\$1,114.14	1	\$402.00
64575		\$577.39	\$577.39	1	\$402.00
64577		\$651.77	\$651.77	1	\$402.00
64580		\$608.35	\$608.35	1	\$402.00
64581		\$1,490.89	\$1,490.89	3	\$618.00
64585		\$1,060.62	\$317.65	1	\$402.00
64590		\$776.80	\$367.61	2	\$541.00
64595		\$968.21	\$268.55	1	\$402.00
64600		\$933.24	\$413.54	1	\$402.00
64605		\$1,137.65	\$641.10	1	\$402.00
64610		\$1,256.29	\$929.98	1	\$402.00
64612		\$359.43	\$241.45	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
64613		\$386.33	\$236.24	0	\$0.00
64614		\$424.48	\$263.94	0	\$0.00
64620		\$584.39	\$326.03	1	\$402.00
64622		\$532.65	\$220.68	1	\$402.00
64623		\$171.27	\$63.91	1	\$402.00
64626		\$503.99	\$268.56	1	\$402.00
64627		\$190.46	\$75.88	1	\$402.00
64630		\$293.37	\$222.60	2	\$541.00
64632		\$109.25	\$94.13	0	\$0.00
64640		\$352.46	\$226.80	0	\$0.00
64650		\$124.21	\$82.14	0	\$0.00
64653		\$143.68	\$103.83	0	\$0.00
64680		\$671.74	\$315.56	2	\$541.00
64681		\$947.49	\$448.69	0	\$0.00
64702		\$663.90	\$663.90	1	\$402.00
64704		\$656.27	\$656.27	1	\$402.00
64708		\$914.54	\$914.54	2	\$541.00
64712		\$1,032.33	\$1,032.33	2	\$541.00
64713		\$1,394.05	\$1,394.05	2	\$541.00
64714		\$1,186.32	\$1,186.32	8	\$1,187.00
64716		\$941.56	\$941.56	3	\$618.00
64718		\$988.87	\$988.87	2	\$541.00
64719		\$771.58	\$771.58	2	\$541.00
64721		\$762.11	\$762.11	2	\$541.00
64722		\$627.75	\$627.75	8	\$1,187.00
64726		\$586.20	\$586.20	1	\$402.00
64727		\$390.92	\$390.92	1	\$402.00
64732		\$679.99	\$679.99	2	\$541.00
64734		\$765.52	\$765.52	2	\$541.00
64736		\$727.57	\$727.57	2	\$541.00
64738		\$871.42	\$871.42	2	\$541.00
64740		\$806.58	\$806.58	2	\$541.00
64742		\$904.13	\$904.13	2	\$541.00
64744		\$784.14	\$784.14	2	\$541.00
64746		\$858.48	\$858.48	2	\$541.00
64752		\$943.19	\$943.19	0	\$0.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
64755		\$1,586.02	\$1,586.02	0	\$0.00
64760		\$854.04	\$854.04	0	\$0.00
64761		\$791.84	\$791.84	0	\$0.00
64763		\$1,004.58	\$1,004.58	0	\$0.00
64766		\$1,163.42	\$1,163.42	0	\$0.00
64771		\$1,114.02	\$1,114.02	2	\$541.00
64772		\$1,043.09	\$1,043.09	2	\$541.00
64774		\$744.25	\$744.25	2	\$541.00
64776		\$733.69	\$733.69	3	\$618.00
64778		\$390.17	\$390.17	2	\$541.00
64782		\$839.42	\$839.42	3	\$618.00
64783		\$473.16	\$473.16	2	\$541.00
64784		\$1,365.65	\$1,365.65	3	\$618.00
64786		\$2,146.86	\$2,146.86	3	\$618.00
64787		\$546.27	\$546.27	2	\$541.00
64788		\$669.74	\$669.74	3	\$618.00
64790		\$1,576.54	\$1,576.54	3	\$618.00
64792		\$1,997.88	\$1,997.88	3	\$618.00
64795		\$390.61	\$390.61	2	\$541.00
64802		\$1,177.51	\$1,177.51	2	\$541.00
64804		\$1,835.48	\$1,835.48	0	\$0.00
64809		\$1,584.61	\$1,584.61	0	\$0.00
64818		\$1,293.20	\$1,293.20	0	\$0.00
64820		\$1,450.45	\$1,450.45	0	\$0.00
64821		\$1,324.99	\$1,324.99	4	\$762.00
64822		\$1,319.76	\$1,319.76	0	\$0.00
64823		\$1,530.34	\$1,530.34	0	\$0.00
64831		\$1,370.28	\$1,370.28	4	\$762.00
64832		\$725.23	\$725.23	1	\$402.00
64834		\$1,437.25	\$1,437.25	2	\$541.00
64835		\$1,553.65	\$1,553.65	3	\$618.00
64836		\$1,547.59	\$1,547.59	3	\$618.00
64837		\$803.70	\$803.70	1	\$402.00
64840		\$1,716.58	\$1,716.58	2	\$541.00
64856		\$1,921.23	\$1,921.23	2	\$541.00
64857		\$2,013.34	\$2,013.34	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
64858		\$2,347.30	\$2,347.30	2	\$541.00
64859		\$543.02	\$543.02	1	\$402.00
64861		\$2,610.72	\$2,610.72	3	\$618.00
64862		\$2,640.58	\$2,640.58	3	\$618.00
64864		\$1,690.13	\$1,690.13	3	\$618.00
64865		\$2,053.89	\$2,053.89	4	\$762.00
64866		\$2,053.47	\$2,053.47	0	\$0.00
64868		\$1,889.28	\$1,889.28	0	\$0.00
64870		\$2,001.36	\$2,001.36	4	\$762.00
64872		\$258.31	\$258.31	2	\$541.00
64874		\$378.43	\$378.43	3	\$618.00
64876		\$395.61	\$395.61	3	\$618.00
64885		\$2,324.98	\$2,324.98	2	\$541.00
64886		\$2,733.09	\$2,733.09	2	\$541.00
64890		\$2,090.24	\$2,090.24	2	\$541.00
64891		\$1,958.48	\$1,958.48	2	\$541.00
64892		\$1,959.90	\$1,959.90	2	\$541.00
64893		\$2,120.23	\$2,120.23	2	\$541.00
64895		\$2,411.99	\$2,411.99	3	\$618.00
64896		\$2,594.31	\$2,594.31	3	\$618.00
64897		\$2,467.30	\$2,467.30	3	\$618.00
64898		\$2,656.25	\$2,656.25	3	\$618.00
64901		\$1,283.77	\$1,283.77	2	\$541.00
64902		\$1,471.78	\$1,471.78	2	\$541.00
64905		\$1,874.53	\$1,874.53	2	\$541.00
64907		\$2,569.78	\$2,569.78	1	\$402.00
64910		\$1,396.66	\$1,396.66	0	\$0.00
64911		\$1,701.12	\$1,701.12	0	\$0.00
64999		BR	BR	0	\$0.00
65091		\$1,259.45	\$1,259.45	3	\$618.00
65093		\$1,320.67	\$1,320.67	3	\$618.00
65101		\$1,376.48	\$1,376.48	3	\$618.00
65103		\$1,435.89	\$1,435.89	3	\$618.00
65105		\$1,560.12	\$1,560.12	4	\$762.00
65110		\$2,249.55	\$2,249.55	5	\$867.00
65112		\$2,634.92	\$2,634.92	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
65114		\$2,738.91	\$2,738.91	7	\$1,205.00
65125		\$951.96	\$480.05	0	\$0.00
65130		\$1,355.24	\$1,355.24	3	\$618.00
65135		\$1,382.77	\$1,382.77	2	\$541.00
65140		\$1,471.79	\$1,471.79	3	\$618.00
65150		\$1,209.45	\$1,209.45	2	\$541.00
65155		\$1,584.73	\$1,584.73	3	\$618.00
65175		\$1,239.41	\$1,239.41	1	\$402.00
65205		\$104.10	\$72.73	0	\$0.00
65210		\$123.96	\$91.11	0	\$0.00
65220		\$105.63	\$73.52	0	\$0.00
65222		\$132.47	\$95.88	0	\$0.00
65235		\$1,164.09	\$1,164.09	2	\$541.00
65260		\$1,753.31	\$1,753.31	3	\$618.00
65265		\$1,978.63	\$1,978.63	4	\$762.00
65270		\$443.58	\$324.86	2	\$541.00
65272		\$748.33	\$705.02	2	\$541.00
65273		\$780.09	\$780.09	0	\$0.00
65275		\$868.07	\$868.07	4	\$762.00
65280		\$1,239.82	\$1,239.82	4	\$762.00
65285		\$1,983.46	\$1,983.46	4	\$762.00
65286		\$1,082.83	\$1,014.88	0	\$0.00
65290		\$933.25	\$933.25	3	\$618.00
65400		\$1,144.56	\$1,057.19	1	\$402.00
65410		\$248.63	\$167.99	2	\$541.00
65420		\$907.12	\$847.38	2	\$541.00
65426		\$990.81	\$919.88	5	\$867.00
65430		\$492.81	\$168.74	0	\$0.00
65435		\$175.00	\$104.81	0	\$0.00
65436		\$782.49	\$735.45	0	\$0.00
65450		\$809.08	\$743.37	0	\$0.00
65600		\$702.77	\$512.36	0	\$0.00
65710		\$1,935.21	\$1,935.21	7	\$1,205.00
65730		\$2,053.20	\$2,053.20	7	\$1,205.00
65750		\$2,226.84	\$2,226.84	7	\$1,205.00
65755		\$2,212.29	\$2,212.29	7	\$1,205.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
65756		\$2,128.70	\$2,128.70	0	\$0.00
65757		\$0.00	\$0.00	0	\$0.00
65760		\$2,673.54	\$2,673.54	0	\$0.00
65765		\$3,101.39	\$3,101.39	0	\$0.00
65767		\$2,887.13	\$2,887.13	0	\$0.00
65770		\$2,508.48	\$2,508.48	7	\$1,205.00
65771		\$1,571.83	\$1,571.83	0	\$0.00
65772		\$888.87	\$836.60	4	\$762.00
65775		\$1,024.84	\$1,024.84	4	\$762.00
65780		\$1,572.82	\$1,572.82	0	\$0.00
65781		\$2,404.20	\$2,404.20	0	\$0.00
65782		\$2,072.36	\$2,072.36	0	\$0.00
65800		\$327.13	\$244.99	1	\$402.00
65805		\$327.13	\$244.99	1	\$402.00
65810		\$1,002.91	\$1,002.91	3	\$618.00
65815		\$1,042.39	\$975.18	2	\$541.00
65820		\$1,463.23	\$1,463.23	1	\$402.00
65850		\$1,563.56	\$1,563.56	4	\$762.00
65855		\$707.38	\$620.02	0	\$0.00
65860		\$583.08	\$533.79	0	\$0.00
65865		\$945.03	\$945.03	1	\$402.00
65870		\$1,047.44	\$1,047.44	4	\$762.00
65875		\$1,092.45	\$1,092.45	4	\$762.00
65880		\$1,156.41	\$1,156.41	4	\$762.00
65900		\$1,757.75	\$1,757.75	5	\$867.00
65920		\$1,340.25	\$1,340.25	7	\$1,205.00
65930		\$1,189.01	\$1,189.01	5	\$867.00
66020		\$308.81	\$249.07	1	\$402.00
66030		\$268.01	\$209.02	1	\$402.00
66130		\$1,190.66	\$1,148.10	7	\$1,205.00
66150		\$1,417.56	\$1,417.56	4	\$762.00
66155		\$1,413.01	\$1,413.01	4	\$762.00
66160		\$1,631.78	\$1,631.78	2	\$541.00
66165		\$1,381.40	\$1,381.40	4	\$762.00
66170		\$1,927.07	\$1,927.07	4	\$762.00
66172		\$2,362.13	\$2,362.13	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
66180		\$2,054.26	\$2,054.26	5	\$867.00
66185		\$1,279.58	\$1,279.58	2	\$541.00
66220		\$1,292.51	\$1,292.51	3	\$618.00
66225		\$1,602.81	\$1,602.81	4	\$762.00
66250		\$1,064.36	\$977.00	2	\$541.00
66500		\$686.70	\$686.70	1	\$402.00
66505		\$738.80	\$738.80	1	\$402.00
66600		\$1,377.09	\$1,377.09	3	\$618.00
66605		\$1,898.92	\$1,898.92	3	\$618.00
66625		\$946.34	\$891.08	3	\$618.00
66630		\$1,060.49	\$1,060.49	3	\$618.00
66635		\$1,008.54	\$1,008.54	3	\$618.00
66680		\$897.41	\$897.41	3	\$618.00
66682		\$1,064.40	\$1,064.40	2	\$541.00
66700		\$792.03	\$694.21	2	\$541.00
66710		\$781.56	\$677.77	2	\$541.00
66711		\$1,025.27	\$1,025.27	2	\$541.00
66720		\$818.91	\$735.28	2	\$541.00
66740		\$793.50	\$706.14	2	\$541.00
66761		\$749.94	\$650.63	0	\$0.00
66762		\$797.29	\$691.26	0	\$0.00
66770		\$877.07	\$777.01	0	\$0.00
66820		\$853.11	\$853.11	0	\$0.00
66821		\$491.48	\$484.76	2	\$541.00
66825		\$1,428.48	\$1,428.48	4	\$762.00
66830		\$1,199.89	\$1,199.89	4	\$762.00
66840		\$1,170.49	\$1,170.49	4	\$762.00
66850		\$1,325.61	\$1,325.61	7	\$1,205.00
66852		\$1,429.44	\$1,429.44	4	\$762.00
66920		\$1,281.41	\$1,281.41	4	\$762.00
66930		\$1,473.52	\$1,473.52	5	\$867.00
66940		\$1,330.94	\$1,330.94	5	\$867.00
66982		\$1,848.23	\$1,848.23	8	\$1,187.00
66983		\$1,200.51	\$1,200.51	8	\$1,187.00
66984		\$1,407.24	\$1,407.24	8	\$1,187.00
66985		\$1,245.39	\$1,245.39	6	\$1,008.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
66986		\$1,694.53	\$1,694.53	6	\$1,008.00
66990		\$174.10	\$174.10	0	\$0.00
66999		BR	BR	0	\$0.00
67005		\$793.79	\$793.79	4	\$762.00
67010		\$930.11	\$930.11	4	\$762.00
67015		\$1,145.33	\$1,145.33	1	\$402.00
67025		\$1,629.66	\$1,121.90	1	\$402.00
67027		\$1,849.31	\$1,549.14	4	\$762.00
67028		\$696.69	\$291.97	0	\$0.00
67030		\$907.23	\$907.23	1	\$402.00
67031		\$655.94	\$607.41	2	\$541.00
67036		\$1,672.21	\$1,672.21	4	\$762.00
67039		\$2,126.58	\$2,126.58	7	\$1,205.00
67040		\$2,459.52	\$2,459.52	7	\$1,205.00
67041		\$2,327.61	\$2,327.61	9	\$1,578.00
67042		\$2,667.76	\$2,667.76	9	\$1,578.00
67043		\$2,798.05	\$2,798.05	9	\$1,578.00
67101		\$1,355.09	\$1,224.42	0	\$0.00
67105		\$1,206.08	\$1,073.17	0	\$0.00
67107		\$2,174.03	\$2,174.03	5	\$867.00
67108		\$2,977.76	\$2,977.76	7	\$1,205.00
67110		\$1,877.10	\$1,413.40	0	\$0.00
67112		\$2,472.37	\$2,472.37	7	\$1,205.00
67113		\$2,800.71	\$2,800.71	9	\$1,578.00
67115		\$939.86	\$939.86	2	\$541.00
67120		\$1,414.57	\$1,009.85	2	\$541.00
67121		\$1,709.71	\$1,709.71	2	\$541.00
67141		\$968.98	\$912.23	2	\$541.00
67145		\$870.28	\$809.05	0	\$0.00
67208		\$992.97	\$950.40	0	\$0.00
67210		\$1,188.68	\$1,154.33	0	\$0.00
67218		\$2,554.78	\$2,554.78	5	\$867.00
67220		\$1,808.79	\$1,734.11	0	\$0.00
67221		\$680.29	\$463.00	0	\$0.00
67225		\$56.94	\$53.92	0	\$0.00
67227		\$1,016.44	\$941.03	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
67228		\$1,852.96	\$1,670.76	0	\$0.00
67229		\$2,016.67	\$2,016.67	0	\$0.00
67250		\$1,488.31	\$1,488.31	3	\$618.00
67255		\$1,550.36	\$1,550.36	3	\$618.00
67299		BR	BR	0	\$0.00
67311		\$1,025.66	\$1,025.66	3	\$618.00
67312		\$1,265.36	\$1,265.36	4	\$762.00
67314		\$1,160.19	\$1,160.19	4	\$762.00
67316		\$1,407.47	\$1,407.47	4	\$762.00
67318		\$1,215.11	\$1,215.11	4	\$762.00
67320		\$499.98	\$499.98	4	\$762.00
67331		\$475.14	\$475.14	4	\$762.00
67332		\$518.45	\$518.45	4	\$762.00
67334		\$459.91	\$459.91	4	\$762.00
67335		\$288.12	\$288.12	4	\$762.00
67340		\$568.54	\$568.54	4	\$762.00
67343		\$1,152.13	\$1,152.13	7	\$1,205.00
67345		\$572.04	\$345.79	0	\$0.00
67346		\$362.93	\$362.93	2	\$541.00
67399		BR	BR	0	\$0.00
67400		\$1,741.67	\$1,741.67	3	\$618.00
67405		\$1,485.77	\$1,485.77	4	\$762.00
67412		\$1,754.19	\$1,754.19	5	\$867.00
67413		\$1,732.05	\$1,732.05	5	\$867.00
67414		\$1,967.57	\$1,967.57	0	\$0.00
67415		\$202.67	\$202.67	1	\$402.00
67420		\$3,052.11	\$3,052.11	5	\$867.00
67430		\$2,326.63	\$2,326.63	5	\$867.00
67440		\$2,238.91	\$2,238.91	5	\$867.00
67445		\$2,361.59	\$2,361.59	5	\$867.00
67450		\$2,294.79	\$2,294.79	5	\$867.00
67500		\$127.54	\$79.75	0	\$0.00
67505		\$136.60	\$83.59	0	\$0.00
67515		\$111.18	\$70.11	0	\$0.00
67550		\$1,763.47	\$1,763.47	4	\$762.00
67560		\$1,794.70	\$1,794.70	2	\$541.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
67570		\$2,266.95	\$2,266.95	4	\$762.00
67599		BR	BR	0	\$0.00
67700		\$474.47	\$157.87	0	\$0.00
67710		\$459.10	\$123.08	0	\$0.00
67715		\$444.13	\$146.19	1	\$402.00
67800		\$300.59	\$163.94	0	\$0.00
67801		\$557.01	\$223.23	0	\$0.00
67805		\$595.55	\$261.77	0	\$0.00
67808		\$705.71	\$705.71	2	\$541.00
67810		\$395.77	\$171.01	0	\$0.00
67820		\$156.23	\$100.97	0	\$0.00
67825		\$231.89	\$193.06	0	\$0.00
67830		\$701.96	\$285.29	2	\$541.00
67835		\$829.15	\$829.15	2	\$541.00
67840		\$568.02	\$240.97	0	\$0.00
67850		\$594.40	\$280.78	0	\$0.00
67875		\$640.98	\$157.12	0	\$0.00
67880		\$1,037.98	\$634.76	3	\$618.00
67882		\$1,244.08	\$828.17	3	\$618.00
67900		\$0.00	\$0.00	4	\$762.00
67901		\$1,053.77	\$1,053.77	5	\$867.00
67902		\$1,065.98	\$1,065.98	5	\$867.00
67903		\$1,381.14	\$1,035.42	4	\$762.00
67904		\$1,451.40	\$1,050.42	4	\$762.00
67906		\$1,252.73	\$1,019.01	5	\$867.00
67908		\$1,083.73	\$845.53	4	\$762.00
67909		\$1,149.75	\$901.09	4	\$762.00
67911		\$886.42	\$886.42	3	\$618.00
67912		\$2,000.43	\$860.96	3	\$618.00
67914		\$1,002.47	\$598.50	3	\$618.00
67915		\$855.81	\$454.08	0	\$0.00
67916		\$1,321.10	\$861.88	4	\$762.00
67917		\$1,223.59	\$954.77	4	\$762.00
67921		\$964.12	\$560.15	3	\$618.00
67922		\$842.70	\$512.66	0	\$0.00
67923		\$1,335.83	\$924.40	4	\$762.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
67924		\$1,158.53	\$898.68	4	\$762.00
67930		\$929.06	\$518.38	0	\$0.00
67935		\$1,366.96	\$958.51	2	\$541.00
67938		\$546.83	\$151.08	0	\$0.00
67950		\$1,102.78	\$975.84	2	\$541.00
67961		\$1,232.91	\$896.15	3	\$618.00
67966		\$1,169.65	\$968.78	3	\$618.00
67971		\$1,346.73	\$1,346.73	3	\$618.00
67973		\$1,751.31	\$1,751.31	3	\$618.00
67974		\$1,737.66	\$1,737.66	3	\$618.00
67975		\$1,268.98	\$1,268.98	3	\$618.00
67999		BR	BR	0	\$0.00
68020		\$540.99	\$162.42	0	\$0.00
68040		\$432.39	\$98.61	0	\$0.00
68100		\$488.66	\$156.37	0	\$0.00
68110		\$600.65	\$249.70	0	\$0.00
68115		\$612.48	\$277.96	2	\$541.00
68130		\$1,012.83	\$723.85	2	\$541.00
68135		\$550.86	\$217.09	0	\$0.00
68200		\$94.33	\$57.00	0	\$0.00
68320		\$931.51	\$844.89	4	\$762.00
68325		\$1,081.97	\$1,081.97	4	\$762.00
68326		\$1,056.60	\$1,056.60	4	\$762.00
68328		\$1,200.75	\$1,200.75	4	\$762.00
68330		\$939.30	\$848.95	4	\$762.00
68335		\$1,098.54	\$1,098.54	4	\$762.00
68340		\$1,154.28	\$697.29	4	\$762.00
68360		\$854.05	\$776.39	2	\$541.00
68362		\$1,179.70	\$1,179.70	2	\$541.00
68371		\$743.86	\$743.86	2	\$541.00
68399		BR	BR	0	\$0.00
68400		\$711.63	\$291.23	0	\$0.00
68420		\$786.25	\$363.62	0	\$0.00
68440		\$449.11	\$113.84	0	\$0.00
68500		\$1,678.47	\$1,678.47	3	\$618.00
68505		\$1,744.58	\$1,744.58	3	\$618.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
68510		\$1,010.22	\$533.08	1	\$402.00
68520		\$1,200.54	\$1,200.54	3	\$618.00
68525		\$513.02	\$513.02	1	\$402.00
68530		\$1,012.10	\$514.05	0	\$0.00
68540		\$1,603.52	\$1,603.52	3	\$618.00
68550		\$1,976.79	\$1,976.79	3	\$618.00
68700		\$1,086.72	\$1,086.72	2	\$541.00
68705		\$579.29	\$243.28	0	\$0.00
68720		\$1,355.01	\$1,355.01	4	\$762.00
68745		\$1,326.98	\$1,326.98	4	\$762.00
68750		\$1,361.39	\$1,361.39	4	\$762.00
68760		\$442.21	\$233.88	0	\$0.00
68761		\$369.22	\$184.78	0	\$0.00
68770		\$1,534.00	\$1,082.99	4	\$762.00
68801		\$146.69	\$122.05	0	\$0.00
68810		\$330.08	\$224.80	1	\$402.00
68811		\$369.02	\$369.02	2	\$541.00
68815		\$877.55	\$463.88	2	\$541.00
68816		\$1,185.74	\$433.93	1	\$402.00
68840		\$225.45	\$173.93	0	\$0.00
68850		\$1,296.15	\$87.98	0	\$0.00
68899		BR	BR	0	\$0.00
69000		\$346.47	\$228.49	0	\$0.00
69005		\$402.66	\$318.28	0	\$0.00
69020		\$421.27	\$279.39	0	\$0.00
69090		\$0.00	\$0.00	0	\$0.00
69100		\$198.55	\$96.99	0	\$0.00
69105		\$245.76	\$129.28	0	\$0.00
69110		\$596.35	\$517.95	1	\$402.00
69120		\$642.68	\$642.68	2	\$541.00
69140		\$1,174.97	\$1,174.97	2	\$541.00
69145		\$490.36	\$416.44	2	\$541.00
69150		\$1,887.92	\$1,887.92	3	\$618.00
69155		\$2,846.29	\$2,846.29	0	\$0.00
69200		\$240.99	\$109.57	0	\$0.00
69205		\$203.71	\$203.71	1	\$402.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
69210		\$99.29	\$69.42	0	\$0.00
69220		\$244.95	\$125.48	0	\$0.00
69222		\$403.05	\$270.88	0	\$0.00
69300		\$0.00	\$0.00	0	\$0.00
69310		\$1,540.64	\$1,540.64	3	\$618.00
69320		\$0.00	\$0.00	0	\$0.00
69399		BR	BR	0	\$0.00
69400		\$246.44	\$121.00	0	\$0.00
69401		\$150.88	\$101.60	0	\$0.00
69405		\$484.42	\$394.07	0	\$0.00
69420		\$344.56	\$231.81	0	\$0.00
69421		\$304.21	\$304.21	3	\$618.00
69424		\$233.07	\$123.31	0	\$0.00
69433		\$361.67	\$253.40	0	\$0.00
69436		\$332.66	\$332.66	3	\$618.00
69440		\$1,110.84	\$1,110.84	3	\$618.00
69450		\$847.48	\$847.48	1	\$402.00
69501		\$1,296.98	\$1,296.98	7	\$1,205.00
69502		\$1,739.74	\$1,739.74	7	\$1,205.00
69505		\$1,812.18	\$1,812.18	7	\$1,205.00
69511		\$1,881.28	\$1,881.28	7	\$1,205.00
69530		\$2,593.14	\$2,593.14	7	\$1,205.00
69535		\$4,731.88	\$4,731.88	0	\$0.00
69540		\$379.19	\$247.02	0	\$0.00
69550		\$1,554.10	\$1,554.10	5	\$867.00
69552		\$2,612.09	\$2,612.09	7	\$1,205.00
69554		\$4,364.82	\$4,364.82	0	\$0.00
69601		\$1,867.52	\$1,867.52	7	\$1,205.00
69602		\$1,891.91	\$1,891.91	7	\$1,205.00
69603		\$1,948.82	\$1,948.82	7	\$1,205.00
69604		\$1,945.03	\$1,945.03	7	\$1,205.00
69605		\$2,521.21	\$2,521.21	7	\$1,205.00
69610		\$779.12	\$618.58	0	\$0.00
69620		\$956.89	\$834.43	2	\$541.00
69631		\$1,422.25	\$1,422.25	5	\$867.00
69632		\$1,806.81	\$1,806.81	5	\$867.00

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2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
69633		\$1,726.03	\$1,726.03	5	\$867.00
69635		\$1,824.42	\$1,824.42	7	\$1,205.00
69636		\$2,121.12	\$2,121.12	7	\$1,205.00
69637		\$2,107.28	\$2,107.28	7	\$1,205.00
69641		\$1,785.01	\$1,785.01	7	\$1,205.00
69642		\$2,330.06	\$2,330.06	7	\$1,205.00
69643		\$2,130.44	\$2,130.44	7	\$1,205.00
69644		\$2,338.02	\$2,338.02	7	\$1,205.00
69645		\$2,262.75	\$2,262.75	7	\$1,205.00
69646		\$2,466.41	\$2,466.41	7	\$1,205.00
69650		\$1,371.50	\$1,371.50	7	\$1,205.00
69660		\$1,651.41	\$1,651.41	5	\$867.00
69661		\$2,159.59	\$2,159.59	5	\$867.00
69662		\$2,112.94	\$2,112.94	5	\$867.00
69666		\$1,383.76	\$1,383.76	4	\$762.00
69667		\$1,386.86	\$1,386.86	4	\$762.00
69670		\$1,617.05	\$1,617.05	3	\$618.00
69676		\$1,377.04	\$1,377.04	3	\$618.00
69700		\$1,132.55	\$1,132.55	3	\$618.00
69710		BR	BR	0	\$0.00
69711		\$1,476.37	\$1,476.37	1	\$402.00
69714		\$1,927.12	\$1,927.12	9	\$1,578.00
69715		\$2,472.67	\$2,472.67	9	\$1,578.00
69717		\$1,984.40	\$1,984.40	9	\$1,578.00
69718		\$2,487.00	\$2,487.00	9	\$1,578.00
69720		\$2,022.56	\$2,022.56	5	\$867.00
69725		\$3,405.59	\$3,405.59	5	\$867.00
69740		\$2,124.57	\$2,124.57	5	\$867.00
69745		\$2,244.03	\$2,244.03	5	\$867.00
69799		BR	BR	0	\$0.00
69801		\$1,233.87	\$1,233.87	5	\$867.00
69802		\$1,825.23	\$1,825.23	7	\$1,205.00
69805		\$1,919.68	\$1,919.68	7	\$1,205.00
69806		\$1,729.92	\$1,729.92	7	\$1,205.00
69820		\$1,454.46	\$1,454.46	5	\$867.00
69840		\$1,377.23	\$1,377.23	5	\$867.00

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
69905		\$1,558.89	\$1,558.89	7	\$1,205.00
69910		\$1,877.89	\$1,877.89	7	\$1,205.00
69915		\$2,859.06	\$2,859.06	7	\$1,205.00
69930		<del>\$2,307.59</del>	<del>\$2,307.59</del>	7	<del>\$1,205.00</del>
69949		BR	BR	0	\$0.00
69950		\$3,468.66	\$3,468.66	0	\$0.00
69955		\$3,601.25	\$3,601.25	0	\$0.00
69960		\$3,611.38	\$3,611.38	0	\$0.00
69970		\$3,932.18	\$3,932.18	0	\$0.00
69979		BR	BR	0	\$0.00
69990		\$456.77	\$456.77	0	\$0.00
70010		\$323.57	\$323.57		
70010	TC	\$234.96	\$234.96		
70010	26	\$88.61	\$88.61		
70015		\$161.91	\$161.91		
70015	TC	\$73.83	\$73.83		
70015	26	\$88.08	\$88.08		
70030		\$35.75	\$35.75		
70030	TC	\$22.87	\$22.87		
70030	26	\$12.88	\$12.88		
70100		\$41.49	\$41.49		
70100	TC	\$28.06	\$28.06		
70100	26	\$13.43	\$13.43		
70110		\$52.59	\$52.59		
70110	TC	\$34.32	\$34.32		
70110	26	\$18.27	\$18.27		
70120		\$47.75	\$47.75		
70120	TC	\$34.32	\$34.32		
70120	26	\$13.43	\$13.43		
70130		\$67.36	\$67.36		
70130	TC	\$42.64	\$42.64		
70130	26	\$24.72	\$24.72		
70134		\$64.76	\$64.76		
70134	TC	\$40.04	\$40.04		
70134	26	\$24.72	\$24.72		
70140		\$48.29	\$48.29		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
70140	TC	\$34.32	\$34.32		
70140	26	\$13.97	\$13.97		
70150		\$61.97	\$61.97		
70150	TC	\$42.64	\$42.64		
70150	26	\$19.33	\$19.33		
70160		\$40.95	\$40.95		
70160	TC	\$28.06	\$28.06		
70160	26	\$12.88	\$12.88		
70170		\$74.02	\$74.02		
70170	TC	\$52.00	\$52.00		
70170	26	\$22.03	\$22.03		
70190		\$49.90	\$49.90		
70190	TC	\$34.32	\$34.32		
70190	26	\$15.58	\$15.58		
70200		\$63.06	\$63.06		
70200	TC	\$42.64	\$42.64		
70200	26	\$20.42	\$20.42		
70210		\$47.20	\$47.20		
70210	TC	\$34.32	\$34.32		
70210	26	\$12.88	\$12.88		
70220		\$60.91	\$60.91		
70220	TC	\$42.64	\$42.64		
70220	26	\$18.27	\$18.27		
70240		\$36.84	\$36.84		
70240	TC	\$22.87	\$22.87		
70240	26	\$13.97	\$13.97		
70250		\$52.04	\$52.04		
70250	TC	\$34.32	\$34.32		
70250	26	\$17.73	\$17.73		
70260		\$73.60	\$73.60		
70260	TC	\$48.88	\$48.88		
70260	26	\$24.72	\$24.72		
70300		\$23.12	\$23.12		
70300	TC	\$14.56	\$14.56		
70300	26	\$8.56	\$8.56		
70310		\$36.25	\$36.25		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
70310	TC	\$22.87	\$22.87		
70310	26	\$13.38	\$13.38		
70320		\$59.28	\$59.28		
70320	TC	\$42.64	\$42.64		
70320	26	\$16.64	\$16.64		
70328		\$39.93	\$39.93		
70328	TC	\$26.50	\$26.50		
70328	26	\$13.43	\$13.43		
70330		\$63.48	\$63.48		
70330	TC	\$45.75	\$45.75		
70330	26	\$17.73	\$17.73		
70332		\$155.17	\$155.17		
70332	TC	\$114.38	\$114.38		
70332	26	\$40.79	\$40.79		
70336		\$718.30	\$718.30		
70336	TC	\$608.21	\$608.21		
70336	26	\$110.09	\$110.09		
70350		\$34.20	\$34.20		
70350	TC	\$20.79	\$20.79		
70350	26	\$13.40	\$13.40		
70355		\$47.28	\$47.28		
70355	TC	\$31.72	\$31.72		
70355	26	\$15.55	\$15.55		
70360		\$35.75	\$35.75		
70360	TC	\$22.87	\$22.87		
70360	26	\$12.88	\$12.88		
70370		\$94.33	\$94.33		
70370	TC	\$70.70	\$70.70		
70370	26	\$23.63	\$23.63		
70371		\$177.22	\$177.22		
70371	TC	\$114.38	\$114.38		
70371	26	\$62.84	\$62.84		
70373		\$130.51	\$130.51		
70373	TC	\$97.75	\$97.75		
70373	26	\$32.76	\$32.76		
70380		\$49.28	\$49.28		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
70380	TC	\$36.39	\$36.39		
70380	26	\$12.88	\$12.88		
70390		\$126.21	\$126.21		
70390	TC	\$97.75	\$97.75		
70390	26	\$28.46	\$28.46		
70450		\$319.15	\$319.15		
70450	TC	\$255.76	\$255.76		
70450	26	\$63.39	\$63.39		
70460		\$391.01	\$391.01		
70460	TC	\$307.23	\$307.23		
70460	26	\$83.78	\$83.78		
70470		\$477.64	\$477.64		
70470	TC	\$383.64	\$383.64		
70470	26	\$94.00	\$94.00		
70480		\$350.82	\$350.82		
70480	TC	\$255.76	\$255.76		
70480	26	\$95.06	\$95.06		
70481		\$409.28	\$409.28		
70481	TC	\$307.23	\$307.23		
70481	26	\$102.05	\$102.05		
70482		\$491.05	\$491.05		
70482	TC	\$383.64	\$383.64		
70482	26	\$107.41	\$107.41		
70486		\$340.09	\$340.09		
70486	TC	\$255.76	\$255.76		
70486	26	\$84.32	\$84.32		
70487		\$403.89	\$403.89		
70487	TC	\$307.23	\$307.23		
70487	26	\$96.67	\$96.67		
70488		\$488.38	\$488.38		
70488	TC	\$383.64	\$383.64		
70488	26	\$104.74	\$104.74		
70490		\$350.82	\$350.82		
70490	TC	\$255.76	\$255.76		
70490	26	\$95.06	\$95.06		
70491		\$409.28	\$409.28		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
70491	TC	\$307.23	\$307.23		
70491	26	\$102.05	\$102.05		
70492		\$490.53	\$490.53		
70492	TC	\$383.64	\$383.64		
70492	26	\$106.89	\$106.89		
70496		\$707.03	\$707.03		
70496	TC	\$577.05	\$577.05		
70496	26	\$129.98	\$129.98		
70498		\$707.55	\$707.55		
70498	TC	\$577.05	\$577.05		
70498	26	\$130.50	\$130.50		
70540		\$695.88	\$695.88		
70540	TC	\$597.04	\$597.04		
70540	26	\$98.84	\$98.84		
70542		\$836.33	\$836.33		
70542	TC	\$717.09	\$717.09		
70542	26	\$119.23	\$119.23		
70543		\$1,483.47	\$1,483.47		
70543	TC	\$1,326.06	\$1,326.06		
70543	26	\$157.41	\$157.41		
70544		\$696.83	\$696.83		
70544	TC	\$608.21	\$608.21		
70544	26	\$88.62	\$88.62		
70545		\$696.83	\$696.83		
70545	TC	\$608.21	\$608.21		
70545	26	\$88.62	\$88.62		
70546		\$1,319.30	\$1,319.30		
70546	TC	\$1,185.04	\$1,185.04		
70546	26	\$134.26	\$134.26		
70547		\$696.83	\$696.83		
70547	TC	\$608.21	\$608.21		
70547	26	\$88.62	\$88.62		
70548		\$696.83	\$696.83		
70548	TC	\$608.21	\$608.21		
70548	26	\$88.62	\$88.62		
70549		\$1,319.30	\$1,319.30		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
70549	TC	\$1,185.04	\$1,185.04		
70549	26	\$134.26	\$134.26		
70551		\$718.30	\$718.30		
70551	TC	\$608.21	\$608.21		
70551	26	\$110.09	\$110.09		
70552		\$862.49	\$862.49		
70552	TC	\$729.32	\$729.32		
70552	26	\$133.17	\$133.17		
70553		\$1,525.64	\$1,525.64		
70553	TC	\$1,351.06	\$1,351.06		
70553	26	\$174.58	\$174.58		
70554		\$856.68	\$856.68		
70554	TC	\$705.46	\$705.46		
70554	26	\$151.22	\$151.22		
70555		\$0.00	\$0.00		
70555	TC	\$0.00	\$0.00		
70555	26	\$181.38	\$181.38		
70557		BR	BR		
70557	TC	BR	BR		
70557	26	\$212.15	\$212.15		
70558		BR	BR		
70558	TC	BR	BR		
70558	26	\$234.71	\$234.71		
70559		BR	BR		
70559	TC	BR	BR		
70559	26	\$235.78	\$235.78		
71010		\$38.89	\$38.89		
71010	TC	\$25.47	\$25.47		
71010	26	\$13.43	\$13.43		
71015		\$43.64	\$43.64		
71015	TC	\$28.06	\$28.06		
71015	26	\$15.58	\$15.58		
71020		\$50.44	\$50.44		
71020	TC	\$34.32	\$34.32		
71020	26	\$16.12	\$16.12		
71021		\$59.92	\$59.92		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
71021	TC	\$40.04	\$40.04		
71021	26	\$19.88	\$19.88		
71022		\$63.14	\$63.14		
71022	TC	\$40.04	\$40.04		
71022	26	\$23.10	\$23.10		
71023		\$71.10	\$71.10		
71023	TC	\$42.64	\$42.64		
71023	26	\$28.46	\$28.46		
71030		\$65.21	\$65.21		
71030	TC	\$42.64	\$42.64		
71030	26	\$22.57	\$22.57		
71034		\$112.87	\$112.87		
71034	TC	\$78.50	\$78.50		
71034	26	\$34.37	\$34.37		
71035		\$41.49	\$41.49		
71035	TC	\$28.06	\$28.06		
71035	26	\$13.43	\$13.43		
71040		\$123.05	\$123.05		
71040	TC	\$79.54	\$79.54		
71040	26	\$43.51	\$43.51		
71060		\$175.42	\$175.42		
71060	TC	\$120.10	\$120.10		
71060	26	\$55.32	\$55.32		
71090		\$133.87	\$133.87		
71090	TC	\$92.56	\$92.56		
71090	26	\$41.31	\$41.31		
71100		\$47.84	\$47.84		
71100	TC	\$31.72	\$31.72		
71100	26	\$16.12	\$16.12		
71101		\$56.27	\$56.27		
71101	TC	\$36.39	\$36.39		
71101	26	\$19.88	\$19.88		
71110		\$62.51	\$62.51		
71110	TC	\$42.64	\$42.64		
71110	26	\$19.88	\$19.88		
71111		\$72.51	\$72.51		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
71111	TC	\$48.88	\$48.88		
71111	26	\$23.63	\$23.63		
71120		\$50.39	\$50.39		
71120	TC	\$35.36	\$35.36		
71120	26	\$15.03	\$15.03		
71130		\$54.59	\$54.59		
71130	TC	\$38.47	\$38.47		
71130	26	\$16.12	\$16.12		
71250		\$406.15	\$406.15		
71250	TC	\$320.22	\$320.22		
71250	26	\$85.93	\$85.93		
71260		\$474.95	\$474.95		
71260	TC	\$383.64	\$383.64		
71260	26	\$91.32	\$91.32		
71270		\$581.86	\$581.86		
71270	TC	\$479.80	\$479.80		
71270	26	\$102.05	\$102.05		
71275		\$798.53	\$798.53		
71275	TC	\$657.79	\$657.79		
71275	26	\$140.74	\$140.74		
71550		\$707.13	\$707.13		
71550	TC	\$600.23	\$600.23		
71550	26	\$106.89	\$106.89		
71551		\$847.05	\$847.05		
71551	TC	\$719.75	\$719.75		
71551	26	\$127.30	\$127.30		
71552		\$1,483.54	\$1,483.54		
71552	TC	\$1,317.02	\$1,317.02		
71552	26	\$166.52	\$166.52		
71555		\$743.01	\$743.01		
71555	TC	\$608.21	\$608.21		
71555	26	\$134.80	\$134.80		
72010		\$90.00	\$90.00		
72010	TC	\$55.63	\$55.63		
72010	26	\$34.37	\$34.37		
72020		\$34.15	\$34.15		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
72020	TC	\$22.87	\$22.87		
72020	26	\$11.28	\$11.28		
72040		\$49.40	\$49.40		
72040	TC	\$33.28	\$33.28		
72040	26	\$16.12	\$16.12		
72050		\$71.98	\$71.98		
72050	TC	\$48.88	\$48.88		
72050	26	\$23.10	\$23.10		
72052		\$88.20	\$88.20		
72052	TC	\$61.34	\$61.34		
72052	26	\$26.86	\$26.86		
72069		\$43.68	\$43.68		
72069	TC	\$26.50	\$26.50		
72069	26	\$17.17	\$17.17		
72070		\$51.48	\$51.48		
72070	TC	\$35.36	\$35.36		
72070	26	\$16.12	\$16.12		
72072		\$56.16	\$56.16		
72072	TC	\$40.04	\$40.04		
72072	26	\$16.12	\$16.12		
72074		\$66.04	\$66.04		
72074	TC	\$49.92	\$49.92		
72074	26	\$16.12	\$16.12		
72080		\$53.05	\$53.05		
72080	TC	\$36.39	\$36.39		
72080	26	\$16.65	\$16.65		
72090		\$57.87	\$57.87		
72090	TC	\$36.39	\$36.39		
72090	26	\$21.47	\$21.47		
72100		\$53.05	\$53.05		
72100	TC	\$36.39	\$36.39		
72100	26	\$16.65	\$16.65		
72110		\$73.02	\$73.02		
72110	TC	\$49.92	\$49.92		
72110	26	\$23.10	\$23.10		
72114		\$92.38	\$92.38		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
72114	TC	\$64.46	\$64.46		
72114	26	\$27.92	\$27.92		
72120		\$65.53	\$65.53		
72120	TC	\$48.88	\$48.88		
72120	26	\$16.65	\$16.65		
72125		\$406.15	\$406.15		
72125	TC	\$320.22	\$320.22		
72125	26	\$85.93	\$85.93		
72126		\$473.87	\$473.87		
72126	TC	\$383.64	\$383.64		
72126	26	\$90.23	\$90.23		
72127		\$574.32	\$574.32		
72127	TC	\$479.80	\$479.80		
72127	26	\$94.52	\$94.52		
72128		\$406.15	\$406.15		
72128	TC	\$320.22	\$320.22		
72128	26	\$85.93	\$85.93		
72129		\$473.87	\$473.87		
72129	TC	\$383.64	\$383.64		
72129	26	\$90.23	\$90.23		
72130		\$573.80	\$573.80		
72130	TC	\$479.80	\$479.80		
72130	26	\$94.00	\$94.00		
72131		\$406.15	\$406.15		
72131	TC	\$320.22	\$320.22		
72131	26	\$85.93	\$85.93		
72132		\$474.40	\$474.40		
72132	TC	\$383.64	\$383.64		
72132	26	\$90.76	\$90.76		
72133		\$574.32	\$574.32		
72133	TC	\$479.80	\$479.80		
72133	26	\$94.52	\$94.52		
72141		\$726.90	\$726.90		
72141	TC	\$608.21	\$608.21		
72141	26	\$118.69	\$118.69		
72142		\$872.71	\$872.71		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
72142	TC	\$729.32	\$729.32		
72142	26	\$143.39	\$143.39		
72146		\$792.90	\$792.90		
72146	TC	\$674.21	\$674.21		
72146	26	\$118.69	\$118.69		
72147		\$872.19	\$872.19		
72147	TC	\$729.32	\$729.32		
72147	26	\$142.87	\$142.87		
72148		\$784.31	\$784.31		
72148	TC	\$674.21	\$674.21		
72148	26	\$110.09	\$110.09		
72149		\$863.03	\$863.03		
72149	TC	\$729.32	\$729.32		
72149	26	\$133.70	\$133.70		
72156		\$1,541.21	\$1,541.21		
72156	TC	\$1,351.06	\$1,351.06		
72156	26	\$190.16	\$190.16		
72157		\$1,541.21	\$1,541.21		
72157	TC	\$1,351.06	\$1,351.06		
72157	26	\$190.16	\$190.16		
72158		\$1,526.17	\$1,526.17		
72158	TC	\$1,351.06	\$1,351.06		
72158	26	\$175.11	\$175.11		
72159		\$810.55	\$810.55		
72159	TC	\$672.14	\$672.14		
72159	26	\$138.41	\$138.41		
72170		\$40.95	\$40.95		
72170	TC	\$28.06	\$28.06		
72170	26	\$12.88	\$12.88		
72190		\$51.97	\$51.97		
72190	TC	\$36.39	\$36.39		
72190	26	\$15.58	\$15.58		
72191		\$772.82	\$772.82		
72191	TC	\$639.62	\$639.62		
72191	26	\$133.21	\$133.21		
72192		\$400.79	\$400.79		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
72192	TC	\$320.22	\$320.22		
72192	26	\$80.57	\$80.57		
72193		\$457.61	\$457.61		
72193	TC	\$371.68	\$371.68		
72193	26	\$85.93	\$85.93		
72194		\$549.75	\$549.75		
72194	TC	\$459.52	\$459.52		
72194	26	\$90.23	\$90.23		
72195		\$707.66	\$707.66		
72195	TC	\$600.23	\$600.23		
72195	26	\$107.42	\$107.42		
72196		\$846.52	\$846.52		
72196	TC	\$719.75	\$719.75		
72196	26	\$126.77	\$126.77		
72197		\$1,496.31	\$1,496.31		
72197	TC	\$1,329.78	\$1,329.78		
72197	26	\$166.52	\$166.52		
72198		\$746.62	\$746.62		
72198	TC	\$608.21	\$608.21		
72198	26	\$138.41	\$138.41		
72200		\$40.95	\$40.95		
72200	TC	\$28.06	\$28.06		
72200	26	\$12.88	\$12.88		
72202		\$48.29	\$48.29		
72202	TC	\$34.32	\$34.32		
72202	26	\$13.97	\$13.97		
72220		\$44.61	\$44.61		
72220	TC	\$31.72	\$31.72		
72220	26	\$12.88	\$12.88		
72240		\$323.94	\$323.94		
72240	TC	\$257.32	\$257.32		
72240	26	\$66.62	\$66.62		
72255		\$301.06	\$301.06		
72255	TC	\$234.96	\$234.96		
72255	26	\$66.10	\$66.10		
72265		\$282.72	\$282.72		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
72265	TC	\$221.46	\$221.46		
72265	26	\$61.26	\$61.26		
72270		\$429.44	\$429.44		
72270	TC	\$331.14	\$331.14		
72270	26	\$98.31	\$98.31		
72275		\$173.50	\$173.50		
72275	TC	\$119.69	\$119.69		
72275	26	\$53.81	\$53.81		
72285		\$539.75	\$539.75		
72285	TC	\$454.84	\$454.84		
72285	26	\$84.91	\$84.91		
72291		\$0.00	\$0.00		
72291	TC	\$0.00	\$0.00		
72291	26	\$97.82	\$97.82		
72292		\$0.00	\$0.00		
72292	TC	\$0.00	\$0.00		
72292	26	\$100.05	\$100.05		
72295		\$487.51	\$487.51		
72295	TC	\$425.73	\$425.73		
72295	26	\$61.78	\$61.78		
73000		\$39.88	\$39.88		
73000	TC	\$28.06	\$28.06		
73000	26	\$11.82	\$11.82		
73010		\$40.95	\$40.95		
73010	TC	\$28.06	\$28.06		
73010	26	\$12.88	\$12.88		
73020		\$36.74	\$36.74		
73020	TC	\$25.47	\$25.47		
73020	26	\$11.28	\$11.28		
73030		\$45.15	\$45.15		
73030	TC	\$31.72	\$31.72		
73030	26	\$13.43	\$13.43		
73040		\$155.19	\$155.19		
73040	TC	\$114.38	\$114.38		
73040	26	\$40.82	\$40.82		
73050		\$51.96	\$51.96		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
73050	TC	\$36.39	\$36.39		
73050	26	\$15.57	\$15.57		
73060		\$44.61	\$44.61		
73060	TC	\$31.72	\$31.72		
73060	26	\$12.88	\$12.88		
73070		\$39.34	\$39.34		
73070	TC	\$28.06	\$28.06		
73070	26	\$11.28	\$11.28		
73080		\$44.61	\$44.61		
73080	TC	\$31.72	\$31.72		
73080	26	\$12.88	\$12.88		
73085		\$155.71	\$155.71		
73085	TC	\$114.38	\$114.38		
73085	26	\$41.34	\$41.34		
73090		\$39.88	\$39.88		
73090	TC	\$28.06	\$28.06		
73090	26	\$11.82	\$11.82		
73092		\$0.00	\$0.00		
73092	TC	\$0.00	\$0.00		
73092	26	\$0.00	\$0.00		
73100		\$39.38	\$39.38		
73100	TC	\$26.50	\$26.50		
73100	26	\$12.87	\$12.87		
73110		\$41.47	\$41.47		
73110	TC	\$28.58	\$28.58		
73110	26	\$12.88	\$12.88		
73115		\$127.65	\$127.65		
73115	TC	\$86.31	\$86.31		
73115	26	\$41.34	\$41.34		
73120		\$38.33	\$38.33		
73120	TC	\$26.50	\$26.50		
73120	26	\$11.82	\$11.82		
73130		\$41.47	\$41.47		
73130	TC	\$28.58	\$28.58		
73130	26	\$12.88	\$12.88		
73140		\$32.54	\$32.54		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
73140	TC	\$22.87	\$22.87		
73140	26	\$9.67	\$9.67		
73200		\$349.31	\$349.31		
73200	TC	\$268.74	\$268.74		
73200	26	\$80.57	\$80.57		
73201		\$406.15	\$406.15		
73201	TC	\$320.22	\$320.22		
73201	26	\$85.93	\$85.93		
73202		\$493.10	\$493.10		
73202	TC	\$402.34	\$402.34		
73202	26	\$90.76	\$90.76		
73206		\$717.27	\$717.27		
73206	TC	\$584.58	\$584.58		
73206	26	\$132.69	\$132.69		
73218		\$695.88	\$695.88		
73218	TC	\$597.04	\$597.04		
73218	26	\$98.84	\$98.84		
73219		\$836.33	\$836.33		
73219	TC	\$717.09	\$717.09		
73219	26	\$119.23	\$119.23		
73220		\$1,484.53	\$1,484.53		
73220	TC	\$1,326.06	\$1,326.06		
73220	26	\$158.47	\$158.47		
73221		\$695.88	\$695.88		
73221	TC	\$597.04	\$597.04		
73221	26	\$98.84	\$98.84		
73222		\$835.81	\$835.81		
73222	TC	\$717.09	\$717.09		
73222	26	\$118.72	\$118.72		
73223		\$1,483.47	\$1,483.47		
73223	TC	\$1,326.06	\$1,326.06		
73223	26	\$157.41	\$157.41		
73225		\$739.70	\$739.70		
73225	TC	\$606.13	\$606.13		
73225	26	\$133.57	\$133.57		
73500		\$38.35	\$38.35		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
73500	TC	\$25.47	\$25.47		
73500	26	\$12.88	\$12.88		
73510		\$47.83	\$47.83		
73510	TC	\$31.72	\$31.72		
73510	26	\$16.11	\$16.11		
73520		\$56.26	\$56.26		
73520	TC	\$36.39	\$36.39		
73520	26	\$19.86	\$19.86		
73525		\$155.19	\$155.19		
73525	TC	\$114.38	\$114.38		
73525	26	\$40.82	\$40.82		
73530		\$49.54	\$49.54		
73530	TC	\$28.06	\$28.06		
73530	26	\$21.48	\$21.48		
73540		\$0.00	\$0.00		
73540	TC	\$0.00	\$0.00		
73540	26	\$0.00	\$0.00		
73542		\$156.87	\$156.87		
73542	TC	\$114.38	\$114.38		
73542	26	\$42.50	\$42.50		
73550		\$44.61	\$44.61		
73550	TC	\$31.72	\$31.72		
73550	26	\$12.88	\$12.88		
73560		\$41.48	\$41.48		
73560	TC	\$28.06	\$28.06		
73560	26	\$13.42	\$13.42		
73562		\$45.68	\$45.68		
73562	TC	\$31.72	\$31.72		
73562	26	\$13.96	\$13.96		
73564		\$51.49	\$51.49		
73564	TC	\$34.32	\$34.32		
73564	26	\$17.17	\$17.17		
73565		\$39.92	\$39.92		
73565	TC	\$26.50	\$26.50		
73565	26	\$13.42	\$13.42		
73580		\$183.25	\$183.25		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
73580	TC	\$142.44	\$142.44		
73580	26	\$40.82	\$40.82		
73590		\$40.95	\$40.95		
73590	TC	\$28.06	\$28.06		
73590	26	\$12.88	\$12.88		
73592		\$0.00	\$0.00		
73592	TC	\$0.00	\$0.00		
73592	26	\$0.00	\$0.00		
73600		\$38.33	\$38.33		
73600	TC	\$26.50	\$26.50		
73600	26	\$11.82	\$11.82		
73610		\$41.47	\$41.47		
73610	TC	\$28.58	\$28.58		
73610	26	\$12.88	\$12.88		
73615		\$155.71	\$155.71		
73615	TC	\$114.38	\$114.38		
73615	26	\$41.34	\$41.34		
73620		\$38.33	\$38.33		
73620	TC	\$26.50	\$26.50		
73620	26	\$11.82	\$11.82		
73630		\$41.47	\$41.47		
73630	TC	\$28.58	\$28.58		
73630	26	\$12.88	\$12.88		
73650		\$37.29	\$37.29		
73650	TC	\$25.47	\$25.47		
73650	26	\$11.82	\$11.82		
73660		\$32.54	\$32.54		
73660	TC	\$22.87	\$22.87		
73660	26	\$9.67	\$9.67		
73700		\$349.31	\$349.31		
73700	TC	\$268.74	\$268.74		
73700	26	\$80.57	\$80.57		
73701		\$406.15	\$406.15		
73701	TC	\$320.22	\$320.22		
73701	26	\$85.93	\$85.93		
73702		\$492.57	\$492.57		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
73702	TC	\$402.34	\$402.34		
73702	26	\$90.23	\$90.23		
73706		\$724.24	\$724.24		
73706	TC	\$584.58	\$584.58		
73706	26	\$139.65	\$139.65		
73718		\$695.88	\$695.88		
73718	TC	\$597.04	\$597.04		
73718	26	\$98.84	\$98.84		
73719		\$835.81	\$835.81		
73719	TC	\$717.09	\$717.09		
73719	26	\$118.72	\$118.72		
73720		\$1,484.53	\$1,484.53		
73720	TC	\$1,326.06	\$1,326.06		
73720	26	\$158.47	\$158.47		
73721		\$695.88	\$695.88		
73721	TC	\$597.04	\$597.04		
73721	26	\$98.84	\$98.84		
73722		\$836.86	\$836.86		
73722	TC	\$717.09	\$717.09		
73722	26	\$119.77	\$119.77		
73723		\$1,483.47	\$1,483.47		
73723	TC	\$1,326.06	\$1,326.06		
73723	26	\$157.41	\$157.41		
73725		\$743.56	\$743.56		
73725	TC	\$608.21	\$608.21		
73725	26	\$135.35	\$135.35		
74000		\$41.49	\$41.49		
74000	TC	\$28.06	\$28.06		
74000	26	\$13.43	\$13.43		
74010		\$48.91	\$48.91		
74010	TC	\$31.72	\$31.72		
74010	26	\$17.18	\$17.18		
74020		\$54.19	\$54.19		
74020	TC	\$34.32	\$34.32		
74020	26	\$19.88	\$19.88		
74022		\$63.67	\$63.67		

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
74022	TC	\$40.04	\$40.04		
74022	26	\$23.63	\$23.63		
74150		\$395.31	\$395.31		
74150	TC	\$307.23	\$307.23		
74150	26	\$88.08	\$88.08		
74160		\$465.68	\$465.68		
74160	TC	\$371.68	\$371.68		
74160	26	\$94.00	\$94.00		
74170		\$563.17	\$563.17		
74170	TC	\$459.52	\$459.52		
74170	26	\$103.66	\$103.66		
74175		\$779.27	\$779.27		
74175	TC	\$639.62	\$639.62		
74175	26	\$139.65	\$139.65		
74181		\$708.19	\$708.19		
74181	TC	\$600.23	\$600.23		
74181	26	\$107.96	\$107.96		
74182		\$847.05	\$847.05		
74182	TC	\$719.75	\$719.75		
74182	26	\$127.30	\$127.30		
74183		\$1,496.31	\$1,496.31		
74183	TC	\$1,329.78	\$1,329.78		
74183	26	\$166.52	\$166.52		
74185		\$741.95	\$741.95		
74185	TC	\$608.21	\$608.21		
74185	26	\$133.74	\$133.74		
74190		\$106.15	\$106.15		
74190	TC	\$70.70	\$70.70		
74190	26	\$35.45	\$35.45		
74210		\$91.31	\$91.31		
74210	TC	\$64.46	\$64.46		
74210	26	\$26.86	\$26.86		
74220		\$98.30	\$98.30		
74220	TC	\$64.46	\$64.46		
74220	26	\$33.85	\$33.85		
74230		\$109.91	\$109.91		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
74230	TC	\$70.70	\$70.70		
74230	26	\$39.21	\$39.21		
74235		\$230.52	\$230.52		
74235	TC	\$142.44	\$142.44		
74235	26	\$88.08	\$88.08		
74240		\$131.10	\$131.10		
74240	TC	\$79.54	\$79.54		
74240	26	\$51.56	\$51.56		
74241		\$132.66	\$132.66		
74241	TC	\$81.10	\$81.10		
74241	26	\$51.56	\$51.56		
74245		\$196.59	\$196.59		
74245	TC	\$129.45	\$129.45		
74245	26	\$67.14	\$67.14		
74246		\$141.51	\$141.51		
74246	TC	\$89.95	\$89.95		
74246	26	\$51.56	\$51.56		
74247		\$144.12	\$144.12		
74247	TC	\$92.56	\$92.56		
74247	26	\$51.56	\$51.56		
74249		\$206.98	\$206.98		
74249	TC	\$139.84	\$139.84		
74249	26	\$67.14	\$67.14		
74250		\$105.61	\$105.61		
74250	TC	\$70.70	\$70.70		
74250	26	\$34.91	\$34.91		
74251		\$122.26	\$122.26		
74251	TC	\$70.70	\$70.70		
74251	26	\$51.56	\$51.56		
74260		\$118.16	\$118.16		
74260	TC	\$81.10	\$81.10		
74260	26	\$37.06	\$37.06		
74270		\$145.16	\$145.16		
74270	TC	\$93.60	\$93.60		
74270	26	\$51.56	\$51.56		
74280		\$194.70	\$194.70		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
74280	TC	\$121.66	\$121.66		
74280	26	\$73.05	\$73.05		
74283		\$288.66	\$288.66		
74283	TC	\$139.32	\$139.32		
74283	26	\$149.34	\$149.34		
74290		\$63.67	\$63.67		
74290	TC	\$40.04	\$40.04		
74290	26	\$23.63	\$23.63		
74291		\$37.90	\$37.90		
74291	TC	\$22.87	\$22.87		
74291	26	\$15.03	\$15.03		
74300		BR	BR		
74300	TC	BR	BR		
74300	26	\$26.86	\$26.86		
74301		BR	BR		
74301	TC	BR	BR		
74301	26	\$15.58	\$15.58		
74305		\$73.79	\$73.79		
74305	TC	\$42.64	\$42.64		
74305	26	\$31.16	\$31.16		
74320		\$211.30	\$211.30		
74320	TC	\$171.55	\$171.55		
74320	26	\$39.75	\$39.75		
74327		\$148.82	\$148.82		
74327	TC	\$96.71	\$96.71		
74327	26	\$52.11	\$52.11		
74328		\$223.66	\$223.66		
74328	TC	\$171.55	\$171.55		
74328	26	\$52.11	\$52.11		
74329		\$223.66	\$223.66		
74329	TC	\$171.55	\$171.55		
74329	26	\$52.11	\$52.11		
74330		\$238.15	\$238.15		
74330	TC	\$171.55	\$171.55		
74330	26	\$66.60	\$66.60		
74340		\$182.19	\$182.19		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
74340	TC	\$142.44	\$142.44		
74340	26	\$39.75	\$39.75		
74355		\$198.84	\$198.84		
74355	TC	\$142.44	\$142.44		
74355	26	\$56.41	\$56.41		
74360		\$211.82	\$211.82		
74360	TC	\$171.55	\$171.55		
74360	26	\$40.27	\$40.27		
74363		\$396.13	\$396.13		
74363	TC	\$331.14	\$331.14		
74363	26	\$64.99	\$64.99		
74400		\$128.55	\$128.55		
74400	TC	\$92.56	\$92.56		
74400	26	\$36.00	\$36.00		
74410		\$142.05	\$142.05		
74410	TC	\$106.06	\$106.06		
74410	26	\$36.00	\$36.00		
74415		\$151.41	\$151.41		
74415	TC	\$115.41	\$115.41		
74415	26	\$36.00	\$36.00		
74420		\$169.29	\$169.29		
74420	TC	\$142.44	\$142.44		
74420	26	\$26.86	\$26.86		
74425		\$97.56	\$97.56		
74425	TC	\$70.70	\$70.70		
74425	26	\$26.86	\$26.86		
74430		\$81.35	\$81.35		
74430	TC	\$57.19	\$57.19		
74430	26	\$24.16	\$24.16		
74440		\$89.28	\$89.28		
74440	TC	\$61.34	\$61.34		
74440	26	\$27.94	\$27.94		
74445		\$145.67	\$145.67		
74445	TC	\$61.34	\$61.34		
74445	26	\$84.32	\$84.32		
74450		\$104.25	\$104.25		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
74450	TC	\$79.54	\$79.54		
74450	26	\$24.71	\$24.71		
74455		\$111.02	\$111.02		
74455	TC	\$86.31	\$86.31		
74455	26	\$24.71	\$24.71		
74470		\$107.86	\$107.86		
74470	TC	\$68.10	\$68.10		
74470	26	\$39.75	\$39.75		
74475		\$261.21	\$261.21		
74475	TC	\$221.46	\$221.46		
74475	26	\$39.75	\$39.75		
74480		\$261.21	\$261.21		
74480	TC	\$221.46	\$221.46		
74480	26	\$39.75	\$39.75		
74485		\$212.37	\$212.37		
74485	TC	\$171.55	\$171.55		
74485	26	\$40.82	\$40.82		
74710		\$82.44	\$82.44		
74710	TC	\$57.19	\$57.19		
74710	26	\$25.25	\$25.25		
74740		\$99.16	\$99.16		
74740	TC	\$70.70	\$70.70		
74740	26	\$28.46	\$28.46		
74742		\$216.67	\$216.67		
74742	TC	\$171.55	\$171.55		
74742	26	\$45.11	\$45.11		
74775		\$0.00	\$0.00		
74775	TC	\$0.00	\$0.00		
74775	26	\$0.00	\$0.00		
75557		\$762.18	\$762.18		
75557	TC	\$579.85	\$579.85		
75557	26	\$182.33	\$182.33		
75558		\$839.65	\$839.65		
75558	TC	\$660.47	\$660.47		
75558	26	\$179.18	\$179.18		
75559		\$1,101.30	\$1,101.30		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75559	TC	\$869.36	\$869.36		
75559	26	\$231.95	\$231.95		
75560		\$1,084.36	\$1,084.36		
75560	TC	\$878.75	\$878.75		
75560	26	\$205.61	\$205.61		
75561		\$1,022.26	\$1,022.26		
75561	TC	\$821.08	\$821.08		
75561	26	\$201.18	\$201.18		
75562		\$1,074.95	\$1,074.95		
75562	TC	\$878.51	\$878.51		
75562	26	\$196.44	\$196.44		
75563		\$1,262.07	\$1,262.07		
75563	TC	\$1,021.17	\$1,021.17		
75563	26	\$240.90	\$240.90		
75564		\$1,263.95	\$1,263.95		
75564	TC	\$1,033.94	\$1,033.94		
75564	26	\$230.01	\$230.01		
75600		\$720.61	\$720.61		
75600	TC	\$683.05	\$683.05		
75600	26	\$37.56	\$37.56		
75605		\$768.93	\$768.93		
75605	TC	\$683.05	\$683.05		
75605	26	\$85.88	\$85.88		
75625		\$767.90	\$767.90		
75625	TC	\$683.05	\$683.05		
75625	26	\$84.84	\$84.84		
75630		\$846.92	\$846.92		
75630	TC	\$712.16	\$712.16		
75630	26	\$134.75	\$134.75		
75635		\$1,016.77	\$1,016.77		
75635	TC	\$839.51	\$839.51		
75635	26	\$177.26	\$177.26		
75650		\$793.69	\$793.69		
75650	TC	\$683.05	\$683.05		
75650	26	\$110.64	\$110.64		
75658		\$782.34	\$782.34		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75658	TC	\$683.05	\$683.05		
75658	26	\$99.29	\$99.29		
75660		\$780.78	\$780.78		
75660	TC	\$683.05	\$683.05		
75660	26	\$97.73	\$97.73		
75662		\$809.18	\$809.18		
75662	TC	\$683.05	\$683.05		
75662	26	\$126.13	\$126.13		
75665		\$781.31	\$781.31		
75665	TC	\$683.05	\$683.05		
75665	26	\$98.26	\$98.26		
75671		\$807.11	\$807.11		
75671	TC	\$683.05	\$683.05		
75671	26	\$124.05	\$124.05		
75676		\$781.31	\$781.31		
75676	TC	\$683.05	\$683.05		
75676	26	\$98.26	\$98.26		
75680		\$807.11	\$807.11		
75680	TC	\$683.05	\$683.05		
75680	26	\$124.05	\$124.05		
75685		\$780.26	\$780.26		
75685	TC	\$683.05	\$683.05		
75685	26	\$97.21	\$97.21		
75705		\$846.30	\$846.30		
75705	TC	\$683.05	\$683.05		
75705	26	\$163.25	\$163.25		
75710		\$768.43	\$768.43		
75710	TC	\$683.05	\$683.05		
75710	26	\$85.38	\$85.38		
75716		\$780.26	\$780.26		
75716	TC	\$683.05	\$683.05		
75716	26	\$97.21	\$97.21		
75722		\$768.93	\$768.93		
75722	TC	\$683.05	\$683.05		
75722	26	\$85.88	\$85.88		
75724		\$796.26	\$796.26		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75724	TC	\$683.05	\$683.05		
75724	26	\$113.21	\$113.21		
75726		\$767.38	\$767.38		
75726	TC	\$683.05	\$683.05		
75726	26	\$84.32	\$84.32		
75731		\$767.38	\$767.38		
75731	TC	\$683.05	\$683.05		
75731	26	\$84.32	\$84.32		
75733		\$780.26	\$780.26		
75733	TC	\$683.05	\$683.05		
75733	26	\$97.21	\$97.21		
75736		\$767.38	\$767.38		
75736	TC	\$683.05	\$683.05		
75736	26	\$84.32	\$84.32		
75741		\$780.26	\$780.26		
75741	TC	\$683.05	\$683.05		
75741	26	\$97.21	\$97.21		
75743		\$805.52	\$805.52		
75743	TC	\$683.05	\$683.05		
75743	26	\$122.47	\$122.47		
75746		\$767.38	\$767.38		
75746	TC	\$683.05	\$683.05		
75746	26	\$84.32	\$84.32		
75756		\$771.00	\$771.00		
75756	TC	\$683.05	\$683.05		
75756	26	\$87.95	\$87.95		
75774		\$710.43	\$710.43		
75774	TC	\$683.05	\$683.05		
75774	26	\$27.38	\$27.38		
75790		\$210.79	\$210.79		
75790	TC	\$73.83	\$73.83		
75790	26	\$136.96	\$136.96		
75801		\$355.46	\$355.46		
75801	TC	\$294.23	\$294.23		
75801	26	\$61.22	\$61.22		
75803		\$380.71	\$380.71		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75803	TC	\$294.23	\$294.23		
75803	26	\$86.47	\$86.47		
75805		\$391.83	\$391.83		
75805	TC	\$331.14	\$331.14		
75805	26	\$60.69	\$60.69		
75807		\$417.61	\$417.61		
75807	TC	\$331.14	\$331.14		
75807	26	\$86.47	\$86.47		
75809		\$77.55	\$77.55		
75809	TC	\$42.64	\$42.64		
75809	26	\$34.91	\$34.91		
75810		\$767.91	\$767.91		
75810	TC	\$683.05	\$683.05		
75810	26	\$84.86	\$84.86		
75820		\$104.10	\$104.10		
75820	TC	\$52.00	\$52.00		
75820	26	\$52.11	\$52.11		
75822		\$159.00	\$159.00		
75822	TC	\$80.58	\$80.58		
75822	26	\$78.42	\$78.42		
75825		\$767.91	\$767.91		
75825	TC	\$683.05	\$683.05		
75825	26	\$84.86	\$84.86		
75827		\$767.38	\$767.38		
75827	TC	\$683.05	\$683.05		
75827	26	\$84.32	\$84.32		
75831		\$767.38	\$767.38		
75831	TC	\$683.05	\$683.05		
75831	26	\$84.32	\$84.32		
75833		\$793.69	\$793.69		
75833	TC	\$683.05	\$683.05		
75833	26	\$110.64	\$110.64		
75840		\$768.96	\$768.96		
75840	TC	\$683.05	\$683.05		
75840	26	\$85.91	\$85.91		
75842		\$793.17	\$793.17		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75842	TC	\$683.05	\$683.05		
75842	26	\$110.12	\$110.12		
75860		\$768.95	\$768.95		
75860	TC	\$683.05	\$683.05		
75860	26	\$85.90	\$85.90		
75870		\$768.95	\$768.95		
75870	TC	\$683.05	\$683.05		
75870	26	\$85.90	\$85.90		
75872		\$767.38	\$767.38		
75872	TC	\$683.05	\$683.05		
75872	26	\$84.32	\$84.32		
75880		\$104.62	\$104.62		
75880	TC	\$52.00	\$52.00		
75880	26	\$52.63	\$52.63		
75885		\$789.40	\$789.40		
75885	TC	\$683.05	\$683.05		
75885	26	\$106.35	\$106.35		
75887		\$789.40	\$789.40		
75887	TC	\$683.05	\$683.05		
75887	26	\$106.35	\$106.35		
75889		\$767.38	\$767.38		
75889	TC	\$683.05	\$683.05		
75889	26	\$84.32	\$84.32		
75891		\$767.38	\$767.38		
75891	TC	\$683.05	\$683.05		
75891	26	\$84.32	\$84.32		
75893		\$722.80	\$722.80		
75893	TC	\$683.05	\$683.05		
75893	26	\$39.75	\$39.75		
75894		\$1,406.68	\$1,406.68		
75894	TC	\$1,308.94	\$1,308.94		
75894	26	\$97.74	\$97.74		
75896		\$1,236.68	\$1,236.68		
75896	TC	\$1,138.43	\$1,138.43		
75896	26	\$98.25	\$98.25		
75898		\$179.64	\$179.64		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75898	TC	\$57.19	\$57.19		
75898	26	\$122.45	\$122.45		
75900		\$1,173.92	\$1,173.92		
75900	TC	\$1,137.92	\$1,137.92		
75900	26	\$36.00	\$36.00		
75901		\$147.12	\$147.12		
75901	TC	\$111.12	\$111.12		
75901	26	\$36.00	\$36.00		
75902		\$140.13	\$140.13		
75902	TC	\$111.12	\$111.12		
75902	26	\$29.01	\$29.01		
75940		\$723.87	\$723.87		
75940	TC	\$683.05	\$683.05		
75940	26	\$40.82	\$40.82		
75945		\$278.58	\$278.58		
75945	TC	\$247.44	\$247.44		
75945	26	\$31.13	\$31.13		
75946		\$155.90	\$155.90		
75946	TC	\$124.77	\$124.77		
75946	26	\$31.13	\$31.13		
75952		\$0.00	\$0.00		
75952	TC	\$0.00	\$0.00		
75952	26	\$364.91	\$364.91		
75953		\$0.00	\$0.00		
75953	TC	\$0.00	\$0.00		
75953	26	\$140.85	\$140.85		
75954		BR	BR		
75954	TC	BR	BR		
75954	26	\$141.89	\$141.89		
75956		\$0.00	\$0.00		
75956	TC	\$0.00	\$0.00		
75956	26	\$561.10	\$561.10		
75957		\$0.00	\$0.00		
75957	TC	\$0.00	\$0.00		
75957	26	\$480.72	\$480.72		
75958		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75958	TC	\$0.00	\$0.00		
75958	26	\$320.47	\$320.47		
75959		\$0.00	\$0.00		
75959	TC	\$0.00	\$0.00		
75959	26	\$280.54	\$280.54		
75960		\$870.60	\$870.60		
75960	TC	\$808.33	\$808.33		
75960	26	\$62.27	\$62.27		
75961		\$884.51	\$884.51		
75961	TC	\$569.74	\$569.74		
75961	26	\$314.77	\$314.77		
75962		\$895.95	\$895.95		
75962	TC	\$854.61	\$854.61		
75962	26	\$41.34	\$41.34		
75964		\$482.22	\$482.22		
75964	TC	\$455.36	\$455.36		
75964	26	\$26.86	\$26.86		
75966		\$953.38	\$953.38		
75966	TC	\$854.61	\$854.61		
75966	26	\$98.77	\$98.77		
75968		\$482.21	\$482.21		
75968	TC	\$455.36	\$455.36		
75968	26	\$26.84	\$26.84		
75970		\$688.69	\$688.69		
75970	TC	\$625.88	\$625.88		
75970	26	\$62.82	\$62.82		
75978		\$894.37	\$894.37		
75978	TC	\$854.61	\$854.61		
75978	26	\$39.75	\$39.75		
75980		\$400.58	\$400.58		
75980	TC	\$294.23	\$294.23		
75980	26	\$106.35	\$106.35		
75982		\$437.49	\$437.49		
75982	TC	\$331.14	\$331.14		
75982	26	\$106.35	\$106.35		
75984		\$159.77	\$159.77		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
75984	TC	\$106.06	\$106.06		
75984	26	\$53.71	\$53.71		
75989		\$259.63	\$259.63		
75989	TC	\$171.55	\$171.55		
75989	26	\$88.08	\$88.08		
75992		\$894.89	\$894.89		
75992	TC	\$854.61	\$854.61		
75992	26	\$40.27	\$40.27		
75993		\$482.73	\$482.73		
75993	TC	\$455.36	\$455.36		
75993	26	\$27.36	\$27.36		
75994		\$953.38	\$953.38		
75994	TC	\$854.61	\$854.61		
75994	26	\$98.77	\$98.77		
75995		\$953.90	\$953.90		
75995	TC	\$854.61	\$854.61		
75995	26	\$99.29	\$99.29		
75996		\$481.69	\$481.69		
75996	TC	\$455.36	\$455.36		
75996	26	\$26.32	\$26.32		
76000		\$83.07	\$83.07		
76000	TC	\$70.70	\$70.70		
76000	26	\$12.37	\$12.37		
76001		\$192.40	\$192.40		
76001	TC	\$142.44	\$142.44		
76001	26	\$49.96	\$49.96		
76010		\$0.00	\$0.00		
76010	TC	\$0.00	\$0.00		
76010	26	\$0.00	\$0.00		
76080		\$96.94	\$96.94		
76080	TC	\$57.19	\$57.19		
76080	26	\$39.75	\$39.75		
76098		\$34.69	\$34.69		
76098	TC	\$22.87	\$22.87		
76098	26	\$11.82	\$11.82		
76100		\$111.61	\$111.61		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76100	TC	\$68.10	\$68.10		
76100	26	\$43.51	\$43.51		
76101		\$120.97	\$120.97		
76101	TC	\$77.46	\$77.46		
76101	26	\$43.51	\$43.51		
76102		\$139.18	\$139.18		
76102	TC	\$95.15	\$95.15		
76102	26	\$44.03	\$44.03		
76120		\$85.65	\$85.65		
76120	TC	\$57.19	\$57.19		
76120	26	\$28.46	\$28.46		
76125		\$62.51	\$62.51		
76125	TC	\$42.64	\$42.64		
76125	26	\$19.88	\$19.88		
76140		\$0.00	\$0.00		
76150		\$22.87	\$22.87		
76350		\$52.04	\$52.04		
76376		\$195.97	\$195.97		
76376	TC	\$180.30	\$180.30		
76376	26	\$15.67	\$15.67		
76377		\$254.25	\$254.25		
76377	TC	\$192.65	\$192.65		
76377	26	\$61.60	\$61.60		
76380		\$262.24	\$262.24		
76380	TC	\$189.74	\$189.74		
76380	26	\$72.50	\$72.50		
76390		\$710.31	\$710.31		
76390	TC	\$606.13	\$606.13		
76390	26	\$104.18	\$104.18		
76496		BR	BR		
76496	TC	BR	BR		
76496	26	BR	BR		
76497		BR	BR		
76497	TC	BR	BR		
76497	26	BR	BR		
76498		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76498	TC	BR	BR		
76498	26	BR	BR		
76499		BR	BR		
76499	TC	BR	BR		
76499	26	BR	BR		
76506		\$126.80	\$126.80		
76506	TC	\$77.46	\$77.46		
76506	26	\$49.34	\$49.34		
76510		\$238.17	\$238.17		
76510	TC	\$116.22	\$116.22		
76510	26	\$121.94	\$121.94		
76511		\$112.43	\$112.43		
76511	TC	\$39.55	\$39.55		
76511	26	\$72.89	\$72.89		
76512		\$95.19	\$95.19		
76512	TC	\$43.22	\$43.22		
76512	26	\$51.97	\$51.97		
76513		\$99.35	\$99.35		
76513	TC	\$47.37	\$47.37		
76513	26	\$51.97	\$51.97		
76514		\$17.57	\$17.57		
76514	TC	\$3.65	\$3.65		
76514	26	\$13.92	\$13.92		
76516		\$72.02	\$72.02		
76516	TC	\$29.16	\$29.16		
76516	26	\$42.86	\$42.86		
76519		\$76.69	\$76.69		
76519	TC	\$33.84	\$33.84		
76519	26	\$42.86	\$42.86		
76529		\$76.26	\$76.26		
76529	TC	\$31.77	\$31.77		
76529	26	\$44.49	\$44.49		
76536		\$118.82	\$118.82		
76536	TC	\$77.46	\$77.46		
76536	26	\$41.36	\$41.36		
76604		\$111.00	\$111.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76604	TC	\$70.70	\$70.70		
76604	26	\$40.30	\$40.30		
76645		\$98.00	\$98.00		
76645	TC	\$57.19	\$57.19		
76645	26	\$40.82	\$40.82		
76700		\$167.79	\$167.79		
76700	TC	\$107.09	\$107.09		
76700	26	\$60.69	\$60.69		
76705		\$122.03	\$122.03		
76705	TC	\$77.46	\$77.46		
76705	26	\$44.57	\$44.57		
76770		\$162.41	\$162.41		
76770	TC	\$107.09	\$107.09		
76770	26	\$55.32	\$55.32		
76775		\$120.97	\$120.97		
76775	TC	\$77.46	\$77.46		
76775	26	\$43.51	\$43.51		
76776		\$212.73	\$212.73		
76776	TC	\$158.89	\$158.89		
76776	26	\$53.84	\$53.84		
76800		\$159.15	\$159.15		
76800	TC	\$77.46	\$77.46		
76800	26	\$81.69	\$81.69		
76801		\$188.46	\$188.46		
76801	TC	\$114.38	\$114.38		
76801	26	\$74.08	\$74.08		
76802		\$123.20	\$123.20		
76802	TC	\$60.38	\$60.38		
76802	26	\$62.82	\$62.82		
76805		\$188.46	\$188.46		
76805	TC	\$114.38	\$114.38		
76805	26	\$74.08	\$74.08		
76810		\$140.83	\$140.83		
76810	TC	\$65.70	\$65.70		
76810	26	\$75.14	\$75.14		
76811		\$351.13	\$351.13		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76811	TC	\$204.59	\$204.59		
76811	26	\$146.54	\$146.54		
76812		\$212.66	\$212.66		
76812	TC	\$75.80	\$75.80		
76812	26	\$136.86	\$136.86		
76813		\$180.24	\$180.24		
76813	TC	\$96.26	\$96.26		
76813	26	\$83.97	\$83.97		
76814		\$121.07	\$121.07		
76814	TC	\$50.54	\$50.54		
76814	26	\$70.52	\$70.52		
76815		\$125.79	\$125.79		
76815	TC	\$77.46	\$77.46		
76815	26	\$48.33	\$48.33		
76816		\$124.17	\$124.17		
76816	TC	\$60.30	\$60.30		
76816	26	\$63.87	\$63.87		
76817		\$137.95	\$137.95		
76817	TC	\$81.59	\$81.59		
76817	26	\$56.36	\$56.36		
76818		\$0.00	\$0.00		
76818	TC	\$0.00	\$0.00		
76818	26	\$0.00	\$0.00		
76819		\$146.35	\$146.35		
76819	TC	\$88.39	\$88.39		
76819	26	\$57.96	\$57.96		
76820		\$0.00	\$0.00		
76820	TC	\$0.00	\$0.00		
76820	26	\$0.00	\$0.00		
76821		\$0.00	\$0.00		
76821	TC	\$0.00	\$0.00		
76821	26	\$0.00	\$0.00		
76825		\$0.00	\$0.00		
76825	TC	\$0.00	\$0.00		
76825	26	\$0.00	\$0.00		
76826		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76826	TC	\$0.00	\$0.00		
76826	26	\$0.00	\$0.00		
76827		\$0.00	\$0.00		
76827	TC	\$0.00	\$0.00		
76827	26	\$0.00	\$0.00		
76828		\$0.00	\$0.00		
76828	TC	\$0.00	\$0.00		
76828	26	\$0.00	\$0.00		
76830		\$0.00	\$0.00		
76830	TC	\$0.00	\$0.00		
76830	26	\$0.00	\$0.00		
76831		\$137.41	\$137.41		
76831	TC	\$83.72	\$83.72		
76831	26	\$53.69	\$53.69		
76856		\$135.28	\$135.28		
76856	TC	\$83.72	\$83.72		
76856	26	\$51.56	\$51.56		
76857		\$113.69	\$113.69		
76857	TC	\$85.22	\$85.22		
76857	26	\$28.46	\$28.46		
76870		\$131.53	\$131.53		
76870	TC	\$83.72	\$83.72		
76870	26	\$47.81	\$47.81		
76872		\$154.50	\$154.50		
76872	TC	\$102.41	\$102.41		
76872	26	\$52.10	\$52.10		
76873		\$231.98	\$231.98		
76873	TC	\$116.50	\$116.50		
76873	26	\$115.48	\$115.48		
76880		\$122.03	\$122.03		
76880	TC	\$77.46	\$77.46		
76880	26	\$44.57	\$44.57		
76885		\$0.00	\$0.00		
76885	TC	\$0.00	\$0.00		
76885	26	\$0.00	\$0.00		
76886		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76886	TC	\$0.00	\$0.00		
76886	26	\$0.00	\$0.00		
76930		\$134.69	\$134.69		
76930	TC	\$83.72	\$83.72		
76930	26	\$50.97	\$50.97		
76932		\$134.69	\$134.69		
76932	TC	\$83.72	\$83.72		
76932	26	\$50.97	\$50.97		
76936		\$490.84	\$490.84		
76936	TC	\$342.06	\$342.06		
76936	26	\$148.77	\$148.77		
76937		\$49.20	\$49.20		
76937	TC	\$25.05	\$25.05		
76937	26	\$24.15	\$24.15		
76940		\$242.62	\$242.62		
76940	TC	\$93.82	\$93.82		
76940	26	\$148.80	\$148.80		
76941		\$0.00	\$0.00		
76941	TC	\$0.00	\$0.00		
76941	26	\$0.00	\$0.00		
76942		\$188.20	\$188.20		
76942	TC	\$137.71	\$137.71		
76942	26	\$50.49	\$50.49		
76945		\$0.00	\$0.00		
76945	TC	\$0.00	\$0.00		
76945	26	\$0.00	\$0.00		
76946		\$0.00	\$0.00		
76946	TC	\$0.00	\$0.00		
76946	26	\$0.00	\$0.00		
76948		\$0.00	\$0.00		
76948	TC	\$0.00	\$0.00		
76948	26	\$0.00	\$0.00		
76950		\$114.21	\$114.21		
76950	TC	\$70.70	\$70.70		
76950	26	\$43.51	\$43.51		
76965		\$401.39	\$401.39		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
76965	TC	\$302.02	\$302.02		
76965	26	\$99.37	\$99.37		
76970		\$86.74	\$86.74		
76970	TC	\$57.19	\$57.19		
76970	26	\$29.55	\$29.55		
76975		\$144.40	\$144.40		
76975	TC	\$83.72	\$83.72		
76975	26	\$60.68	\$60.68		
76977		\$49.00	\$49.00		
76977	TC	\$44.74	\$44.74		
76977	26	\$4.29	\$4.29		
76998		\$0.00	\$0.00		
76998	TC	\$0.00	\$0.00		
76998	26	\$89.80	\$89.80		
76999		BR	BR		
76999	TC	BR	BR		
76999	26	BR	BR		
77001		\$159.08	\$159.08		
77001	TC	\$132.16	\$132.16		
77001	26	\$26.91	\$26.91		
77002		\$93.29	\$93.29		
77002	TC	\$55.58	\$55.58		
77002	26	\$37.71	\$37.71		
77003		\$76.03	\$76.03		
77003	TC	\$34.52	\$34.52		
77003	26	\$41.51	\$41.51		
77011		\$1,092.55	\$1,092.55		
77011	TC	\$1,006.43	\$1,006.43		
77011	26	\$86.12	\$86.12		
77012		\$198.04	\$198.04		
77012	TC	\$115.16	\$115.16		
77012	26	\$82.88	\$82.88		
77013		\$0.00	\$0.00		
77013	TC	\$0.00	\$0.00		
77013	26	\$288.33	\$288.33		
77014		\$284.51	\$284.51		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77014	TC	\$222.15	\$222.15		
77014	26	\$62.36	\$62.36		
77021		\$588.24	\$588.24		
77021	TC	\$479.04	\$479.04		
77021	26	\$109.19	\$109.19		
77022		\$0.00	\$0.00		
77022	TC	\$0.00	\$0.00		
77022	26	\$306.68	\$306.68		
77031		\$0.00	\$0.00		
77031	TC	\$0.00	\$0.00		
77031	26	\$0.00	\$0.00		
77032		\$0.00	\$0.00		
77032	TC	\$0.00	\$0.00		
77032	26	\$0.00	\$0.00		
77051		\$0.00	\$0.00		
77051	TC	\$0.00	\$0.00		
77051	26	\$0.00	\$0.00		
77052		\$0.00	\$0.00		
77052	TC	\$0.00	\$0.00		
77052	26	\$0.00	\$0.00		
77053		\$0.00	\$0.00		
77053	TC	\$0.00	\$0.00		
77053	26	\$0.00	\$0.00		
77054		\$0.00	\$0.00		
77054	TC	\$0.00	\$0.00		
77054	26	\$0.00	\$0.00		
77055		\$0.00	\$0.00		
77055	TC	\$0.00	\$0.00		
77055	26	\$0.00	\$0.00		
77056		\$0.00	\$0.00		
77056	TC	\$0.00	\$0.00		
77056	26	\$0.00	\$0.00		
77057		\$0.00	\$0.00		
77057	TC	\$0.00	\$0.00		
77057	26	\$0.00	\$0.00		
77058		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77058	TC	\$0.00	\$0.00		
77058	26	\$0.00	\$0.00		
77059		\$0.00	\$0.00		
77059	TC	\$0.00	\$0.00		
77059	26	\$0.00	\$0.00		
77071		\$64.58	\$64.58		
77072		\$31.98	\$31.98		
77072	TC	\$18.52	\$18.52		
77072	26	\$13.46	\$13.46		
77073		\$50.78	\$50.78		
77073	TC	\$30.89	\$30.89		
77073	26	\$19.88	\$19.88		
77074		\$97.61	\$97.61		
77074	TC	\$65.33	\$65.33		
77074	26	\$32.29	\$32.29		
77075		\$144.67	\$144.67		
77075	TC	\$105.94	\$105.94		
77075	26	\$38.74	\$38.74		
77076		\$140.53	\$140.53		
77076	TC	\$91.51	\$91.51		
77076	26	\$49.02	\$49.02		
77077		\$54.01	\$54.01		
77077	TC	\$30.39	\$30.39		
77077	26	\$23.62	\$23.62		
77078		\$254.81	\$254.81		
77078	TC	\$237.04	\$237.04		
77078	26	\$17.76	\$17.76		
77079		\$52.16	\$52.16		
77079	TC	\$36.54	\$36.54		
77079	26	\$15.61	\$15.61		
77080		\$61.00	\$61.00		
77080	TC	\$46.48	\$46.48		
77080	26	\$14.52	\$14.52		
77081		\$50.62	\$50.62		
77081	TC	\$35.00	\$35.00		
77081	26	\$15.61	\$15.61		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77082		\$33.50	\$33.50		
77082	TC	\$21.13	\$21.13		
77082	26	\$12.37	\$12.37		
77083		\$33.09	\$33.09		
77083	TC	\$19.08	\$19.08		
77083	26	\$14.01	\$14.01		
77084		\$831.56	\$831.56		
77084	TC	\$715.91	\$715.91		
77084	26	\$115.65	\$115.65		
77261		\$105.74	\$105.74		
77262		\$159.42	\$159.42		
77263		\$236.20	\$236.20		
77280		\$240.29	\$240.29		
77280	TC	\$188.18	\$188.18		
77280	26	\$52.14	\$52.14		
77285		\$379.38	\$379.38		
77285	TC	\$302.55	\$302.55		
77285	26	\$76.83	\$76.83		
77290		\$467.41	\$467.41		
77290	TC	\$353.50	\$353.50		
77290	26	\$113.91	\$113.91		
77295		\$1,850.57	\$1,850.57		
77295	TC	\$1,516.37	\$1,516.37		
77295	26	\$334.21	\$334.21		
77299		BR	BR		
77299	TC	BR	BR		
77299	26	BR	BR		
77300		\$118.98	\$118.98		
77300	TC	\$72.78	\$72.78		
77300	26	\$46.20	\$46.20		
77301		\$2,092.98	\$2,092.98		
77301	TC	\$1,516.37	\$1,516.37		
77301	26	\$576.62	\$576.62		
77305		\$153.49	\$153.49		
77305	TC	\$101.38	\$101.38		
77305	26	\$52.14	\$52.14		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77310		\$203.67	\$203.67		
77310	TC	\$126.85	\$126.85		
77310	26	\$76.83	\$76.83		
77315		\$258.42	\$258.42		
77315	TC	\$144.51	\$144.51		
77315	26	\$113.91	\$113.91		
77321		\$288.67	\$288.67		
77321	TC	\$218.84	\$218.84		
77321	26	\$69.83	\$69.83		
77326		\$196.63	\$196.63		
77326	TC	\$128.41	\$128.41		
77326	26	\$68.23	\$68.23		
77327		\$290.25	\$290.25		
77327	TC	\$188.18	\$188.18		
77327	26	\$102.08	\$102.08		
77328		\$421.89	\$421.89		
77328	TC	\$268.74	\$268.74		
77328	26	\$153.14	\$153.14		
77331		\$91.50	\$91.50		
77331	TC	\$27.02	\$27.02		
77331	26	\$64.47	\$64.47		
77332		\$112.01	\$112.01		
77332	TC	\$72.78	\$72.78		
77332	26	\$39.23	\$39.23		
77333		\$165.78	\$165.78		
77333	TC	\$103.46	\$103.46		
77333	26	\$62.32	\$62.32		
77334		\$267.02	\$267.02		
77334	TC	\$176.22	\$176.22		
77334	26	\$90.80	\$90.80		
77336		\$162.19	\$162.19		
77370		\$189.22	\$189.22		
77371		\$1,560.81	\$1,560.81		
77372		\$1,184.78	\$1,184.78		
77373		\$2,209.10	\$2,209.10		
77435		\$982.50	\$982.50		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77399		BR	BR		
77399	TC	BR	BR		
77399	26	BR	BR		
77401		\$97.23	\$97.23		
77402		\$97.23	\$97.23		
77403		\$97.23	\$97.23		
77404		\$97.23	\$97.23		
77406		\$97.23	\$97.23		
77407		\$113.86	\$113.86		
77408		\$113.86	\$113.86		
77409		\$113.86	\$113.86		
77411		\$113.86	\$113.86		
77412		\$126.85	\$126.85		
77413		\$126.85	\$126.85		
77414		\$126.85	\$126.85		
77416		\$126.85	\$126.85		
77417		\$32.76	\$32.76		
77418		\$932.65	\$932.65		
77421		\$206.98	\$206.98		
77421	TC	\$177.79	\$177.79		
77421	26	\$29.19	\$29.19		
77422		\$94.73	\$94.73		
77423		\$122.95	\$122.95		
77427		\$242.86	\$242.86		
77431		\$137.37	\$137.37		
77432		\$601.60	\$601.60		
77470		\$758.24	\$758.24		
77470	TC	\$605.10	\$605.10		
77470	26	\$153.14	\$153.14		
77499		BR	BR		
77499	TC	BR	BR		
77499	26	BR	BR		
77520		BR	BR		
77522		BR	BR		
77523		BR	BR		
77525		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77600		\$280.81	\$280.81		
77600	TC	\$165.31	\$165.31		
77600	26	\$115.51	\$115.51		
77605		\$376.74	\$376.74		
77605	TC	\$220.94	\$220.94		
77605	26	\$155.80	\$155.80		
77610		\$280.27	\$280.27		
77610	TC	\$165.31	\$165.31		
77610	26	\$114.96	\$114.96		
77615		\$374.08	\$374.08		
77615	TC	\$220.94	\$220.94		
77615	26	\$153.14	\$153.14		
77620		\$280.26	\$280.26		
77620	TC	\$165.31	\$165.31		
77620	26	\$114.95	\$114.95		
77750		\$430.63	\$430.63		
77750	TC	\$72.26	\$72.26		
77750	26	\$358.37	\$358.37		
77761		\$409.37	\$409.37		
77761	TC	\$136.21	\$136.21		
77761	26	\$273.17	\$273.17		
77762		\$614.53	\$614.53		
77762	TC	\$195.46	\$195.46		
77762	26	\$419.07	\$419.07		
77763		\$870.84	\$870.84		
77763	TC	\$243.28	\$243.28		
77763	26	\$627.56	\$627.56		
77776		\$435.92	\$435.92		
77776	TC	\$118.54	\$118.54		
77776	26	\$317.38	\$317.38		
77777		\$777.32	\$777.32		
77777	TC	\$229.76	\$229.76		
77777	26	\$547.55	\$547.55		
77778		\$1,098.04	\$1,098.04		
77778	TC	\$278.10	\$278.10		
77778	26	\$819.94	\$819.94		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
77781		\$1,222.95	\$1,222.95		
77781	TC	\$1,100.99	\$1,100.99		
77781	26	\$121.95	\$121.95		
77782		\$1,283.68	\$1,283.68		
77782	TC	\$1,100.99	\$1,100.99		
77782	26	\$182.68	\$182.68		
77783		\$1,373.95	\$1,373.95		
77783	TC	\$1,100.99	\$1,100.99		
77783	26	\$272.96	\$272.96		
77784		\$1,511.50	\$1,511.50		
77784	TC	\$1,100.99	\$1,100.99		
77784	26	\$410.50	\$410.50		
77785		\$0.00	\$0.00		
77785	TC	\$0.00	\$0.00		
77785	26	\$0.00	\$0.00		
77786		\$0.00	\$0.00		
77786	TC	\$0.00	\$0.00		
77786	26	\$0.00	\$0.00		
77787		\$0.00	\$0.00		
77787	TC	\$0.00	\$0.00		
77787	26	\$0.00	\$0.00		
77789		\$106.08	\$106.08		
77789	TC	\$24.43	\$24.43		
77789	26	\$81.66	\$81.66		
77790		\$103.85	\$103.85		
77790	TC	\$27.02	\$27.02		
77790	26	\$76.83	\$76.83		
77799		BR	BR		
77799	TC	BR	BR		
77799	26	BR	BR		
78000		\$67.53	\$67.53		
78000	TC	\$53.03	\$53.03		
78000	26	\$14.49	\$14.49		
78001		\$90.03	\$90.03		
78001	TC	\$70.70	\$70.70		
78001	26	\$19.33	\$19.33		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78003		\$77.21	\$77.21		
78003	TC	\$53.03	\$53.03		
78003	26	\$24.18	\$24.18		
78006		\$165.96	\$165.96		
78006	TC	\$129.45	\$129.45		
78006	26	\$36.52	\$36.52		
78007		\$176.90	\$176.90		
78007	TC	\$139.84	\$139.84		
78007	26	\$37.06	\$37.06		
78010		\$128.83	\$128.83		
78010	TC	\$99.83	\$99.83		
78010	26	\$29.01	\$29.01		
78011		\$164.83	\$164.83		
78011	TC	\$131.00	\$131.00		
78011	26	\$33.82	\$33.82		
78015		\$190.32	\$190.32		
78015	TC	\$139.84	\$139.84		
78015	26	\$50.48	\$50.48		
78016		\$250.44	\$250.44		
78016	TC	\$188.70	\$188.70		
78016	26	\$61.74	\$61.74		
78018		\$359.19	\$359.19		
78018	TC	\$294.75	\$294.75		
78018	26	\$64.44	\$64.44		
78020		\$118.99	\$118.99		
78020	TC	\$74.42	\$74.42		
78020	26	\$44.57	\$44.57		
78070		\$161.05	\$161.05		
78070	TC	\$99.83	\$99.83		
78070	26	\$61.22	\$61.22		
78075		\$351.11	\$351.11		
78075	TC	\$294.75	\$294.75		
78075	26	\$56.36	\$56.36		
78099		BR	BR		
78099	TC	BR	BR		
78099	26	BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78102		\$152.60	\$152.60		
78102	TC	\$111.26	\$111.26		
78102	26	\$41.33	\$41.33		
78103		\$228.97	\$228.97		
78103	TC	\$172.59	\$172.59		
78103	26	\$56.38	\$56.38		
78104		\$281.59	\$281.59		
78104	TC	\$221.46	\$221.46		
78104	26	\$60.14	\$60.14		
78110		\$66.49	\$66.49		
78110	TC	\$52.00	\$52.00		
78110	26	\$14.49	\$14.49		
78111		\$156.48	\$156.48		
78111	TC	\$139.84	\$139.84		
78111	26	\$16.64	\$16.64		
78120		\$112.34	\$112.34		
78120	TC	\$95.15	\$95.15		
78120	26	\$17.18	\$17.18		
78121		\$181.13	\$181.13		
78121	TC	\$157.49	\$157.49		
78121	26	\$23.63	\$23.63		
78122		\$283.34	\$283.34		
78122	TC	\$249.52	\$249.52		
78122	26	\$33.82	\$33.82		
78130		\$200.56	\$200.56		
78130	TC	\$154.38	\$154.38		
78130	26	\$46.18	\$46.18		
78135		\$312.40	\$312.40		
78135	TC	\$264.07	\$264.07		
78135	26	\$48.33	\$48.33		
78140		\$258.78	\$258.78		
78140	TC	\$213.13	\$213.13		
78140	26	\$45.66	\$45.66		
78185		\$158.48	\$158.48		
78185	TC	\$128.41	\$128.41		
78185	26	\$30.07	\$30.07		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78190		\$393.00	\$393.00		
78190	TC	\$310.34	\$310.34		
78190	26	\$82.66	\$82.66		
78191		\$443.31	\$443.31		
78191	TC	\$397.14	\$397.14		
78191	26	\$46.18	\$46.18		
78195		\$311.12	\$311.12		
78195	TC	\$221.46	\$221.46		
78195	26	\$89.66	\$89.66		
78199		BR	BR		
78199	TC	BR	BR		
78199	26	BR	BR		
78201		\$161.17	\$161.17		
78201	TC	\$128.41	\$128.41		
78201	26	\$32.76	\$32.76		
78202		\$194.06	\$194.06		
78202	TC	\$155.94	\$155.94		
78202	26	\$38.12	\$38.12		
78205		\$373.91	\$373.91		
78205	TC	\$320.22	\$320.22		
78205	26	\$53.69	\$53.69		
78206		\$381.52	\$381.52		
78206	TC	\$309.58	\$309.58		
78206	26	\$71.94	\$71.94		
78215		\$195.57	\$195.57		
78215	TC	\$159.05	\$159.05		
78215	26	\$36.52	\$36.52		
78216		\$231.12	\$231.12		
78216	TC	\$188.70	\$188.70		
78216	26	\$42.42	\$42.42		
78220		\$238.21	\$238.21		
78220	TC	\$201.69	\$201.69		
78220	26	\$36.52	\$36.52		
78223		\$261.42	\$261.42		
78223	TC	\$198.57	\$198.57		
78223	26	\$62.84	\$62.84		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78230		\$151.85	\$151.85		
78230	TC	\$118.54	\$118.54		
78230	26	\$33.30	\$33.30		
78231		\$211.77	\$211.77		
78231	TC	\$172.59	\$172.59		
78231	26	\$39.19	\$39.19		
78232		\$226.71	\$226.71		
78232	TC	\$191.81	\$191.81		
78232	26	\$34.90	\$34.90		
78258		\$211.26	\$211.26		
78258	TC	\$155.94	\$155.94		
78258	26	\$55.32	\$55.32		
78261		\$275.62	\$275.62		
78261	TC	\$223.02	\$223.02		
78261	26	\$52.60	\$52.60		
78262		\$282.34	\$282.34		
78262	TC	\$230.80	\$230.80		
78262	26	\$51.54	\$51.54		
78264		\$283.10	\$283.10		
78264	TC	\$224.57	\$224.57		
78264	26	\$58.53	\$58.53		
78267		\$15.89	\$15.89		
78268		\$134.52	\$134.52		
78270		\$100.31	\$100.31		
78270	TC	\$85.28	\$85.28		
78270	26	\$15.03	\$15.03		
78271		\$104.98	\$104.98		
78271	TC	\$89.95	\$89.95		
78271	26	\$15.03	\$15.03		
78272		\$146.73	\$146.73		
78272	TC	\$126.33	\$126.33		
78272	26	\$20.40	\$20.40		
78278		\$337.64	\$337.64		
78278	TC	\$264.07	\$264.07		
78278	26	\$73.57	\$73.57		
78282		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78282	TC	BR	BR		
78282	26	\$28.46	\$28.46		
78290		\$216.33	\$216.33		
78290	TC	\$165.31	\$165.31		
78290	26	\$51.02	\$51.02		
78291		\$232.38	\$232.38		
78291	TC	\$166.35	\$166.35		
78291	26	\$66.03	\$66.03		
78299		BR	BR		
78299	TC	BR	BR		
78299	26	BR	BR		
78300		\$181.89	\$181.89		
78300	TC	\$135.17	\$135.17		
78300	26	\$46.72	\$46.72		
78305		\$260.34	\$260.34		
78305	TC	\$198.57	\$198.57		
78305	26	\$61.77	\$61.77		
78306		\$296.29	\$296.29		
78306	TC	\$231.84	\$231.84		
78306	26	\$64.45	\$64.45		
78315		\$334.59	\$334.59		
78315	TC	\$258.88	\$258.88		
78315	26	\$75.71	\$75.71		
78320		\$398.06	\$398.06		
78320	TC	\$320.22	\$320.22		
78320	26	\$77.84	\$77.84		
78350		\$57.20	\$57.20		
78350	TC	\$41.08	\$41.08		
78350	26	\$16.12	\$16.12		
78351		\$106.66	\$23.06		
78399		BR	BR		
78399	TC	BR	BR		
78399	26	BR	BR		
78414		BR	BR		
78414	TC	BR	BR		
78414	26	\$33.82	\$33.82		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78428		\$182.78	\$182.78		
78428	TC	\$122.70	\$122.70		
78428	26	\$60.09	\$60.09		
78445		\$137.90	\$137.90		
78445	TC	\$101.38	\$101.38		
78445	26	\$36.52	\$36.52		
78456		\$295.14	\$295.14		
78456	TC	\$220.51	\$220.51		
78456	26	\$74.63	\$74.63		
78457		\$202.50	\$202.50		
78457	TC	\$144.51	\$144.51		
78457	26	\$57.99	\$57.99		
78458		\$285.42	\$285.42		
78458	TC	\$217.80	\$217.80		
78458	26	\$67.62	\$67.62		
78459		BR	BR		
78459	TC	BR	BR		
78459	26	\$114.26	\$114.26		
78460		\$192.84	\$192.84		
78460	TC	\$128.41	\$128.41		
78460	26	\$64.44	\$64.44		
78461		\$348.09	\$348.09		
78461	TC	\$255.76	\$255.76		
78461	26	\$92.33	\$92.33		
78464		\$465.23	\$465.23		
78464	TC	\$383.64	\$383.64		
78464	26	\$81.60	\$81.60		
78465		\$749.41	\$749.41		
78465	TC	\$639.91	\$639.91		
78465	26	\$109.50	\$109.50		
78466		\$195.04	\$195.04		
78466	TC	\$142.44	\$142.44		
78466	26	\$52.60	\$52.60		
78468		\$258.71	\$258.71		
78468	TC	\$198.57	\$198.57		
78468	26	\$60.14	\$60.14		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78469		\$352.03	\$352.03		
78469	TC	\$283.84	\$283.84		
78469	26	\$68.19	\$68.19		
78472		\$373.50	\$373.50		
78472	TC	\$299.96	\$299.96		
78472	26	\$73.54	\$73.54		
78473		\$557.09	\$557.09		
78473	TC	\$447.56	\$447.56		
78473	26	\$109.53	\$109.53		
78478		\$132.49	\$132.49		
78478	TC	\$85.79	\$85.79		
78478	26	\$46.70	\$46.70		
78480		\$132.49	\$132.49		
78480	TC	\$85.79	\$85.79		
78480	26	\$46.70	\$46.70		
78481		\$357.89	\$357.89		
78481	TC	\$283.84	\$283.84		
78481	26	\$74.05	\$74.05		
78483		\$537.87	\$537.87		
78483	TC	\$426.78	\$426.78		
78483	26	\$111.08	\$111.08		
78491		BR	BR		
78491	TC	BR	BR		
78491	26	\$115.31	\$115.31		
78492		BR	BR		
78492	TC	BR	BR		
78492	26	\$143.22	\$143.22		
78494		\$468.50	\$468.50		
78494	TC	\$379.91	\$379.91		
78494	26	\$88.59	\$88.59		
78496		\$418.01	\$418.01		
78496	TC	\$379.91	\$379.91		
78496	26	\$38.10	\$38.10		
78499		BR	BR		
78499	TC	BR	BR		
78499	26	BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78580		\$241.42	\$241.42		
78580	TC	\$186.10	\$186.10		
78580	26	\$55.32	\$55.32		
78584		\$247.19	\$247.19		
78584	TC	\$174.15	\$174.15		
78584	26	\$73.05	\$73.05		
78585		\$387.28	\$387.28		
78585	TC	\$306.19	\$306.19		
78585	26	\$81.09	\$81.09		
78586		\$170.43	\$170.43		
78586	TC	\$140.88	\$140.88		
78586	26	\$29.55	\$29.55		
78587		\$188.30	\$188.30		
78587	TC	\$151.78	\$151.78		
78587	26	\$36.52	\$36.52		
78588		\$255.77	\$255.77		
78588	TC	\$174.68	\$174.68		
78588	26	\$81.09	\$81.09		
78591		\$184.45	\$184.45		
78591	TC	\$154.38	\$154.38		
78591	26	\$30.07	\$30.07		
78593		\$223.66	\$223.66		
78593	TC	\$187.14	\$187.14		
78593	26	\$36.52	\$36.52		
78594		\$308.99	\$308.99		
78594	TC	\$269.78	\$269.78		
78594	26	\$39.21	\$39.21		
78596		\$477.62	\$477.62		
78596	TC	\$383.64	\$383.64		
78596	26	\$93.99	\$93.99		
78599		BR	BR		
78599	TC	BR	BR		
78599	26	BR	BR		
78600		\$188.70	\$188.70		
78600	TC	\$155.94	\$155.94		
78600	26	\$32.76	\$32.76		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78601		\$222.67	\$222.67		
78601	TC	\$184.54	\$184.54		
78601	26	\$38.12	\$38.12		
78605		\$224.27	\$224.27		
78605	TC	\$184.54	\$184.54		
78605	26	\$39.73	\$39.73		
78606		\$257.82	\$257.82		
78606	TC	\$209.49	\$209.49		
78606	26	\$48.33	\$48.33		
78607		\$448.43	\$448.43		
78607	TC	\$356.09	\$356.09		
78607	26	\$92.33	\$92.33		
78608		BR	BR		
78609		BR	BR		
78610		\$108.86	\$108.86		
78610	TC	\$86.31	\$86.31		
78610	26	\$22.55	\$22.55		
78630		\$323.93	\$323.93		
78630	TC	\$272.91	\$272.91		
78630	26	\$51.02	\$51.02		
78635		\$184.96	\$184.96		
78635	TC	\$138.28	\$138.28		
78635	26	\$46.67	\$46.67		
78645		\$228.52	\$228.52		
78645	TC	\$186.10	\$186.10		
78645	26	\$42.42	\$42.42		
78647		\$387.32	\$387.32		
78647	TC	\$320.22	\$320.22		
78647	26	\$67.10	\$67.10		
78650		\$296.71	\$296.71		
78650	TC	\$251.60	\$251.60		
78650	26	\$45.11	\$45.11		
78660		\$154.62	\$154.62		
78660	TC	\$115.41	\$115.41		
78660	26	\$39.21	\$39.21		
78699		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78699	TC	BR	BR		
78699	26	BR	BR		
78700		\$198.61	\$198.61		
78700	TC	\$165.31	\$165.31		
78700	26	\$33.30	\$33.30		
78701		\$229.37	\$229.37		
78701	TC	\$192.85	\$192.85		
78701	26	\$36.52	\$36.52		
78707		\$313.65	\$313.65		
78707	TC	\$242.24	\$242.24		
78707	26	\$71.42	\$71.42		
78708		\$332.44	\$332.44		
78708	TC	\$242.24	\$242.24		
78708	26	\$90.21	\$90.21		
78709		\$346.96	\$346.96		
78709	TC	\$242.24	\$242.24		
78709	26	\$104.72	\$104.72		
78710		\$370.15	\$370.15		
78710	TC	\$320.22	\$320.22		
78710	26	\$49.93	\$49.93		
78725		\$125.68	\$125.68		
78725	TC	\$97.75	\$97.75		
78725	26	\$27.93	\$27.93		
78730		\$106.91	\$106.91		
78730	TC	\$79.54	\$79.54		
78730	26	\$27.38	\$27.38		
78740		\$157.32	\$157.32		
78740	TC	\$115.41	\$115.41		
78740	26	\$41.90	\$41.90		
78761		\$227.32	\$227.32		
78761	TC	\$174.15	\$174.15		
78761	26	\$53.17	\$53.17		
78799		BR	BR		
78799	TC	BR	BR		
78799	26	BR	BR		
78800		\$233.96	\$233.96		

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HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78800	TC	\$184.54	\$184.54		
78800	26	\$49.41	\$49.41		
78801		\$288.32	\$288.32		
78801	TC	\$229.25	\$229.25		
78801	26	\$59.07	\$59.07		
78802		\$365.43	\$365.43		
78802	TC	\$301.00	\$301.00		
78802	26	\$64.44	\$64.44		
78803		\$437.69	\$437.69		
78803	TC	\$356.09	\$356.09		
78803	26	\$81.60	\$81.60		
78804		\$315.55	\$315.55		
78804	TC	\$236.10	\$236.10		
78804	26	\$79.46	\$79.46		
78805		\$239.32	\$239.32		
78805	TC	\$184.54	\$184.54		
78805	26	\$54.78	\$54.78		
78806		\$413.78	\$413.78		
78806	TC	\$349.35	\$349.35		
78806	26	\$64.44	\$64.44		
78807		\$438.21	\$438.21		
78807	TC	\$356.09	\$356.09		
78807	26	\$82.11	\$82.11		
78808		\$0.00	\$0.00		
78811		BR	BR		
78811	TC	BR	BR		
78811	26	\$90.60	\$90.60		
78812		BR	BR		
78812	TC	BR	BR		
78812	26	\$112.05	\$112.05		
78813		BR	BR		
78813	TC	BR	BR		
78813	26	\$115.90	\$115.90		
78814		BR	BR		
78814	TC	BR	BR		
78814	26	\$126.90	\$126.90		

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2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
78815		BR	BR		
78815	TC	BR	BR		
78815	26	\$140.10	\$140.10		
78816		BR	BR		
78816	TC	BR	BR		
78816	26	\$143.40	\$143.40		
78999		BR	BR		
78999	TC	BR	BR		
78999	26	BR	BR		
79005		\$276.93	\$276.93		
79005	TC	\$142.68	\$142.68		
79005	26	\$134.25	\$134.25		
79101		\$289.34	\$289.34		
79101	TC	\$142.68	\$142.68		
79101	26	\$146.66	\$146.66		
79200		\$290.11	\$290.11		
79200	TC	\$142.44	\$142.44		
79200	26	\$147.67	\$147.67		
79300		BR	BR		
79300	TC	BR	BR		
79300	26	\$120.25	\$120.25		
79403		\$401.87	\$401.87		
79403	TC	\$227.59	\$227.59		
79403	26	\$174.29	\$174.29		
79440		\$293.25	\$293.25		
79440	TC	\$142.44	\$142.44		
79440	26	\$150.81	\$150.81		
79445		\$324.50	\$324.50		
79445	TC	\$143.75	\$143.75		
79445	26	\$180.75	\$180.75		
79999		BR	BR		
79999	TC	BR	BR		
79999	26	BR	BR		
80047		\$0.00	\$0.00		
80048		\$10.14	\$10.14		
80050		\$71.18	\$71.18		

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2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
80051		\$6.26	\$6.26		
80053		\$20.75	\$20.75		
80055		\$0.00	\$0.00		
80061		\$25.39	\$25.39		
80069		\$12.00	\$12.00		
80074		\$62.89	\$62.89		
80076		\$8.73	\$8.73		
80100		\$16.97	\$16.97		
80101		\$27.76	\$27.76		
80102		\$26.70	\$26.70		
80103		\$0.00	\$0.00		
80150		\$30.37	\$30.37		
80152		\$36.08	\$36.08		
80154		\$37.28	\$37.28		
80156		\$29.34	\$29.34		
80157		\$19.51	\$19.51		
80158		\$36.39	\$36.39		
80160		\$34.69	\$34.69		
80162		\$26.77	\$26.77		
80164		\$18.82	\$18.82		
80166		\$31.24	\$31.24		
80168		\$32.93	\$32.93		
80170		\$33.03	\$33.03		
80172		\$32.84	\$32.84		
80173		\$28.57	\$28.57		
80174		\$34.49	\$34.49		
80176		\$29.61	\$29.61		
80178		\$13.32	\$13.32		
80182		\$18.82	\$18.82		
80184		\$18.39	\$18.39		
80185		\$26.72	\$26.72		
80186		\$27.75	\$27.75		
80188		\$33.44	\$33.44		
80190		\$33.75	\$33.75		
80192		\$33.75	\$33.75		
80194		\$29.42	\$29.42		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
80195		BR	BR		
80196		\$14.30	\$14.30		
80197		\$18.97	\$18.97		
80198		\$28.53	\$28.53		
80200		\$32.49	\$32.49		
80201		\$16.48	\$16.48		
80202		\$18.82	\$18.82		
80299		\$20.77	\$20.77		
80400		\$65.72	\$65.72		
80402		\$175.20	\$175.20		
80406		\$157.71	\$157.71		
80408		\$233.25	\$233.25		
80410		\$161.92	\$161.92		
80412		\$664.30	\$664.30		
80414		\$79.95	\$79.95		
80415		\$112.63	\$112.63		
80416		\$206.95	\$206.95		
80417		\$68.98	\$68.98		
80418		\$1,168.04	\$1,168.04		
80420		\$145.18	\$145.18		
80422		\$92.87	\$92.87		
80424		\$0.00	\$0.00		
80426		\$0.00	\$0.00		
80428		\$0.00	\$0.00		
80430		\$0.00	\$0.00		
80432		\$267.00	\$267.00		
80434		\$203.84	\$203.84		
80435		\$0.00	\$0.00		
80436		\$183.72	\$183.72		
80438		\$101.56	\$101.56		
80439		\$135.41	\$135.41		
80440		\$117.15	\$117.15		
80500		\$21.13	\$21.13		
80502		\$61.67	\$61.67		
81000		\$6.38	\$6.38		
81001		\$6.38	\$6.38		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
81002		\$4.63	\$4.63		
81003		\$4.52	\$4.52		
81005		\$4.37	\$4.37		
81007		\$5.18	\$5.18		
81015		\$6.12	\$6.12		
81020		\$7.43	\$7.43		
81025		\$12.75	\$12.75		
81050		\$6.05	\$6.05		
81099		BR	BR		
82000		\$24.98	\$24.98		
82003		\$40.78	\$40.78		
82009		\$6.72	\$6.72		
82010		\$14.91	\$14.91		
82013		\$22.51	\$22.51		
82016		\$19.16	\$19.16		
82017		\$23.31	\$23.31		
82024		\$77.86	\$77.86		
82030		\$52.00	\$52.00		
82040		\$9.98	\$9.98		
82042		\$10.42	\$10.42		
82043		\$11.67	\$11.67		
82044		\$9.23	\$9.23		
82045		BR	BR		
82055		\$0.00	\$0.00		
82075		\$0.00	\$0.00		
82085		\$19.57	\$19.57		
82088		\$82.18	\$82.18		
82101		\$0.00	\$0.00		
82103		\$27.07	\$27.07		
82104		\$29.14	\$29.14		
82105		\$33.81	\$33.81		
82106		\$33.81	\$33.81		
82107		BR	BR		
82108		\$51.36	\$51.36		
82120		\$0.00	\$0.00		
82127		\$19.16	\$19.16		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
82128		\$27.95	\$27.95		
82131		\$33.99	\$33.99		
82135		\$29.95	\$29.95		
82136		\$23.31	\$23.31		
82139		\$23.31	\$23.31		
82140		\$29.37	\$29.37		
82143		\$0.00	\$0.00		
82145		\$0.00	\$0.00		
82150		\$13.06	\$13.06		
82154		\$58.12	\$58.12		
82157		\$59.00	\$59.00		
82160		\$50.41	\$50.41		
82163		\$41.38	\$41.38		
82164		\$29.42	\$29.42		
82172		\$31.23	\$31.23		
82175		\$29.95	\$29.95		
82180		\$19.92	\$19.92		
82190		\$30.05	\$30.05		
82205		\$0.00	\$0.00		
82232		\$28.49	\$28.49		
82239		\$34.52	\$34.52		
82240		\$53.56	\$53.56		
82247		\$5.57	\$5.57		
82248		\$5.57	\$5.57		
82252		\$9.16	\$9.16		
82261		\$23.31	\$23.31		
82270		\$5.10	\$5.10		
82271		BR	BR		
82272		BR	BR		
82274		BR	BR		
82286		\$13.87	\$13.87		
82300		\$46.63	\$46.63		
82306		\$59.65	\$59.65		
82307		\$64.95	\$64.95		
82308		\$53.97	\$53.97		
82310		\$10.38	\$10.38		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
82330		\$27.55	\$27.55		
82331		\$10.42	\$10.42		
82340		\$12.17	\$12.17		
82355		\$17.17	\$17.17		
82360		\$22.83	\$22.83		
82365		\$25.99	\$25.99		
82370		\$22.83	\$22.83		
82373		\$14.13	\$14.13		
82374		\$9.85	\$9.85		
82375		\$22.83	\$22.83		
82376		\$12.07	\$12.07		
82378		\$0.00	\$0.00		
82379		\$23.31	\$23.31		
82380		\$18.59	\$18.59		
82382		\$34.65	\$34.65		
82383		\$50.51	\$50.51		
82384		\$50.89	\$50.89		
82387		\$41.93	\$41.93		
82390		\$21.66	\$21.66		
82397		\$28.49	\$28.49		
82415		\$25.53	\$25.53		
82435		\$9.26	\$9.26		
82436		\$10.14	\$10.14		
82438		\$9.85	\$9.85		
82441		\$12.10	\$12.10		
82465		\$8.78	\$8.78		
82480		\$15.89	\$15.89		
82482		\$15.49	\$15.49		
82485		\$41.62	\$41.62		
82486		\$36.39	\$36.39		
82487		\$32.18	\$32.18		
82488		\$43.05	\$43.05		
82489		\$37.28	\$37.28		
82491		\$36.39	\$36.39		
82492		\$24.96	\$24.96		
82495		\$40.88	\$40.88		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
82507		\$56.05	\$56.05		
82520		\$0.00	\$0.00		
82523		\$25.83	\$25.83		
82525		\$25.02	\$25.02		
82528		\$45.37	\$45.37		
82530		\$33.68	\$33.68		
82533		\$32.86	\$32.86		
82540		\$8.96	\$8.96		
82541		\$24.96	\$24.96		
82542		\$24.96	\$24.96		
82543		\$24.96	\$24.96		
82544		\$24.96	\$24.96		
82550		\$13.14	\$13.14		
82552		\$26.99	\$26.99		
82553		\$17.85	\$17.85		
82554		\$23.91	\$23.91		
82565		\$10.32	\$10.32		
82570		\$10.42	\$10.42		
82575		\$19.04	\$19.04		
82585		\$7.85	\$7.85		
82595		\$13.05	\$13.05		
82600		\$37.60	\$37.60		
82607		\$30.37	\$30.37		
82608		\$28.87	\$28.87		
82610		\$0.00	\$0.00		
82615		\$14.60	\$14.60		
82626		\$50.94	\$50.94		
82627		\$44.82	\$44.82		
82633		\$62.44	\$62.44		
82634		\$59.00	\$59.00		
82638		\$24.68	\$24.68		
82646		\$41.62	\$41.62		
82649		\$51.80	\$51.80		
82651		\$52.03	\$52.03		
82652		\$77.57	\$77.57		
82654		\$27.90	\$27.90		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
82656		BR	BR		
82657		\$24.96	\$24.96		
82658		\$24.96	\$24.96		
82664		\$69.24	\$69.24		
82666		\$37.60	\$37.60		
82668		\$37.89	\$37.89		
82670		\$56.32	\$56.32		
82671		\$65.09	\$65.09		
82672		\$43.71	\$43.71		
82677		\$48.75	\$48.75		
82679		\$39.97	\$39.97		
82690		\$31.86	\$31.86		
82693		\$30.02	\$30.02		
82696		\$47.54	\$47.54		
82705		\$3.11	\$3.11		
82710		\$33.85	\$33.85		
82715		\$34.69	\$34.69		
82725		\$26.84	\$26.84		
82726		\$24.96	\$24.96		
82728		\$27.45	\$27.45		
82731		\$0.00	\$0.00		
82735		\$37.37	\$37.37		
82742		\$39.90	\$39.90		
82746		\$29.64	\$29.64		
82747		\$34.90	\$34.90		
82757		\$0.00	\$0.00		
82759		\$22.63	\$22.63		
82760		\$22.56	\$22.56		
82775		\$42.46	\$42.46		
82776		\$16.90	\$16.90		
82784		\$18.74	\$18.74		
82785		\$33.20	\$33.20		
82787		\$64.65	\$64.65		
82800		\$17.07	\$17.07		
82803		\$39.01	\$39.01		
82805		\$57.18	\$57.18		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
82810		\$17.59	\$17.59		
82820		\$17.99	\$17.99		
82926		\$10.99	\$10.99		
82928		\$13.19	\$13.19		
82938		\$35.67	\$35.67		
82941		\$35.54	\$35.54		
82943		\$28.80	\$28.80		
82945		\$7.70	\$7.70		
82946		\$24.81	\$24.81		
82947		\$7.91	\$7.91		
82948		\$6.38	\$6.38		
82950		\$9.57	\$9.57		
82951		\$19.18	\$19.18		
82952		\$7.48	\$7.48		
82953		\$30.53	\$30.53		
82955		\$8.95	\$8.95		
82960		\$12.21	\$12.21		
82962		\$6.38	\$6.38		
82963		\$8.95	\$8.95		
82965		\$8.95	\$8.95		
82975		\$31.91	\$31.91		
82977		\$14.50	\$14.50		
82978		\$24.30	\$24.30		
82979		\$13.87	\$13.87		
82980		\$36.92	\$36.92		
82985		\$10.39	\$10.39		
83001		\$37.46	\$37.46		
83002		\$37.33	\$37.33		
83003		\$0.00	\$0.00		
83008		\$33.84	\$33.84		
83009		BR	BR		
83010		\$25.35	\$25.35		
83012		\$31.96	\$31.96		
83013		\$90.09	\$90.09		
83014		\$10.86	\$10.86		
83015		\$25.02	\$25.02		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
83018		\$44.26	\$44.26		
83020		\$55.00	\$55.00		
83021		\$24.96	\$24.96		
83026		\$4.76	\$4.76		
83030		\$14.98	\$14.98		
83033		\$12.01	\$12.01		
83036		\$19.57	\$19.57		
83037		BR	BR		
83045		\$10.00	\$10.00		
83050		\$14.77	\$14.77		
83051		\$14.73	\$14.73		
83055		\$9.91	\$9.91		
83060		\$16.67	\$16.67		
83065		\$13.87	\$13.87		
83068		\$17.07	\$17.07		
83069		\$7.95	\$7.95		
83070		\$6.04	\$6.04		
83071		\$13.86	\$13.86		
83080		\$23.31	\$23.31		
83088		\$59.51	\$59.51		
83090		\$33.10	\$33.10		
83150		\$39.01	\$39.01		
83491		\$35.30	\$35.30		
83497		\$25.99	\$25.99		
83498		\$54.74	\$54.74		
83499		\$50.79	\$50.79		
83500		\$27.87	\$27.87		
83505		\$26.88	\$26.88		
83516		\$23.26	\$23.26		
83518		\$17.10	\$17.10		
83519		\$27.22	\$27.22		
83520		\$26.10	\$26.10		
83525		\$23.05	\$23.05		
83527		\$26.10	\$26.10		
83528		\$32.05	\$32.05		
83540		\$13.06	\$13.06		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
83550		\$17.61	\$17.61		
83570		\$17.84	\$17.84		
83582		\$28.57	\$28.57		
83586		\$25.80	\$25.80		
83593		\$53.01	\$53.01		
83605		\$21.51	\$21.51		
83615		\$12.17	\$12.17		
83625		\$25.79	\$25.79		
83630		BR	BR		
83631		BR	BR		
83632		\$0.00	\$0.00		
83633		\$11.09	\$11.09		
83634		\$14.60	\$14.60		
83655		\$24.40	\$24.40		
83661		\$0.00	\$0.00		
83662		\$0.00	\$0.00		
83663		\$0.00	\$0.00		
83664		\$0.00	\$0.00		
83670		\$18.46	\$18.46		
83690		\$13.87	\$13.87		
83695		BR	BR		
83698		BR	BR		
83700		BR	BR		
83701		BR	BR		
83704		BR	BR		
83718		\$16.50	\$16.50		
83719		\$23.44	\$23.44		
83721		\$19.23	\$19.23		
83727		\$34.65	\$34.65		
83735		\$11.32	\$11.32		
83775		\$14.87	\$14.87		
83785		\$49.56	\$49.56		
83788		\$24.96	\$24.96		
83789		\$24.96	\$24.96		
83805		\$35.53	\$35.53		
83825		\$32.76	\$32.76		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
83835		\$34.15	\$34.15		
83840		\$0.00	\$0.00		
83857		\$21.66	\$21.66		
83858		\$29.88	\$29.88		
83864		\$10.39	\$10.39		
83866		\$19.85	\$19.85		
83872		\$11.81	\$11.81		
83873		\$34.68	\$34.68		
83874		\$26.01	\$26.01		
83876		\$23.64	\$23.64		
83880		\$67.35	\$67.35		
83883		\$27.41	\$27.41		
83885		\$49.39	\$49.39		
83887		\$0.00	\$0.00		
83890		\$8.08	\$8.08		
83891		\$5.54	\$5.54		
83892		\$8.08	\$8.08		
83893		\$5.54	\$5.54		
83894		\$8.08	\$8.08		
83896		\$8.08	\$8.08		
83897		\$5.54	\$5.54		
83898		\$23.17	\$23.17		
83900		BR	BR		
83901		\$23.17	\$23.17		
83902		\$19.61	\$19.61		
83903		\$23.17	\$23.17		
83904		\$23.17	\$23.17		
83905		\$23.17	\$23.17		
83906		\$23.17	\$23.17		
83907		BR	BR		
83908		BR	BR		
83909		BR	BR		
83912		\$5.54	\$5.54		
83912	26	\$21.13	\$21.13		
83913		BR	BR		
83914		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
83915		\$22.48	\$22.48		
83916		\$40.53	\$40.53		
83918		\$33.17	\$33.17		
83919		\$22.75	\$22.75		
83921		\$32.31	\$32.31		
83925		\$31.42	\$31.42		
83930		\$13.32	\$13.32		
83935		\$13.32	\$13.32		
83937		\$60.17	\$60.17		
83945		\$25.96	\$25.96		
83950		BR	BR		
83951		\$117.55	\$117.55		
83970		\$83.18	\$83.18		
83986		\$7.21	\$7.21		
83992		\$0.00	\$0.00		
83993		\$0.00	\$0.00		
84022		\$31.40	\$31.40		
84030		\$0.00	\$0.00		
84035		\$0.00	\$0.00		
84060		\$14.88	\$14.88		
84061		\$15.95	\$15.95		
84066		\$19.47	\$19.47		
84075		\$10.42	\$10.42		
84078		\$14.71	\$14.71		
84080		\$29.81	\$29.81		
84081		\$33.30	\$33.30		
84085		\$12.06	\$12.06		
84087		\$20.80	\$20.80		
84100		\$9.56	\$9.56		
84105		\$10.42	\$10.42		
84106		\$8.63	\$8.63		
84110		\$17.03	\$17.03		
84119		\$14.98	\$14.98		
84120		\$29.65	\$29.65		
84126		\$51.33	\$51.33		
84127		\$23.49	\$23.49		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
84132		\$9.26	\$9.26		
84133		\$8.66	\$8.66		
84134		\$29.39	\$29.39		
84135		\$0.00	\$0.00		
84138		\$38.16	\$38.16		
84140		\$41.68	\$41.68		
84143		\$45.99	\$45.99		
84144		\$37.60	\$37.60		
84146		\$39.05	\$39.05		
84150		\$50.31	\$50.31		
84152		\$0.00	\$0.00		
84153		\$0.00	\$0.00		
84154		\$0.00	\$0.00		
84155		\$7.38	\$7.38		
84156		BR	BR		
84157		BR	BR		
84160		\$10.42	\$10.42		
84163		BR	BR		
84165		\$14.84	\$14.84		
84165	26	\$21.13	\$21.13		
84166		BR	BR		
84166	26	BR	BR		
84181		\$21.12	\$21.12		
84181	26	\$21.13	\$21.13		
84182		\$24.87	\$24.87		
84182	26	\$21.13	\$21.13		
84202		\$28.93	\$28.93		
84203		\$17.34	\$17.34		
84206		\$35.91	\$35.91		
84207		\$56.62	\$56.62		
84210		\$21.88	\$21.88		
84220		\$19.01	\$19.01		
84228		\$12.06	\$12.06		
84233		\$129.80	\$129.80		
84234		\$130.74	\$130.74		
84235		\$105.46	\$105.46		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
84238		\$73.70	\$73.70		
84244		\$34.49	\$34.49		
84252		\$40.78	\$40.78		
84255		\$51.46	\$51.46		
84260		\$62.44	\$62.44		
84270		\$37.60	\$37.60		
84275		\$27.07	\$27.07		
84285		\$47.46	\$47.46		
84295		\$9.68	\$9.68		
84300		\$9.80	\$9.80		
84302		\$9.64	\$9.64		
84305		\$42.84	\$42.84		
84307		\$36.85	\$36.85		
84311		\$14.04	\$14.04		
84315		\$5.06	\$5.06		
84375		\$39.50	\$39.50		
84376		\$7.61	\$7.61		
84377		\$7.61	\$7.61		
84378		\$10.28	\$10.28		
84379		\$10.28	\$10.28		
84392		\$9.57	\$9.57		
84402		\$0.00	\$0.00		
84403		\$0.00	\$0.00		
84425		\$42.80	\$42.80		
84430		\$14.98	\$14.98		
84432		\$32.38	\$32.38		
84436		\$13.86	\$13.86		
84437		\$13.05	\$13.05		
84439		\$18.18	\$18.18		
84442		\$29.81	\$29.81		
84443		\$33.85	\$33.85		
84445		\$102.50	\$102.50		
84446		\$28.57	\$28.57		
84449		\$36.27	\$36.27		
84450		\$10.41	\$10.41		
84460		\$10.68	\$10.68		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
84466		\$23.80	\$23.80		
84478		\$11.59	\$11.59		
84479		\$13.05	\$13.05		
84480		\$28.57	\$28.57		
84481		\$34.15	\$34.15		
84482		\$31.77	\$31.77		
84484		\$13.60	\$13.60		
84485		\$15.14	\$15.14		
84488		\$14.71	\$14.71		
84490		\$15.34	\$15.34		
84510		\$20.97	\$20.97		
84512		\$10.00	\$10.00		
84520		\$7.95	\$7.95		
84525		\$7.58	\$7.58		
84540		\$9.57	\$9.57		
84545		\$13.31	\$13.31		
84550		\$9.10	\$9.10		
84560		\$9.57	\$9.57		
84577		\$3.45	\$3.45		
84578		\$6.55	\$6.55		
84580		\$14.30	\$14.30		
84583		\$5.65	\$5.65		
84585		\$31.24	\$31.24		
84586		\$71.20	\$71.20		
84588		\$68.42	\$68.42		
84590		\$23.36	\$23.36		
84591		\$22.75	\$22.75		
84597		\$27.63	\$27.63		
84600		\$32.29	\$32.29		
84620		\$19.18	\$19.18		
84630		\$22.96	\$22.96		
84681		\$40.88	\$40.88		
84702		\$30.83	\$30.83		
84703		\$15.14	\$15.14		
84704		\$0.00	\$0.00		
84830		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
84999		BR	BR		
85002		\$9.07	\$9.07		
85004		\$12.84	\$12.84		
85007		\$6.94	\$6.94		
85008		\$3.11	\$3.11		
85009		\$7.48	\$7.48		
85013		\$4.77	\$4.77		
85014		\$4.77	\$4.77		
85018		\$4.77	\$4.77		
85025		\$15.68	\$15.68		
85027		\$13.05	\$13.05		
85032		\$8.53	\$8.53		
85041		\$5.65	\$5.65		
85044		\$8.66	\$8.66		
85045		\$8.07	\$8.07		
85046		\$7.72	\$7.72		
85048		\$5.13	\$5.13		
85049		\$8.88	\$8.88		
85055		BR	BR		
85060		\$25.19	\$25.19		
85097		\$53.28	\$53.28		
85130		\$23.97	\$23.97		
85170		\$3.11	\$3.11		
85175		\$9.16	\$9.16		
85210		\$8.95	\$8.95		
85220		\$8.95	\$8.95		
85230		\$8.95	\$8.95		
85240		\$8.95	\$8.95		
85244		\$8.95	\$8.95		
85245		\$46.25	\$46.25		
85246		\$46.25	\$46.25		
85247		\$8.95	\$8.95		
85250		\$8.95	\$8.95		
85260		\$8.95	\$8.95		
85270		\$8.95	\$8.95		
85280		\$8.95	\$8.95		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
85290		\$18.08	\$18.08		
85291		\$17.92	\$17.92		
85292		\$38.17	\$38.17		
85293		\$38.17	\$38.17		
85300		\$23.88	\$23.88		
85301		\$21.80	\$21.80		
85302		\$24.23	\$24.23		
85303		\$27.87	\$27.87		
85305		\$23.36	\$23.36		
85306		\$30.89	\$30.89		
85307		\$30.08	\$30.08		
85335		\$25.96	\$25.96		
85337		\$21.02	\$21.02		
85345		\$8.66	\$8.66		
85347		\$8.58	\$8.58		
85348		\$7.50	\$7.50		
85360		\$14.98	\$14.98		
85362		\$13.87	\$13.87		
85366		\$17.35	\$17.35		
85370		\$22.89	\$22.89		
85378		\$13.37	\$13.37		
85379		\$20.50	\$20.50		
85380		\$20.19	\$20.19		
85384		\$17.11	\$17.11		
85385		\$17.11	\$17.11		
85390		\$7.13	\$7.13		
85390	26	\$21.13	\$21.13		
85396		BR	BR		
85397		\$41.89	\$41.89		
85400		\$14.98	\$14.98		
85410		\$14.98	\$14.98		
85415		\$18.08	\$18.08		
85420		\$13.18	\$13.18		
85421		\$14.98	\$14.98		
85441		\$6.04	\$6.04		
85445		\$13.50	\$13.50		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
85460		\$15.59	\$15.59		
85461		\$11.86	\$11.86		
85475		\$9.13	\$9.13		
85520		\$26.38	\$26.38		
85525		\$17.99	\$17.99		
85530		\$28.57	\$28.57		
85536		\$9.13	\$9.13		
85540		\$17.34	\$17.34		
85547		\$17.34	\$17.34		
85549		\$37.80	\$37.80		
85555		\$13.46	\$13.46		
85557		\$22.63	\$22.63		
85576		\$13.77	\$13.77		
85576	26	\$21.13	\$21.13		
85597		\$36.22	\$36.22		
85610		\$7.92	\$7.92		
85611		\$7.94	\$7.94		
85612		\$11.32	\$11.32		
85613		\$11.32	\$11.32		
85635		\$11.32	\$11.32		
85651		\$7.16	\$7.16		
85652		\$5.37	\$5.37		
85660		\$11.13	\$11.13		
85670		\$9.13	\$9.13		
85675		\$13.82	\$13.82		
85705		\$19.41	\$19.41		
85730		\$12.10	\$12.01		
85732		\$13.05	\$13.05		
85810		\$23.54	\$23.54		
85999		BR	BR		
86000		\$14.07	\$14.07		
86001		\$10.25	\$10.25		
86003		\$10.52	\$10.52		
86005		\$14.84	\$14.84		
86021		\$30.33	\$30.33		
86022		\$37.02	\$37.02		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86023		\$25.11	\$25.11		
86038		\$24.35	\$24.35		
86039		\$22.51	\$22.51		
86060		\$14.71	\$14.71		
86063		\$11.64	\$11.64		
86077		\$46.16	\$46.16		
86078		\$47.57	\$47.57		
86079		\$47.22	\$47.22		
86140		\$10.42	\$10.42		
86141		BR	BR		
86146		\$46.77	\$46.77		
86147		\$46.77	\$46.77		
86148		\$22.20	\$22.20		
86155		\$32.21	\$32.21		
86156		\$11.25	\$11.25		
86157		\$16.26	\$16.26		
86160		\$24.20	\$24.20		
86161		\$24.20	\$24.20		
86162		\$40.94	\$40.94		
86171		\$20.19	\$20.19		
86185		\$18.03	\$18.03		
86200		BR	BR		
86215		\$26.71	\$26.71		
86225		\$27.69	\$27.69		
86226		\$24.40	\$24.40		
86235		\$36.14	\$36.14		
86243		\$34.49	\$34.49		
86255		\$16.66	\$16.66		
86255	26	\$21.13	\$21.13		
86256		\$16.66	\$16.66		
86256	26	\$21.13	\$21.13		
86277		\$31.72	\$31.72		
86280		\$16.50	\$16.50		
86294		BR	BR		
86300		<del>\$28.06</del>	<del>\$28.06</del>		
86301		<del>\$28.06</del>	<del>\$28.06</del>		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP/CS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86304		<del>\$28.06</del>	<del>\$28.06</del>		
86308		\$10.42	\$10.42		
86309		\$13.05	\$13.05		
86310		\$14.87	\$14.87		
86316		<del>\$28.06</del>	<del>\$28.06</del>		
86317		\$30.22	\$30.22		
86318		\$26.10	\$26.10		
86320		\$30.98	\$30.98		
86320	26	\$21.13	\$21.13		
86325		\$30.90	\$30.90		
86325	26	\$21.13	\$21.13		
86327		\$31.35	\$31.35		
86327	26	\$22.99	\$22.99		
86329		\$28.30	\$28.30		
86331		\$24.15	\$24.15		
86332		\$49.13	\$49.13		
86334		\$30.87	\$30.87		
86334	26	\$21.13	\$21.13		
86335		BR	BR		
86336		BR	BR		
86337		\$43.15	\$43.15		
86340		\$30.37	\$30.37		
86341		\$35.09	\$35.09		
86343		\$25.12	\$25.12		
86344		\$16.10	\$16.10		
86353		\$98.80	\$98.80		
86355		BR	BR		
86356		\$0.00	\$0.00		
86357		BR	BR		
86359		\$76.03	\$76.03		
86360		\$94.69	\$94.69		
86361		\$37.00	\$37.00		
86367		BR	BR		
86376		\$29.32	\$29.32		
86378		\$26.10	\$26.10		
86382		\$34.07	\$34.07		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86384		\$22.96	\$22.96		
86403		\$20.53	\$20.53		
86406		\$11.86	\$11.86		
86430		\$11.45	\$11.45		
86431		\$11.15	\$11.15		
86480		BR	BR		
86485		\$7.00	\$7.00		
86486		\$0.00	\$0.00		
86490		\$10.63	\$10.63		
86510		\$11.33	\$11.33		
86580		\$9.22	\$9.22		
86590		\$22.24	\$22.24		
86592		\$8.61	\$8.61		
86593		\$8.88	\$8.88		
86602		\$20.50	\$20.50		
86603		\$25.94	\$25.94		
86606		\$26.98	\$26.98		
86609		\$25.97	\$25.97		
86611		\$19.97	\$19.97		
86612		\$26.01	\$26.01		
86615		\$26.58	\$26.58		
86617		\$31.21	\$31.21		
86618		\$34.34	\$34.34		
86619		\$26.97	\$26.97		
86622		\$18.01	\$18.01		
86625		\$26.44	\$26.44		
86628		\$24.21	\$24.21		
86631		\$23.84	\$23.84		
86632		\$25.59	\$25.59		
86635		\$23.12	\$23.12		
86638		\$24.44	\$24.44		
86641		\$26.98	\$26.98		
86644		\$29.01	\$29.01		
86645		\$33.95	\$33.95		
86648		\$26.98	\$26.98		
86651		\$26.58	\$26.58		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86652		\$26.58	\$26.58		
86653		\$26.58	\$26.58		
86654		\$26.58	\$26.58		
86658		\$26.27	\$26.27		
86663		\$26.44	\$26.44		
86664		\$26.98	\$26.98		
86665		\$26.98	\$26.98		
86666		\$19.97	\$19.97		
86668		\$20.97	\$20.97		
86671		\$24.71	\$24.71		
86674		\$29.66	\$29.66		
86677		\$29.25	\$29.25		
86682		\$26.21	\$26.21		
86684		\$31.94	\$31.94		
86687		\$16.91	\$16.91		
86688		\$28.24	\$28.24		
86689		\$39.01	\$39.01		
86692		\$34.59	\$34.59		
86694		\$29.04	\$29.04		
86695		\$26.58	\$26.58		
86696		\$37.99	\$37.99		
86698		\$25.21	\$25.21		
86701		\$17.91	\$17.91		
86702		\$27.25	\$27.25		
86703		\$27.65	\$27.65		
86704		\$23.66	\$23.66		
86705		\$16.27	\$16.27		
86706		\$14.84	\$14.84		
86707		\$15.98	\$15.98		
86708		\$17.12	\$17.12		
86709		\$22.08	\$22.08		
86710		\$27.32	\$27.32		
86713		\$30.84	\$30.84		
86717		\$24.69	\$24.69		
86720		\$26.58	\$26.58		
86723		\$26.58	\$26.58		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86727		\$25.94	\$25.94		
86729		<del>\$24.08</del>	<del>\$24.08</del>		
86732		<del>\$26.58</del>	<del>\$26.58</del>		
86735		<del>\$26.30</del>	<del>\$26.30</del>		
86738		\$26.70	\$26.70		
86741		<del>\$26.58</del>	<del>\$26.58</del>		
86744		\$26.58	\$26.58		
86747		\$30.29	\$30.29		
86750		\$26.58	\$26.58		
86753		\$24.98	\$24.98		
86756		\$25.97	\$25.97		
86757		<del>\$37.99</del>	<del>\$37.99</del>		
86759		\$26.58	\$26.58		
86762		<del>\$29.04</del>	<del>\$29.04</del>		
86765		<del>\$25.97</del>	<del>\$25.97</del>		
86768		\$26.58	\$26.58		
86771		\$26.58	\$26.58		
86774		\$29.82	\$29.82		
86777		\$29.01	\$29.01		
86778		\$29.02	\$29.02		
86781		<del>\$26.68</del>	<del>\$26.68</del>		
86784		<del>\$25.32</del>	<del>\$25.32</del>		
86787		<del>\$25.97</del>	<del>\$25.97</del>		
86788		BR	BR		
86789		BR	BR		
86790		\$25.97	\$25.97		
86793		\$26.58	\$26.58		
86800		\$32.05	\$32.05		
86803		\$25.86	\$25.86		
86804		\$30.39	\$30.39		
86805		\$105.38	\$105.38		
86806		\$95.91	\$95.91		
86807		\$79.75	\$79.75		
86808		\$59.82	\$59.82		
86812		\$52.00	\$52.00		
86813		\$116.87	\$116.87		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86816		\$56.15	\$56.15		
86817		\$129.76	\$129.76		
86821		\$63.35	\$63.35		
86822		\$63.35	\$63.35		
86849		BR	BR		
86850		\$16.81	\$16.81		
86860		\$42.54	\$42.54		
86870		\$35.63	\$35.63		
86880		\$10.82	\$10.82		
86885		\$11.53	\$11.53		
86886		\$10.42	\$10.42		
86890		BR	BR		
86891		\$56.00	\$56.00		
86900		\$6.01	\$6.01		
86901		\$9.88	\$9.88		
86903		\$19.03	\$19.03		
86904		\$19.16	\$19.16		
86905		\$7.71	\$7.71		
86906		\$15.62	\$15.62		
86910		\$0.00	\$0.00		
86911		\$0.00	\$0.00		
86920		\$33.84	\$33.84		
86921		\$33.84	\$33.84		
86922		\$33.84	\$33.84		
86923		BR	BR		
86927		\$13.86	\$13.86		
86930		\$33.84	\$33.84		
86931		\$51.06	\$51.06		
86932		\$67.66	\$67.66		
86940		\$16.53	\$16.53		
86941		\$24.40	\$24.40		
86945		\$16.63	\$16.63		
86950		\$45.10	\$45.10		
86960		BR	BR		
86965		\$15.00	\$15.00		
86970		\$22.76	\$22.76		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
86971		\$22.76	\$22.76		
86972		\$27.70	\$27.70		
86975		\$22.76	\$22.76		
86976		\$22.76	\$22.76		
86977		\$22.76	\$22.76		
86978		\$27.70	\$27.70		
86985		BR	BR		
86999		BR	BR		
87001		\$24.64	\$24.64		
87003		\$33.92	\$33.92		
87015		\$11.32	\$11.32		
87040		\$20.80	\$20.80		
87045		\$19.01	\$19.01		
87046		\$4.63	\$4.63		
87070		\$17.35	\$17.35		
87071		\$9.26	\$9.26		
87073		\$9.26	\$9.26		
87075		\$19.07	\$19.07		
87076		\$25.96	\$25.96		
87077		\$15.85	\$15.85		
87081		\$13.36	\$13.36		
87084		\$17.35	\$17.35		
87086		\$16.27	\$16.27		
87088		\$16.30	\$16.30		
87101		\$15.53	\$15.53		
87102		\$16.93	\$16.93		
87103		\$18.18	\$18.18		
87106		\$20.80	\$20.80		
87107		\$20.26	\$20.26		
87109		\$31.00	\$31.00		
87110		\$39.49	\$39.49		
87116		\$21.78	\$21.78		
87118		\$22.05	\$22.05		
87140		\$11.25	\$11.25		
87143		\$25.25	\$25.25		
87147		\$8.95	\$8.95		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
87149		\$39.35	\$39.35		
87152		\$10.27	\$10.27		
87158		\$10.55	\$10.55		
87164		\$14.84	\$14.84		
87164	26	\$21.13	\$21.13		
87166		\$22.76	\$22.76		
87168		<del>\$8.38</del>	<del>\$8.38</del>		
87169		<del>\$8.38</del>	<del>\$8.38</del>		
87172		<del>\$8.38</del>	<del>\$8.38</del>		
87176		\$11.86	\$11.86		
87177		\$17.93	\$17.93		
87181		\$3.45	\$3.45		
87184		\$13.90	\$13.90		
87185		\$21.10	\$21.10		
87186		\$15.15	\$15.15		
87187		\$17.68	\$17.68		
87188		\$13.38	\$13.38		
87190		\$11.39	\$11.39		
87197		\$30.27	\$30.27		
87205		\$8.61	\$8.61		
87206		\$10.82	\$10.82		
87207		\$7.97	\$7.97		
87207	26	\$21.13	\$21.13		
87209		BR	BR		
87210		\$8.61	\$8.61		
87220		\$8.61	\$8.61		
87230		\$39.79	\$39.79		
87250		\$39.42	\$39.42		
87252		\$52.54	\$52.54		
87253		\$40.71	\$40.71		
87254		\$9.60	\$9.60		
87255		\$67.18	\$67.18		
87260		\$16.58	\$16.58		
87265		<del>\$16.58</del>	<del>\$16.58</del>		
87267		\$23.80	\$23.80		
87269		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
87270		<del>\$16.58</del>	<del>\$16.58</del>		
87271		\$23.80	\$23.80		
87272		\$16.58	\$16.58		
87273		<del>\$23.54</del>	<del>\$23.54</del>		
87274		<del>\$16.58</del>	<del>\$16.58</del>		
87275		<del>\$23.54</del>	<del>\$23.54</del>		
87276		<del>\$16.58</del>	<del>\$16.58</del>		
87277		<del>\$23.54</del>	<del>\$23.54</del>		
87278		<del>\$16.58</del>	<del>\$16.58</del>		
87279		<del>\$23.54</del>	<del>\$23.54</del>		
87280		\$16.58	\$16.58		
87281		\$23.54	\$23.54		
87283		<del>\$23.54</del>	<del>\$23.54</del>		
87285		\$16.58	\$16.58		
87290		<del>\$16.58</del>	<del>\$16.58</del>		
87299		\$16.58	\$16.58		
87300		\$11.77	\$11.77		
87301		\$16.58	\$16.58		
87305		BR	BR		
87320		<del>\$16.58</del>	<del>\$16.58</del>		
87324		\$16.58	\$16.58		
87327		\$23.54	\$23.54		
87328		\$16.58	\$16.58		
87329		BR	BR		
87332		\$16.58	\$16.58		
87335		\$16.58	\$16.58		
87336		\$23.54	\$23.54		
87337		\$23.54	\$23.54		
87338		\$0.00	\$0.00		
87339		\$23.54	\$23.54		
87340		\$18.26	\$18.26		
87341		\$18.26	\$18.26		
87350		\$15.92	\$15.92		
87380		\$22.69	\$22.69		
87385		\$16.58	\$16.58		
87390		\$15.44	\$15.44		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
87391		\$15.44	\$15.44		
87400		\$11.77	\$11.77		
87420		\$16.58	\$16.58		
87425		\$16.58	\$16.58		
87427		\$23.54	\$23.54		
87430		\$16.58	\$16.58		
87449		\$16.58	\$16.58		
87450		\$13.25	\$13.25		
87451		\$18.82	\$18.82		
87470		\$27.71	\$27.71		
87471		\$48.50	\$48.50		
87472		\$59.50	\$59.50		
87475		\$27.71	\$27.71		
87476		\$48.50	\$48.50		
87477		\$59.20	\$59.20		
87480		\$27.71	\$27.71		
87481		\$48.50	\$48.50		
87482		\$57.69	\$57.69		
87485		\$27.71	\$27.71		
87486		\$48.50	\$48.50		
87487		\$59.20	\$59.20		
87490		\$27.71	\$27.71		
87491		\$48.50	\$48.50		
87492		\$20.00	\$20.00		
87495		\$27.71	\$27.71		
87496		\$48.50	\$48.50		
87497		\$59.20	\$59.20		
87498		BR	BR		
87500		\$0.00	\$0.00		
87510		\$27.71	\$27.71		
87511		\$48.50	\$48.50		
87512		\$57.69	\$57.69		
87515		\$27.71	\$27.71		
87516		\$48.50	\$48.50		
87517		\$59.20	\$59.20		
87520		\$27.71	\$27.71		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP/CS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
87521		\$48.50	\$48.50		
87522		\$59.20	\$59.20		
87525		\$27.71	\$27.71		
87526		\$48.50	\$48.50		
87527		\$57.69	\$57.69		
87528		\$27.71	\$27.71		
87529		\$48.50	\$48.50		
87530		\$59.20	\$59.20		
87531		\$27.71	\$27.71		
87532		\$48.50	\$48.50		
87533		\$57.69	\$57.69		
87534		\$27.71	\$27.71		
87535		\$48.50	\$48.50		
87536		\$117.59	\$117.59		
87537		\$27.71	\$27.71		
87538		\$48.50	\$48.50		
87539		\$59.20	\$59.20		
87540		\$27.71	\$27.71		
87541		\$48.50	\$48.50		
87542		\$57.69	\$57.69		
87550		\$27.71	\$27.71		
87551		\$48.50	\$48.50		
87552		\$59.20	\$59.20		
87555		\$27.71	\$27.71		
87556		\$48.50	\$48.50		
87557		\$59.20	\$59.20		
87560		\$27.71	\$27.71		
87561		\$48.50	\$48.50		
87562		\$59.20	\$59.20		
87580		\$27.71	\$27.71		
87581		\$48.50	\$48.50		
87582		\$57.69	\$57.69		
87590		\$27.71	\$27.71		
87591		\$48.50	\$48.50		
87592		\$28.40	\$28.40		
87620		\$27.71	\$27.71		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
87621		\$48.50	\$48.50		
87622		\$67.69	\$67.69		
87640		BR	BR		
87641		BR	BR		
87650		\$27.71	\$27.71		
87651		\$48.50	\$48.50		
87652		\$57.69	\$57.69		
87653		BR	BR		
87808		BR	BR		
87660		BR	BR		
87797		\$27.71	\$27.71		
87798		\$48.50	\$48.50		
87799		\$59.20	\$59.20		
87800		\$39.35	\$39.35		
87801		\$68.87	\$68.87		
87802		BR	BR		
87803		BR	BR		
87804		BR	BR		
87807		BR	BR		
87809		\$0.00	\$0.00		
87810		\$116.58	\$116.58		
87850		\$116.58	\$116.58		
87880		\$116.58	\$116.58		
87899		\$116.58	\$116.58		
87900		BR	BR		
87901		\$505.21	\$505.21		
87902		BR	BR		
87903		\$958.91	\$958.91		
87904		\$15.15	\$15.15		
87905		\$22.30	\$22.30		
87999		BR	BR		
88000		\$215.00	\$215.00		
88005		\$225.00	\$225.00		
88007		\$242.00	\$242.00		
88012		\$0.00	\$0.00		
88014		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88016		\$0.00	\$0.00		
88020		\$324.00	\$324.00		
88025		\$324.00	\$324.00		
88027		\$298.00	\$298.00		
88028		\$0.00	\$0.00		
88029		\$0.00	\$0.00		
88036		\$152.00	\$152.00		
88037		\$74.00	\$74.00		
88040		\$657.00	\$657.00		
88045		\$37.00	\$37.00		
88099		BR	BR		
88104		\$37.79	\$37.79		
88104	TC	\$8.17	\$8.17		
88104	26	\$29.62	\$29.62		
88106		\$34.93	\$34.93		
88106	TC	\$6.76	\$6.76		
88106	26	\$28.17	\$28.17		
88107		\$46.25	\$46.25		
88107	TC	\$8.87	\$8.87		
88107	26	\$37.38	\$37.38		
88108		\$38.84	\$38.84		
88108	TC	\$8.87	\$8.87		
88108	26	\$29.97	\$29.97		
88112		BR	BR		
88112	TC	BR	BR		
88112	26	BR	BR		
88125		\$13.50	\$13.50		
88125	TC	\$1.41	\$1.41		
88125	26	\$12.10	\$12.10		
88130		\$0.00	\$0.00		
88140		\$0.00	\$0.00		
88141		\$33.92	\$33.92		
88142		\$38.84	\$38.84		
88143		\$38.84	\$38.84		
88147		\$20.73	\$20.73		
88148		\$20.73	\$20.73		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88150		\$10.42	\$10.42		
88152		\$7.15	\$7.15		
88153		\$7.15	\$7.15		
88154		\$7.15	\$7.15		
88155		\$12.07	\$12.07		
88160		\$31.31	\$31.31		
88160	TC	\$6.41	\$6.41		
88160	26	\$24.90	\$24.90		
88161		\$33.41	\$33.41		
88161	TC	\$7.46	\$7.46		
88161	26	\$25.95	\$25.95		
88162		\$57.89	\$57.89		
88162	TC	\$14.14	\$14.14		
88162	26	\$43.75	\$43.75		
88164		\$7.15	\$7.15		
88165		\$7.15	\$7.15		
88166		\$7.15	\$7.15		
88167		\$7.15	\$7.15		
88172		\$49.15	\$49.15		
88172	TC	\$13.09	\$13.09		
88172	26	\$36.07	\$36.07		
88173		\$84.05	\$84.05		
88173	TC	\$15.55	\$15.55		
88173	26	\$68.50	\$68.50		
88174		\$40.31	\$40.31		
88175		\$45.03	\$45.03		
88182		\$62.56	\$62.56		
88182	TC	\$17.04	\$17.04		
88182	26	\$45.53	\$45.53		
88184		BR	BR		
88185		BR	BR		
88187		BR	BR		
88188		BR	BR		
88189		BR	BR		
88199		BR	BR		
88199	TC	BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88199	26	BR	BR		
88230		\$234.80	\$234.80		
88233		\$283.63	\$283.63		
88235		\$0.00	\$0.00		
88237		\$254.56	\$254.56		
88239		\$297.33	\$297.33		
88240		\$13.96	\$13.96		
88241		\$13.96	\$13.96		
88245		\$300.02	\$300.02		
88248		\$349.02	\$349.02		
88249		\$239.32	\$239.32		
88261		\$356.21	\$356.21		
88262		\$251.21	\$251.21		
88263		\$302.87	\$302.87		
88264		\$172.25	\$172.25		
88267		\$0.00	\$0.00		
88269		\$0.00	\$0.00		
88271		\$29.60	\$29.60		
88272		\$37.00	\$37.00		
88273		\$44.40	\$44.40		
88274		\$48.10	\$48.10		
88275		\$55.50	\$55.50		
88280		\$50.38	\$50.38		
88283		\$138.25	\$138.25		
88285		\$38.28	\$38.28		
88289		\$69.34	\$69.34		
88291		\$5.54	\$5.54		
88299		BR	BR		
88300		\$10.39	\$10.39		
88300	TC	\$3.52	\$3.52		
88300	26	\$6.87	\$6.87		
88302		\$20.45	\$20.45		
88302	TC	\$8.87	\$8.87		
88302	26	\$11.58	\$11.58		
88304		\$31.16	\$31.16		
88304	TC	\$12.38	\$12.38		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88304	26	\$18.78	\$18.78		
88305		\$67.14	\$67.14		
88305	TC	\$19.14	\$19.14		
88305	26	\$47.99	\$47.99		
88307		\$117.06	\$117.06		
88307	TC	\$28.36	\$28.36		
88307	26	\$88.69	\$88.69		
88309		\$157.08	\$157.08		
88309	TC	\$35.04	\$35.04		
88309	26	\$122.04	\$122.04		
88311		\$16.67	\$16.67		
88311	TC	\$3.52	\$3.52		
88311	26	\$13.15	\$13.15		
88312		\$29.54	\$29.54		
88312	TC	\$4.22	\$4.22		
88312	26	\$25.32	\$25.32		
88313		\$16.67	\$16.67		
88313	TC	\$3.52	\$3.52		
88313	26	\$13.15	\$13.15		
88314		\$40.04	\$40.04		
88314	TC	\$10.28	\$10.28		
88314	26	\$29.76	\$29.76		
88318		\$24.39	\$24.39		
88318	TC	\$4.22	\$4.22		
88318	26	\$20.17	\$20.17		
88319		\$38.43	\$38.43		
88319	TC	\$63.76	\$63.76		
88319	26	\$8.87	\$8.87		
88321		\$63.76	\$63.76		
88323		\$77.30	\$77.30		
88323	TC	\$12.38	\$12.38		
88323	26	\$64.91	\$64.91		
88325		\$100.36	\$100.36		
88329		\$39.01	\$39.01		
88331		\$85.90	\$85.90		
88331	TC	\$20.55	\$20.55		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88331	26	\$65.35	\$65.35		
88332		\$43.12	\$43.12		
88332	TC	\$10.28	\$10.28		
88332	26	\$32.84	\$32.84		
88333		\$117.42	\$117.42		
88333	TC	\$28.37	\$28.37		
88333	26	\$89.05	\$89.05		
88334		\$61.07	\$61.07		
88334	TC	\$17.30	\$17.30		
88334	26	\$43.77	\$43.77		
88342		\$55.56	\$55.56		
88342	TC	\$11.68	\$11.68		
88342	26	\$43.88	\$43.88		
88346		\$53.83	\$53.83		
88346	TC	\$10.28	\$10.28		
88346	26	\$43.55	\$43.55		
88347		\$48.20	\$48.20		
88347	TC	\$10.28	\$10.28		
88347	26	\$37.93	\$37.93		
88348		\$142.38	\$142.38		
88348	TC	\$41.45	\$41.45		
88348	26	\$100.92	\$100.92		
88349		\$87.35	\$87.35		
88349	TC	\$29.07	\$29.07		
88349	26	\$58.29	\$58.29		
88355		\$134.82	\$134.82		
88355	TC	\$31.18	\$31.18		
88355	26	\$103.64	\$103.64		
88356		\$212.47	\$212.47		
88356	TC	\$47.78	\$47.78		
88356	26	\$164.70	\$164.70		
88358		\$192.33	\$192.33		
88358	TC	\$43.91	\$43.91		
88358	26	\$148.41	\$148.41		
88360		BR	BR		
88360	TC	BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88360	26	BR	BR		
88361		BR	BR		
88361	TC	BR	BR		
88361	26	BR	BR		
88362		\$154.76	\$154.76		
88362	TC	\$36.45	\$36.45		
88362	26	\$118.31	\$118.31		
88365		\$62.79	\$62.79		
88365	TC	\$13.79	\$13.79		
88365	26	\$49.00	\$49.00		
88367		BR	BR		
88367	TC	BR	BR		
88367	26	BR	BR		
88368		BR	BR		
88368	TC	BR	BR		
88368	26	BR	BR		
88371		\$30.09	\$30.09		
88371	26	\$21.13	\$21.13		
88372		\$31.44	\$31.44		
88372	26	\$21.13	\$21.13		
88380		BR	BR		
88380	TC	BR	BR		
88380	26	BR	BR		
88381		\$111.33	\$111.33		
88381	TC	\$297.85	\$297.85		
88381	26	\$213.48	\$213.48		
88384		BR	BR		
88384	TC	BR	BR		
88384	26	BR	BR		
88385		BR	BR		
88385	TC	BR	BR		
88385	26	BR	\$111.22		
88386		BR	BR		
88386	TC	BR	BR		
88386	26	BR	\$139.89		
88399		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
88399	TC	BR	BR		
88399	26	BR	BR		
88720		\$7.35	\$7.35		
88740		\$7.35	\$7.35		
88741		\$7.35	\$7.35		
89049		\$0.00	\$0.00		
89050		\$7.48	\$7.48		
89051		\$11.10	\$11.10		
89055		\$8.46	\$8.46		
89060		\$12.00	\$12.00		
89060	26	\$21.13	\$21.13		
89100		\$38.17	\$38.17		
89105		\$33.41	\$33.41		
89125		\$8.70	\$8.70		
89130		\$32.26	\$32.26		
89132		\$14.50	\$14.50		
89135		\$51.23	\$51.23		
89136		\$16.30	\$16.30		
89140		\$66.05	\$66.05		
89141		\$59.51	\$59.51		
89160		\$3.11	\$3.11		
89190		\$6.56	\$6.56		
89220		BR	BR		
89225		BR	BR		
89230		BR	BR		
89235		BR	BR		
89240		BR	BR		
89250		\$0.00	\$0.00		
89251		\$0.00	\$0.00		
89253		\$0.00	\$0.00		
89254		\$0.00	\$0.00		
89255		\$0.00	\$0.00		
89257		\$0.00	\$0.00		
89258		\$0.00	\$0.00		
89259		\$0.00	\$0.00		
89260		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
89261		\$0.00	\$0.00		
89264		\$0.00	\$0.00		
89268		\$0.00	\$0.00		
89272		\$0.00	\$0.00		
89280		\$0.00	\$0.00		
89281		\$0.00	\$0.00		
89290		\$0.00	\$0.00		
89291		\$0.00	\$0.00		
89300		\$0.00	\$0.00		
89310		\$0.00	\$0.00		
89320		\$0.00	\$0.00		
89321		\$0.00	\$0.00		
89322		\$0.00	\$0.00		
89325		\$0.00	\$0.00		
89329		\$0.00	\$0.00		
89330		\$0.00	\$0.00		
89331		\$0.00	\$0.00		
89335		\$0.00	\$0.00		
89342		\$0.00	\$0.00		
89343		\$0.00	\$0.00		
89344		\$0.00	\$0.00		
89346		\$0.00	\$0.00		
89352		\$0.00	\$0.00		
89353		\$0.00	\$0.00		
89354		\$0.00	\$0.00		
89356		\$0.00	\$0.00		
90281		BR	BR		
90283		BR	BR		
90284		\$0.00	\$0.00		
90287		BR	BR		
90288		BR	BR		
90291		BR	BR		
90296		BR	BR		
90371		\$327.89	\$327.89		
90375		\$72.85	\$72.85		
90376		\$429.51	\$429.51		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
90378		BR	BR		
90379		BR	BR		
90384		\$0.00	\$0.00		
90385		\$0.00	\$0.00		
90386		\$0.00	\$0.00		
90389		\$37.78	\$37.78		
90393		BR	BR		
90396		BR	BR		
90399		BR	BR		
90465		\$0.00	\$0.00		
90466		\$0.00	\$0.00		
90467		\$0.00	\$0.00		
90468		\$0.00	\$0.00		
90471		\$8.79	\$8.79		
90472		\$6.28	\$6.28		
90473		BR	BR		
90474		BR	BR		
90476		BR	BR		
90477		BR	BR		
90581		BR	BR		
90585		\$93.81	\$93.81		
90586		\$106.40	\$106.40		
90632		\$61.05	\$61.05		
90633		\$29.80	\$29.80		
90634		\$29.80	\$29.80		
90636		BR	BR		
90645		\$14.77	\$14.77		
90646		\$12.59	\$12.59		
90647		\$13.90	\$13.90		
90648		\$10.86	\$10.86		
90649		BR	BR		
90650		\$0.00	\$0.00		
90655		\$0.00	\$0.00		
90656		BR	BR		
90657		\$3.56	\$3.56		
90658		\$7.13	\$7.13		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
90660		BR	BR		
90665		\$37.35	\$38.35		
90669		BR	BR		
90675		\$139.76	\$140.76		
90676		BR	BR		
90680		\$29.10	\$29.10		
90681		\$0.00	\$0.00		
90690		\$18.67	\$18.67		
90691		\$22.58	\$22.58		
90692		BR	BR		
90693		BR	BR		
90696		\$0.00	\$0.00		
90698		BR	BR		
90700		\$11.29	\$11.29		
90701		\$2.61	\$2.61		
90702		\$2.61	\$2.61		
90703		\$8.32	\$8.32		
90704		\$11.29	\$11.29		
90705		\$9.12	\$9.12		
90706		\$11.29	\$11.29		
90707		\$21.28	\$21.28		
90708		\$13.90	\$13.90		
90710		BR	BR		
90712		\$10.86	\$10.86		
90713		\$12.59	\$12.59		
90714		BR	BR		
90715		BR	BR		
90716		\$33.84	\$33.84		
90717		\$38.12	\$38.12		
90718		\$9.03	\$9.03		
90719		\$7.82	\$7.82		
90720		\$21.28	\$21.28		
90721		\$21.28	\$21.28		
90723		BR	BR		
90725		\$1.74	\$1.74		
90727		\$4.78	\$4.78		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
90732		\$15.24	\$15.24		
90733		\$31.70	\$31.70		
90734		BR	BR		
90735		\$4.34	\$4.34		
90736		BR	BR		
90738		\$0.00	\$0.00		
90740		BR	BR		
90743		BR	BR		
90744		\$0.00	\$0.00		
90746		\$55.46	\$55.46		
90747		\$110.31	\$110.31		
90748		\$29.97	\$29.97		
90749		BR	BR		
90801		\$174.33	\$163.88		
90802		\$185.20	\$175.58		
90804		\$75.10	\$70.50		
90805		\$82.51	\$79.17		
90806		\$112.73	\$108.97		
90807		\$119.74	\$117.23		
90808		\$168.05	\$162.62		
90809		\$173.80	\$170.45		
90810		\$80.75	\$76.98		
90811		\$90.25	\$85.65		
90812		\$121.32	\$115.47		
90813		\$127.48	\$123.30		
90814		\$175.79	\$170.77		
90815		\$180.70	\$176.52		
90816		\$75.59	\$75.59		
90817		\$82.59	\$82.59		
90818		\$113.21	\$113.21		
90819		\$119.38	\$119.38		
90821		\$168.54	\$168.54		
90822		\$173.46	\$173.46		
90823		\$81.24	\$81.24		
90824		\$88.66	\$88.66		
90826		\$120.13	\$120.13		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
90827		\$125.45	\$125.45		
90828		\$176.28	\$176.28		
90829		\$179.52	\$179.52		
90845		\$104.66	\$103.82		
90846		\$109.33	\$108.91		
90847		\$133.07	\$130.98		
90849		\$37.94	\$36.27		
90853		\$36.68	\$35.85		
90857		\$40.95	\$39.28		
90862		\$59.11	\$55.76		
90865		\$194.48	\$164.39		
90870		\$117.37	\$117.37		
90875		\$91.38	\$73.41		
90876		\$133.71	\$115.32		
90880		\$141.81	\$126.76		
90882		\$79.87	\$79.87		
90885		\$58.73	\$58.73		
90887		\$100.70	\$89.83		
90889		\$0.00	\$0.00		
90899		BR	BR		
90901		\$46.79	\$24.64		
90911		\$109.17	\$54.01		
90935		\$83.06	\$83.06		
90937		\$136.23	\$136.23		
90940		BR	BR		
90945		\$86.95	\$86.95		
90947		\$139.25	\$139.25		
90951		\$0.00	\$0.00		
90952		\$0.00	\$0.00		
90953		\$0.00	\$0.00		
90954		\$0.00	\$0.00		
90955		\$0.00	\$0.00		
90956		\$0.00	\$0.00		
90957		\$0.00	\$0.00		
90958		\$0.00	\$0.00		
90959		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
90960		\$0.00	\$0.00		
90961		\$0.00	\$0.00		
90962		\$0.00	\$0.00		
90963		\$0.00	\$0.00		
90964		\$0.00	\$0.00		
90965		\$0.00	\$0.00		
90966		\$0.00	\$0.00		
90967		\$0.00	\$0.00		
90968		\$0.00	\$0.00		
90969		\$0.00	\$0.00		
90970		\$0.00	\$0.00		
90989		\$459.97	\$459.97		
90993		\$77.29	\$77.29		
90997		\$142.38	\$142.38		
90999		BR	BR		
91000		<del>\$47.86</del>	<del>\$47.86</del>		
91000	TC	<del>\$3.77</del>	<del>\$3.77</del>		
91000	26	\$44.09	\$44.09		
91010		\$174.72	\$174.72		
91010	TC	\$99.11	\$99.11		
91010	26	\$75.61	\$75.61		
91011		\$206.14	\$206.14		
91011	TC	\$115.83	\$115.83		
91011	26	\$90.31	\$90.31		
91012		\$211.51	\$211.51		
91012	TC	\$123.36	\$123.36		
91012	26	\$88.15	\$88.15		
91020		\$193.08	\$193.08		
91020	TC	\$106.63	\$106.63		
91020	26	\$86.44	\$86.44		
91022		\$251.53	\$251.53		
91022	TC	\$163.69	\$163.69		
91022	26	\$87.84	\$87.84		
91030		\$143.49	\$143.49		
91030	TC	\$88.62	\$88.62		
91030	26	\$54.87	\$54.87		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
91034		\$265.73	\$265.73		
91034	TC	\$206.08	\$206.08		
91034	26	\$59.66	\$59.66		
91035		\$524.07	\$524.07		
91035	TC	\$427.83	\$427.83		
91035	26	\$96.24	\$96.24		
91037		\$169.80	\$169.80		
91037	TC	\$110.15	\$110.15		
91037	26	\$59.66	\$59.66		
91038		\$146.07	\$146.07		
91038	TC	\$78.59	\$78.59		
91038	26	\$67.49	\$67.49		
91040		\$510.33	\$510.33		
91040	TC	\$450.67	\$450.67		
91040	26	\$59.66	\$59.66		
91052		\$129.90	\$129.90		
91052	TC	\$81.93	\$81.93		
91052	26	\$47.97	\$47.97		
91055		\$143.56	\$143.56		
91055	TC	\$89.46	\$89.46		
91055	26	\$54.10	\$54.10		
91065		\$93.62	\$93.62		
91065	TC	\$81.52	\$81.52		
91065	26	\$12.10	\$12.10		
91105		\$20.80	\$20.80		
91110		\$1,056.58	\$1,056.58		
91110	TC	\$842.20	\$842.20		
91110	26	\$214.38	\$214.38		
91111		\$817.22	\$817.22		
91111	TC	\$753.01	\$753.01		
91111	26	\$64.21	\$64.21		
91120		\$503.66	\$503.66		
91120	TC	\$443.58	\$443.58		
91120	26	\$60.09	\$60.09		
91122		\$342.15	\$342.15		
91122	TC	\$234.12	\$234.12		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
91122	26	\$108.03	\$108.03		
91123		BR	BR		
91132		BR	BR		
91132	TC	BR	BR		
91132	26	BR	BR		
91133		BR	BR		
91133	TC	BR	BR		
91133	26	BR	BR		
91299		BR	BR		
91299	TC	BR	BR		
91299	26	BR	BR		
92002		\$79.45	\$53.54		
92004		\$145.37	\$102.74		
92012		\$72.78	\$41.85		
92014		\$107.04	\$68.59		
92015		\$79.74	\$23.32		
92018		\$156.18	\$156.18		
92019		\$82.40	\$82.40		
92020		\$30.82	\$23.30		
92025		\$34.42	\$34.42		
92025	TC	\$13.66	\$13.66		
92025	26	\$20.76	\$20.76		
92060		\$61.55	\$61.55		
92060	TC	\$18.82	\$18.82		
92060	26	\$42.73	\$42.73		
92065		\$40.03	\$40.03		
92065	TC	\$17.15	\$17.15		
92065	26	\$22.88	\$22.88		
92070		\$76.18	\$44.42		
92081		\$52.96	\$52.96		
92081	TC	\$30.10	\$30.10		
92081	26	\$22.86	\$22.86		
92082		\$68.16	\$68.16		
92082	TC	\$40.55	\$40.55		
92082	26	\$27.61	\$27.61		
92083		\$78.73	\$78.73		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92083	TC	\$47.24	\$47.24		
92083	26	\$31.49	\$31.49		
92100		\$93.74	\$56.12		
92120		\$80.17	\$49.66		
92130		\$88.53	\$52.17		
92135		\$49.60	\$49.60		
92135	TC	\$27.18	\$27.18		
92135	26	\$22.42	\$22.42		
92136		\$101.02	\$101.02		
92136	TC	\$66.52	\$66.52		
92136	26	\$34.50	\$34.50		
92140		\$61.58	\$31.49		
92225		\$26.24	\$23.74		
92226		\$23.64	\$21.13		
92230		\$97.73	\$35.46		
92235		\$162.14	\$162.14		
92235	TC	\$110.39	\$110.39		
92235	26	\$51.75	\$51.75		
92240		\$348.67	\$348.67		
92240	TC	\$278.82	\$278.82		
92240	26	\$69.85	\$69.85		
92250		\$93.24	\$93.24		
92250	TC	\$65.21	\$65.21		
92250	26	\$28.03	\$28.03		
92260		\$21.30	\$12.94		
92265		\$116.55	\$116.55		
92265	TC	\$68.14	\$68.14		
92265	26	\$48.41	\$48.41		
92270		\$103.61	\$103.61		
92270	TC	\$52.26	\$52.26		
92270	26	\$51.35	\$51.35		
92275		\$127.78	\$127.78		
92275	TC	\$64.80	\$64.80		
92275	26	\$62.99	\$62.99		
92283		\$43.40	\$43.40		
92283	TC	\$32.61	\$32.61		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92283	26	\$10.79	\$10.79		
92284		\$108.73	\$108.73		
92284	TC	\$94.04	\$94.04		
92284	26	\$14.69	\$14.69		
92285		\$54.32	\$54.32		
92285	TC	\$41.39	\$41.39		
92285	26	\$12.94	\$12.94		
92286		\$172.25	\$172.25		
92286	TC	\$130.41	\$130.41		
92286	26	\$41.83	\$41.83		
92287		\$150.38	\$49.24		
92310		\$99.26	\$71.68		
92311		\$98.67	\$63.14		
92312		\$105.29	\$77.28		
92313		\$89.56	\$52.78		
92314		\$69.89	\$41.89		
92315		\$60.23	\$26.80		
92316		\$71.96	\$42.71		
92317		\$64.41	\$25.96		
92325		\$17.15	\$17.15		
92326		\$70.27	\$70.27		
92340		\$45.87	\$22.46		
92341		\$51.91	\$28.51		
92342		\$55.37	\$32.39		
92352		\$47.12	\$22.46		
92353		\$55.32	\$30.67		
92354		\$371.22	\$371.22		
92355		\$180.14	\$180.14		
92358		\$42.26	\$42.26		
92370		\$38.26	\$20.29		
92371		\$26.77	\$26.77		
92499		BR	BR		
92499	TC	BR	BR		
92499	26	BR	BR		
92502		\$116.67	\$116.67		
92504		\$29.62	\$12.06		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92506		\$150.51	\$56.89		
92507		\$71.66	\$33.63		
92508		\$33.95	\$16.82		
92511		\$171.36	\$71.89		
92512		\$70.47	\$32.44		
92516		\$57.28	\$28.86		
92520		\$56.27	\$51.25		
92526		\$95.13	\$33.27		
92531		\$22.38	\$22.38		
92532		\$25.80	\$25.80		
92533		\$41.29	\$41.29		
92534		\$18.49	\$18.49		
92541		\$59.75	\$59.75		
92541	TC	\$33.45	\$33.45		
92541	26	\$26.29	\$26.29		
92542		\$60.44	\$60.44		
92542	TC	\$38.89	\$38.89		
92542	26	\$21.55	\$21.55		
92543		\$28.22	\$28.22		
92543	TC	\$21.32	\$21.32		
92543	26	\$6.89	\$6.89		
92544		\$48.18	\$48.18		
92544	TC	\$30.95	\$30.95		
92544	26	\$17.23	\$17.23		
92545		\$44.78	\$44.78		
92545	TC	\$29.69	\$29.69		
92545	26	\$15.09	\$15.09		
92546		\$90.03	\$90.03		
92546	TC	\$71.49	\$71.49		
92546	26	\$18.55	\$18.55		
92547		\$51.47	\$51.47		
92548		\$163.28	\$163.28		
92548	TC	\$129.69	\$129.69		
92548	26	\$33.59	\$33.59		
92551		\$12.72	\$12.72		
92552		\$20.10	\$20.10		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92553		\$29.73	\$29.73		
92555		\$17.59	\$17.59		
92556		\$26.39	\$26.39		
92557		\$54.45	\$54.45		
92559		\$41.32	\$41.32		
92560		\$24.57	\$24.57		
92561		\$31.82	\$31.82		
92562		\$18.85	\$18.85		
92563		\$17.59	\$17.59		
92564		\$21.78	\$21.78		
92565		\$18.43	\$18.43		
92567		\$24.30	\$24.30		
92568		\$17.59	\$17.59		
92569		\$18.85	\$18.85		
92571		\$18.01	\$18.01		
92572		\$4.19	\$4.19		
92575		\$13.39	\$13.39		
92576		\$20.53	\$20.53		
92577		\$32.25	\$32.25		
92579		\$32.24	\$32.24		
92582		\$32.24	\$32.24		
92583		\$40.20	\$40.20		
92584		\$110.95	\$110.95		
92585		\$114.81	\$114.81		
92585	TC	\$82.89	\$82.89		
92585	26	\$31.92	\$31.92		
92586		\$82.89	\$82.89		
92587		\$67.66	\$67.66		
92587	TC	\$58.62	\$58.62		
92587	26	\$9.04	\$9.04		
92588		\$89.86	\$89.86		
92588	TC	\$66.58	\$66.58		
92588	26	\$23.28	\$23.28		
92590		\$49.35	\$49.35		
92591		\$74.11	\$74.11		
92592		\$21.63	\$21.63		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92593		\$32.65	\$32.65		
92594		\$23.83	\$23.83		
92595		\$35.71	\$35.71		
92596		\$27.23	\$27.23		
92597		\$111.22	\$58.98		
92601		\$0.00	\$0.00		
92602		\$0.00	\$0.00		
92603		\$97.45	\$97.45		
92604		\$65.27	\$65.27		
92605		BR	BR		
92606		BR	BR		
92607		\$137.97	\$137.97		
92608		\$30.14	\$30.14		
92609		\$69.42	\$69.42		
92610		\$145.52	\$145.52		
92611		\$145.52	\$145.52		
92612		\$173.05	\$86.54		
92613		BR	BR		
92614		\$160.09	\$84.87		
92615		BR	BR		
92616		\$223.55	\$125.76		
92617		BR	BR		
92620		\$49.93	\$49.93		
92621		\$12.97	\$12.97		
92625		\$49.10	\$49.10		
92626		\$25.31	\$25.31		
92627		\$25.31	\$25.31		
92630		\$0.00	\$0.00		
92633		BR	BR		
92640		\$58.32	\$58.32		
92700		BR	BR		
92950		\$217.42	\$217.42		
92953		\$20.10	\$20.10		
92960		\$384.78	\$151.99		
92961		\$296.22	\$296.22		
92970		\$206.37	\$206.37		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
92971		\$115.92	\$115.92		
92973		\$203.34	\$203.34		
92974		\$187.78	\$187.78		
92975		\$445.61	\$445.61		
92977		\$353.62	\$353.62		
92978		\$310.14	\$310.14		
92978	TC	\$199.18	\$199.18		
92978	26	\$110.97	\$110.97		
92979		\$188.95	\$188.95		
92979	TC	\$100.44	\$100.44		
92979	26	\$88.51	\$88.51		
92980		\$938.19	\$938.19		
92981		\$261.17	\$261.17		
92982		\$696.02	\$696.02		
92984		\$185.63	\$185.63		
92986		\$1,499.27	\$1,499.27		
92987		\$1,556.21	\$1,556.21		
92990		\$1,208.22	\$1,208.22		
92992		\$2,645.34	\$2,645.34		
92993		\$1,853.39	\$1,853.39		
92995		\$766.37	\$766.37		
92996		\$203.77	\$203.77		
92997		\$758.73	\$758.73		
92998		\$370.17	\$370.17		
93000		\$30.03	\$30.03		
93005		\$19.66	\$19.66		
93010		\$10.37	\$10.37		
93012		\$256.79	\$256.79		
93014		\$31.54	\$31.54		
93015		\$120.28	\$120.28		
93016		\$27.22	\$27.22		
93017		\$74.50	\$74.50		
93018		\$18.57	\$18.57		
93024		\$121.92	\$121.92		
93024	TC	\$49.81	\$49.81		
93024	26	\$72.10	\$72.10		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93025		\$385.25	\$385.25		
93025	TC	\$339.05	\$339.05		
93025	26	\$46.20	\$46.20		
93040		\$15.80	\$15.80		
93041		\$6.28	\$6.28		
93042		\$9.52	\$9.52		
93224		\$183.06	\$183.06		
93225		\$54.83	\$54.83		
93226		\$96.27	\$96.27		
93227		\$31.96	\$31.96		
93228		\$0.00	\$0.00		
93229		\$0.00	\$0.00		
93230		\$195.20	\$195.20		
93231		\$67.82	\$67.82		
93232		\$95.42	\$95.42		
93233		\$31.96	\$31.96		
93235		\$141.87	\$141.87		
93236		\$114.65	\$114.65		
93237		\$27.22	\$27.22		
93268		\$343.16	\$343.16		
93270		\$54.83	\$54.83		
93271		\$256.79	\$256.79		
93272		\$31.54	\$31.54		
93278		\$67.90	\$67.90		
93278	TC	\$52.35	\$52.35		
93278	26	\$15.54	\$15.54		
93279		\$0.00	\$0.00		
93279	TC	\$0.00	\$0.00		
93279	26	\$0.00	\$0.00		
93280		\$0.00	\$0.00		
93280	TC	\$0.00	\$0.00		
93280	26	\$0.00	\$0.00		
93281		\$0.00	\$0.00		
93281	TC	\$0.00	\$0.00		
93281	26	\$0.00	\$0.00		
93282		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93282	TC	\$0.00	\$0.00		
93282	26	\$0.00	\$0.00		
93283		\$0.00	\$0.00		
93283	TC	\$0.00	\$0.00		
93283	26	\$0.00	\$0.00		
93284		\$0.00	\$0.00		
93284	TC	\$0.00	\$0.00		
93284	26	\$0.00	\$0.00		
93285		\$0.00	\$0.00		
93285	TC	\$0.00	\$0.00		
93285	26	\$0.00	\$0.00		
93286		\$0.00	\$0.00		
93286	TC	\$0.00	\$0.00		
93286	26	\$0.00	\$0.00		
93287		\$0.00	\$0.00		
93287	TC	\$0.00	\$0.00		
93287	26	\$0.00	\$0.00		
93288		\$0.00	\$0.00		
93288	TC	\$0.00	\$0.00		
93288	26	\$0.00	\$0.00		
93289		\$0.00	\$0.00		
93289	TC	\$0.00	\$0.00		
93289	26	\$0.00	\$0.00		
93290		\$0.00	\$0.00		
93290	TC	\$0.00	\$0.00		
93290	26	\$0.00	\$0.00		
93291		\$0.00	\$0.00		
93291	TC	\$0.00	\$0.00		
93291	26	\$0.00	\$0.00		
93292		\$0.00	\$0.00		
93292	TC	\$0.00	\$0.00		
93292	26	\$0.00	\$0.00		
93293		\$0.00	\$0.00		
93293	TC	\$0.00	\$0.00		
93293	26	\$0.00	\$0.00		
93294		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93295		\$0.00	\$0.00		
93296		\$0.00	\$0.00		
93297		\$0.00	\$0.00		
93298		\$0.00	\$0.00		
93299		\$0.00	\$0.00		
93303		\$0.00	\$0.00		
93303	TC	\$0.00	\$0.00		
93303	26	\$0.00	\$0.00		
93304		\$0.00	\$0.00		
93304	TC	\$0.00	\$0.00		
93304	26	\$0.00	\$0.00		
93306		\$0.00	\$0.00		
93306	TC	\$0.00	\$0.00		
93306	26	\$0.00	\$0.00		
93307		\$226.06	\$226.06		
93307	TC	\$169.49	\$169.49		
93307	26	\$56.56	\$56.56		
93308		\$119.04	\$119.04		
93308	TC	\$86.23	\$86.23		
93308	26	\$32.82	\$32.82		
93312		\$302.23	\$302.23		
93312	TC	\$169.14	\$169.14		
93312	26	\$133.09	\$133.09		
93313		\$52.46	\$52.46		
93314		\$245.58	\$245.58		
93314	TC	\$169.14	\$169.14		
93314	26	\$76.44	\$76.44		
93315		\$0.00	\$0.00		
93315	TC	\$0.00	\$0.00		
93315	26	\$0.00	\$0.00		
93316		\$0.00	\$0.00		
93317		\$0.00	\$0.00		
93317	TC	\$0.00	\$0.00		
93317	26	\$0.00	\$0.00		
93318		BR	BR		
93318	TC	BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93318	26	\$119.27	\$119.27		
93320		\$99.50	\$99.50		
93320	TC	\$76.19	\$76.19		
93320	26	\$23.32	\$23.32		
93321		\$58.89	\$58.89		
93321	TC	\$49.40	\$49.40		
93321	26	\$9.50	\$9.50		
93325		\$133.67	\$133.67		
93325	TC	\$128.93	\$128.93		
93325	26	\$4.74	\$4.74		
93350		\$168.10	\$168.10		
93350	TC	\$78.70	\$78.70		
93350	26	\$89.39	\$89.39		
93351		\$0.00	\$0.00		
93351	TC	\$0.00	\$0.00		
93351	26	\$0.00	\$0.00		
93352		\$0.00	\$0.00		
93352	TC	\$0.00	\$0.00		
93352	26	\$0.00	\$0.00		
93501		\$933.22	\$933.22		
93501	TC	\$744.97	\$744.97		
93501	26	\$188.25	\$188.25		
93503		\$162.96	\$162.96		
93505		\$362.93	\$362.93		
93505	TC	\$88.76	\$88.76		
93505	26	\$274.16	\$274.16		
93508		\$827.17	\$827.17		
93508	TC	\$549.82	\$549.82		
93508	26	\$277.35	\$277.35		
93510		\$1,920.92	\$1,920.92		
93510	TC	\$1,629.32	\$1,629.32		
93510	26	\$291.60	\$291.60		
93511		\$1,921.41	\$1,921.41		
93511	TC	\$1,585.79	\$1,585.79		
93511	26	\$335.62	\$335.62		
93514		\$2,044.15	\$2,044.15		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93514	TC	\$1,585.79	\$1,585.79		
93514	26	\$458.36	\$458.36		
93524		\$2,527.77	\$2,527.77		
93524	TC	\$2,072.54	\$2,072.54		
93524	26	\$455.23	\$455.23		
93526		\$2,525.53	\$2,525.53		
93526	TC	\$2,129.47	\$2,129.47		
93526	26	\$396.06	\$396.06		
93527		\$2,549.34	\$2,549.34		
93527	TC	\$2,072.54	\$2,072.54		
93527	26	\$476.80	\$476.80		
93528		\$2,658.93	\$2,658.93		
93528	TC	\$2,072.54	\$2,072.54		
93528	26	\$586.39	\$586.39		
93529		\$2,390.57	\$2,390.57		
93529	TC	\$2,072.54	\$2,072.54		
93529	26	\$318.03	\$318.03		
93530		\$0.00	\$0.00		
93530	TC	\$0.00	\$0.00		
93530	26	\$0.00	\$0.00		
93531		\$0.00	\$0.00		
93531	TC	\$0.00	\$0.00		
93531	26	\$0.00	\$0.00		
93532		\$0.00	\$0.00		
93532	TC	\$0.00	\$0.00		
93532	26	\$0.00	\$0.00		
93533		\$0.00	\$0.00		
93533	TC	\$0.00	\$0.00		
93533	26	\$0.00	\$0.00		
93539		\$24.61	\$24.61		
93540		\$26.34	\$26.34		
93541		\$17.71	\$17.71		
93542		\$17.71	\$17.71		
93543		\$18.13	\$18.13		
93544		\$15.54	\$15.54		
93545		\$24.61	\$24.61		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93555		\$325.02	\$325.02		
93555	TC	\$274.51	\$274.51		
93555	26	\$50.52	\$50.52		
93556		\$482.78	\$482.78		
93556	TC	\$430.97	\$430.97		
93556	26	\$51.81	\$51.81		
93561		\$53.71	\$53.71		
93561	TC	\$24.30	\$24.30		
93561	26	\$29.41	\$29.41		
93562		\$24.60	\$24.60		
93562	TC	\$15.09	\$15.09		
93562	26	\$9.52	\$9.52		
93571		\$311.46	\$311.46		
93571	TC	\$199.18	\$199.18		
93571	26	\$112.28	\$112.28		
93572		\$192.44	\$192.44		
93572	TC	\$100.44	\$100.44		
93572	26	\$92.01	\$92.01		
93580		\$0.00	\$0.00		
93581		\$0.00	\$0.00		
93600		\$219.19	\$219.19		
93600	TC	\$86.23	\$86.23		
93600	26	\$132.96	\$132.96		
93602		\$181.94	\$181.94		
93602	TC	\$48.97	\$48.97		
93602	26	\$132.97	\$132.97		
93603		\$206.63	\$206.63		
93603	TC	\$74.50	\$74.50		
93603	26	\$132.13	\$132.13		
93609		\$445.97	\$445.97		
93609	TC	\$119.70	\$119.70		
93609	26	\$326.27	\$326.27		
93610		\$248.97	\$248.97		
93610	TC	\$60.28	\$60.28		
93610	26	\$188.68	\$188.68		
93612		\$260.26	\$260.26		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93612	TC	\$71.58	\$71.58		
93612	26	\$188.68	\$188.68		
93613		\$448.00	\$448.00		
93615		\$70.09	\$70.09		
93615	TC	\$14.23	\$14.23		
93615	26	\$55.86	\$55.86		
93616		\$100.35	\$100.35		
93616	TC	\$14.23	\$14.23		
93616	26	\$86.12	\$86.12		
93618		\$441.74	\$441.74		
93618	TC	\$174.52	\$174.52		
93618	26	\$267.22	\$267.22		
93619		\$812.12	\$812.12		
93619	TC	\$339.42	\$339.42		
93619	26	\$472.70	\$472.70		
93620		BR	BR		
93620	TC	BR	BR		
93620	26	\$739.92	\$739.92		
93621		BR	BR		
93621	TC	BR	BR		
93621	26	\$133.81	\$133.81		
93622		BR	BR		
93622	TC	BR	BR		
93622	26	\$219.96	\$219.96		
93623		BR	BR		
93623	TC	BR	BR		
93623	26	\$178.30	\$178.30		
93624		\$402.60	\$402.60		
93624	TC	\$87.48	\$87.48		
93624	26	\$315.12	\$315.12		
93631		\$761.32	\$761.32		
93631	TC	\$280.63	\$280.63		
93631	26	\$480.68	\$480.68		
93640		\$535.31	\$535.31		
93640	TC	\$315.13	\$315.13		
93640	26	\$220.19	\$220.19		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93641		\$686.83	\$686.83		
93641	TC	\$315.13	\$315.13		
93641	26	\$371.71	\$371.71		
93642		\$629.88	\$629.88		
93642	TC	\$315.13	\$315.13		
93642	26	\$314.75	\$314.75		
93650		\$673.41	\$673.41		
93651		\$1,018.41	\$1,018.41		
93652		\$1,107.77	\$1,107.77		
93660		\$187.22	\$187.22		
93660	TC	\$70.65	\$70.65		
93660	26	\$116.57	\$116.57		
93662		BR	BR		
93662	TC	BR	BR		
93662	26	\$189.38	\$189.38		
93668		BR	BR		
93701		\$51.34	\$51.34		
93701	TC	\$40.55	\$40.55		
93701	26	\$10.79	\$10.79		
93720		\$41.78	\$41.78		
93721		\$31.82	\$31.82		
93722		\$9.95	\$9.95		
93724		\$477.18	\$477.18		
93724	TC	\$174.52	\$174.52		
93724	26	\$302.66	\$302.66		
93740		\$15.80	\$15.80		
93740	TC	\$6.70	\$6.70		
93740	26	\$9.10	\$9.10		
93745		BR	BR		
93745	TC	BR	BR		
93745	26	BR	BR		
93770		\$11.20	\$11.20		
93770	TC	\$1.68	\$1.68		
93770	26	\$9.52	\$9.52		
93784		\$48.83	\$48.83		
93786		\$38.04	\$38.04		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93788		\$21.74	\$21.74		
93790		\$10.37	\$10.37		
93797		\$24.60	\$11.23		
93798		\$33.99	\$17.27		
93799		BR	BR		
93799	TC	BR	BR		
93799	26	BR	BR		
93875		\$84.55	\$84.55		
93875	TC	\$71.16	\$71.16		
93875	26	\$13.39	\$13.39		
93880		\$218.90	\$218.90		
93880	TC	\$181.74	\$181.74		
93880	26	\$37.16	\$37.16		
93882		\$155.27	\$155.27		
93882	TC	\$129.78	\$129.78		
93882	26	\$25.49	\$25.49		
93886		\$248.00	\$248.00		
93886	TC	\$188.87	\$188.87		
93886	26	\$59.13	\$59.13		
93888		\$168.28	\$168.28		
93888	TC	\$129.40	\$129.40		
93888	26	\$38.87	\$38.87		
93890		\$267.20	\$267.20		
93890	TC	\$203.72	\$203.72		
93890	26	\$63.48	\$63.48		
93892		\$284.64	\$284.64		
93892	TC	\$212.03	\$212.03		
93892	26	\$72.61	\$72.61		
93893		\$279.24	\$279.24		
93893	TC	\$206.63	\$206.63		
93893	26	\$72.61	\$72.61		
93922		\$98.43	\$98.43		
93922	TC	\$82.88	\$82.88		
93922	26	\$15.55	\$15.55		
93923		\$157.87	\$157.87		
93923	TC	\$129.36	\$129.36		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93923	26	\$28.51	\$28.51		
93924		\$193.12	\$193.12		
93924	TC	\$161.57	\$161.57		
93924	26	\$31.54	\$31.54		
93925		\$247.28	\$247.28		
93925	TC	\$211.41	\$211.41		
93925	26	\$35.87	\$35.87		
93926		\$174.47	\$174.47		
93926	TC	\$150.27	\$150.27		
93926	26	\$24.20	\$24.20		
93930		\$200.25	\$200.25		
93930	TC	\$171.73	\$171.73		
93930	26	\$28.52	\$28.52		
93931		\$143.38	\$143.38		
93931	TC	\$124.37	\$124.37		
93931	26	\$19.01	\$19.01		
93965		\$99.46	\$99.46		
93965	TC	\$78.27	\$78.27		
93965	26	\$21.18	\$21.18		
93970		\$215.77	\$215.77		
93970	TC	\$173.85	\$173.85		
93970	26	\$41.92	\$41.92		
93971		\$152.47	\$152.47		
93971	TC	\$124.81	\$124.81		
93971	26	\$27.66	\$27.66		
93975		\$347.18	\$347.18		
93975	TC	\$237.82	\$237.82		
93975	26	\$109.35	\$109.35		
93976		\$213.77	\$213.77		
93976	TC	\$141.15	\$141.15		
93976	26	\$72.62	\$72.62		
93978		\$197.29	\$197.29		
93978	TC	\$157.10	\$157.10		
93978	26	\$40.19	\$40.19		
93979		\$143.25	\$143.25		
93979	TC	\$115.17	\$115.17		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
93979	26	\$28.07	\$28.07		
93980		\$274.50	\$274.50		
93980	TC	\$199.28	\$199.28		
93980	26	\$75.22	\$75.22		
93981		\$228.13	\$228.13		
93981	TC	\$201.76	\$201.76		
93981	26	\$26.37	\$26.37		
93982		\$33.40	\$33.40		
93990		\$164.15	\$164.15		
93990	TC	\$148.60	\$148.60		
93990	26	\$15.55	\$15.55		
94002		\$107.35	\$107.35		
94003		\$76.36	\$76.36		
94004		\$55.54	\$55.54		
94005		\$96.96	\$96.96		
94010		\$37.56	\$37.56		
94010	TC	\$27.60	\$27.60		
94010	26	\$9.95	\$9.95		
94014		\$56.63	\$56.63		
94015		\$25.92	\$25.92		
94016		\$30.71	\$30.71		
94060		\$64.20	\$64.20		
94060	TC	\$46.03	\$46.03		
94060	26	\$18.17	\$18.17		
94070		\$158.85	\$158.85		
94070	TC	\$123.81	\$123.81		
94070	26	\$35.04	\$35.04		
94150		\$24.40	\$24.40		
94150	TC	\$19.65	\$19.65		
94150	26	\$4.74	\$4.74		
94200		\$24.90	\$24.90		
94200	TC	\$18.41	\$18.41		
94200	26	\$6.49	\$6.49		
94240		\$41.94	\$41.94		
94240	TC	\$26.80	\$26.80		
94240	26	\$15.14	\$15.14		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
94250		\$33.67	\$33.67		
94250	TC	\$27.18	\$27.18		
94250	26	\$6.49	\$6.49		
94260		\$32.48	\$32.48		
94260	TC	\$24.70	\$24.70		
94260	26	\$7.79	\$7.79		
94350		\$45.28	\$45.28		
94350	TC	\$30.13	\$30.13		
94350	26	\$15.14	\$15.14		
94360		\$44.04	\$44.04		
94360	TC	\$28.90	\$28.90		
94360	26	\$15.14	\$15.14		
94370		\$43.17	\$43.17		
94370	TC	\$28.02	\$28.02		
94370	26	\$15.14	\$15.14		
94375		\$41.17	\$41.17		
94375	TC	\$23.01	\$23.01		
94375	26	\$18.17	\$18.17		
94400		\$56.02	\$56.02		
94400	TC	\$32.66	\$32.66		
94400	26	\$23.36	\$23.36		
94450		\$48.05	\$48.05		
94450	TC	\$24.68	\$24.68		
94450	26	\$23.37	\$23.37		
94452		\$57.81	\$57.81		
94452	TC	\$39.48	\$39.48		
94452	26	\$18.33	\$18.33		
94453		\$82.14	\$82.14		
94453	TC	\$58.59	\$58.59		
94453	26	\$23.56	\$23.56		
94610		\$76.47	\$76.47		
94620		\$135.52	\$135.52		
94620	TC	\$98.31	\$98.31		
94620	26	\$37.21	\$37.21		
94621		\$156.29	\$156.29		
94621	TC	\$73.66	\$73.66		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
94621	26	\$82.63	\$82.63		
94640		\$14.23	\$14.23		
94642		\$0.00	\$0.00		
94644		\$38.89	\$38.89		
94645		\$14.91	\$14.91		
94660		\$62.96	\$44.99		
94662		\$44.13	\$44.13		
94664		\$15.50	\$15.50		
94667		\$25.96	\$25.96		
94668		\$20.92	\$20.92		
94680		\$95.03	\$95.03		
94680	TC	\$79.89	\$79.89		
94680	26	\$15.14	\$15.14		
94681		\$125.48	\$125.48		
94681	TC	\$113.38	\$113.38		
94681	26	\$12.10	\$12.10		
94690		\$89.21	\$89.21		
94690	TC	\$84.88	\$84.88		
94690	26	\$4.33	\$4.33		
94720		\$56.58	\$56.58		
94720	TC	\$41.44	\$41.44		
94720	26	\$15.14	\$15.14		
94725		\$142.32	\$142.32		
94725	TC	\$127.17	\$127.17		
94725	26	\$15.14	\$15.14		
94750		\$69.87	\$69.87		
94750	TC	\$56.46	\$56.46		
94750	26	\$13.41	\$13.41		
94760		\$2.53	\$2.53		
94761		\$5.49	\$5.49		
94762		\$21.42	\$21.42		
94770		\$81.03	\$81.03		
94770	TC	\$72.37	\$72.37		
94770	26	\$8.66	\$8.66		
94772		\$0.00	\$0.00		
94772	TC	\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
94772	26	\$0.00	\$0.00		
94774		\$0.00	\$0.00		
94775		\$0.00	\$0.00		
94776		\$0.00	\$0.00		
94777		\$0.00	\$0.00		
94799		BR	BR		
94799	TC	BR	BR		
94799	26	BR	BR		
95004		\$4.61	\$4.61		
95010		\$20.78	\$9.50		
95012		\$20.27	\$20.27		
95015		\$13.26	\$9.50		
95024		\$6.28	\$6.28		
95027		\$6.28	\$6.28		
95028		\$10.04	\$10.04		
95044		\$8.79	\$8.79		
95052		\$10.88	\$10.88		
95056		\$7.53	\$7.53		
95060		\$15.48	\$15.48		
95065		\$8.79	\$8.79		
95070		\$95.31	\$95.31		
95071		\$122.06	\$122.06		
95075		\$77.52	\$59.13		
95115		\$17.16	\$17.16		
95117		\$21.75	\$21.75		
95120		\$25.31	\$25.31		
95125		\$26.18	\$26.18		
95130		\$28.42	\$28.42		
95131		\$35.36	\$35.36		
95132		\$42.81	\$42.81		
95133		\$51.12	\$51.12		
95134		\$61.61	\$61.61		
95144		\$9.32	\$3.89		
95145		\$16.84	\$3.89		
95146		\$22.28	\$4.31		
95147		\$21.02	\$3.89		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95148		\$28.13	\$4.31		
95149		\$37.32	\$4.31		
95165		\$11.41	\$3.89		
95170		\$8.90	\$3.89		
95180		\$153.98	\$124.31		
95199		BR	BR		
95250		\$163.00	\$163.00		
95251		\$31.73	\$31.73		
95803		\$0.00	\$0.00		
95803	TC	\$0.00	\$0.00		
95803	26	\$0.00	\$0.00		
95805		\$788.93	\$788.93		
95805	TC	\$676.55	\$676.55		
95805	26	\$112.38	\$112.38		
95806		\$250.60	\$250.60		
95806	TC	\$152.44	\$152.44		
95806	26	\$98.16	\$98.16		
95807		\$590.47	\$590.47		
95807	TC	\$493.16	\$493.16		
95807	26	\$97.31	\$97.31		
95808		\$689.39	\$689.39		
95808	TC	\$530.78	\$530.78		
95808	26	\$158.61	\$158.61		
95810		\$900.52	\$900.52		
95810	TC	\$690.84	\$690.84		
95810	26	\$209.67	\$209.67		
95811		\$973.79	\$973.79		
95811	TC	\$747.69	\$747.69		
95811	26	\$226.10	\$226.10		
95812		\$219.99	\$219.99		
95812	TC	\$151.82	\$151.82		
95812	26	\$68.17	\$68.17		
95813		\$291.90	\$291.90		
95813	TC	\$184.42	\$184.42		
95813	26	\$107.49	\$107.49		
95816		\$186.96	\$186.96		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95816	TC	\$118.38	\$118.38		
95816	26	\$68.59	\$68.59		
95819		\$209.53	\$209.53		
95819	TC	\$140.94	\$140.94		
95819	26	\$68.59	\$68.59		
95822		\$239.65	\$239.65		
95822	TC	\$171.06	\$171.06		
95822	26	\$68.59	\$68.59		
95824		\$0.00	\$0.00		
95824	TC	\$0.00	\$0.00		
95824	26	\$48.31	\$48.31		
95827		\$166.51	\$166.51		
95827	TC	\$100.86	\$100.86		
95827	26	\$65.65	\$65.65		
95829		\$1,624.36	\$1,624.36		
95829	TC	\$1,240.43	\$1,240.43		
95829	26	\$383.93	\$383.93		
95830		\$220.28	\$107.86		
95831		\$27.30	\$18.11		
95832		\$23.98	\$18.13		
95833		\$40.21	\$30.60		
95834		\$48.41	\$38.80		
95851		\$22.89	\$10.77		
95852		\$16.11	\$7.33		
95857		\$49.95	\$33.65		
95860		\$105.56	\$105.56		
95860	TC	\$44.32	\$44.32		
95860	26	\$61.24	\$61.24		
95861		\$130.57	\$130.57		
95861	TC	\$32.66	\$32.66		
95861	26	\$97.91	\$97.91		
95863		\$159.64	\$159.64		
95863	TC	\$41.44	\$41.44		
95863	26	\$118.21	\$118.21		
95864		\$205.49	\$205.49		
95864	TC	\$79.11	\$79.11		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95864	26	\$126.38	\$126.38		
95865		\$134.15	\$134.15		
95865	TC	\$29.38	\$29.38		
95865	26	\$104.77	\$104.77		
95866		\$91.05	\$91.05		
95866	TC	\$9.56	\$9.56		
95866	26	\$81.50	\$81.50		
95867		\$76.85	\$76.85		
95867	TC	\$25.95	\$25.95		
95867	26	\$50.90	\$50.90		
95868		\$106.03	\$106.03		
95868	TC	\$30.98	\$30.98		
95868	26	\$75.05	\$75.05		
95869		\$33.35	\$33.35		
95869	TC	\$9.63	\$9.63		
95869	26	\$23.72	\$23.72		
95870		\$32.93	\$32.93		
95870	TC	\$9.63	\$9.63		
95870	26	\$23.30	\$23.30		
95872		\$121.28	\$121.28		
95872	TC	\$27.22	\$27.22		
95872	26	\$94.06	\$94.06		
95873		\$32.98	\$32.98		
95873	TC	\$9.13	\$9.13		
95873	26	\$23.85	\$23.85		
95874		\$33.39	\$33.39		
95874	TC	\$9.13	\$9.13		
95874	26	\$24.27	\$24.27		
95875		\$114.66	\$114.66		
95875	TC	\$44.78	\$44.78		
95875	26	\$69.88	\$69.88		
95900		\$73.99	\$73.99		
95900	TC	\$47.25	\$47.25		
95900	26	\$26.74	\$26.74		
95903		\$78.94	\$78.94		
95903	TC	\$40.98	\$40.98		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95903	26	\$37.97	\$37.97		
95904		\$62.96	\$62.96		
95904	TC	\$41.40	\$41.40		
95904	26	\$21.57	\$21.57		
95920		\$195.33	\$195.33		
95920	TC	\$56.91	\$56.91		
95920	26	\$138.42	\$138.42		
95921		\$71.17	\$71.17		
95921	TC	\$16.74	\$16.74		
95921	26	\$54.43	\$54.43		
95922		\$77.14	\$77.14		
95922	TC	\$16.74	\$16.74		
95922	26	\$60.40	\$60.40		
95923		\$130.52	\$130.52		
95923	TC	\$73.99	\$73.99		
95923	26	\$56.52	\$56.52		
95925		\$74.27	\$74.27		
95925	TC	\$40.18	\$40.18		
95925	26	\$34.09	\$34.09		
95926		\$74.69	\$74.69		
95926	TC	\$40.18	\$40.18		
95926	26	\$34.51	\$34.51		
95927		\$75.96	\$75.96		
95927	TC	\$40.18	\$40.18		
95927	26	\$35.78	\$35.78		
95928		\$195.71	\$195.71		
95928	TC	\$99.72	\$99.72		
95928	26	\$95.99	\$95.99		
95929		\$203.60	\$203.60		
95929	TC	\$107.61	\$107.61		
95929	26	\$95.99	\$95.99		
95930		\$76.76	\$76.76		
95930	TC	\$54.76	\$54.76		
95930	26	\$22.01	\$22.01		
95933		\$71.86	\$71.86		
95933	TC	\$34.75	\$34.75		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95933	26	\$37.11	\$37.11		
95934		\$42.41	\$42.41		
95934	TC	\$9.63	\$9.63		
95934	26	\$32.78	\$32.78		
95936		\$44.58	\$44.58		
95936	TC	\$9.63	\$9.63		
95936	26	\$34.94	\$34.94		
95937		\$55.64	\$55.64		
95937	TC	\$15.07	\$15.07		
95937	26	\$40.57	\$40.57		
95950		\$277.62	\$277.62		
95950	TC	\$180.98	\$180.98		
95950	26	\$96.64	\$96.64		
95951		BR	BR		
95951	TC	BR	BR		
95951	26	\$379.65	\$379.65		
95953		\$474.60	\$474.60		
95953	TC	\$280.87	\$280.87		
95953	26	\$193.73	\$193.73		
95954		\$295.40	\$295.40		
95954	TC	\$139.65	\$139.65		
95954	26	\$155.75	\$155.75		
95955		\$150.13	\$150.13		
95955	TC	\$88.36	\$88.36		
95955	26	\$61.77	\$61.77		
95956		\$756.29	\$756.29		
95956	TC	\$561.71	\$561.71		
95956	26	\$194.58	\$194.58		
95957		\$201.30	\$201.30		
95957	TC	\$75.77	\$75.77		
95957	26	\$125.54	\$125.54		
95958		\$346.28	\$346.28		
95958	TC	\$77.87	\$77.87		
95958	26	\$268.41	\$268.41		
95961		\$251.37	\$251.37		
95961	TC	\$56.91	\$56.91		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
95961	26	\$194.46	\$194.46		
95962		\$263.93	\$263.93		
95962	TC	\$56.91	\$56.91		
95962	26	\$207.02	\$207.02		
95965		BR	BR		
95965	TC	BR	BR		
95965	26	\$508.18	\$508.18		
95966		BR	BR		
95966	TC	BR	BR		
95966	26	\$254.51	\$254.51		
95967		BR	BR		
95967	TC	BR	BR		
95967	26	\$215.49	\$215.49		
95970		\$28.50	\$27.66		
95971		\$48.82	\$46.73		
95972		\$98.81	\$94.63		
95973		\$59.95	\$57.86		
95974		\$192.80	\$192.80		
95975		\$107.86	\$107.86		
95978		\$242.88	\$216.71		
95979		\$112.19	\$104.72		
95980		\$131.13	\$117.83		
95981		\$60.66	\$60.66		
95982		\$40.88	\$23.71		
95990		\$64.84	\$64.84		
95991		\$98.52	\$44.19		
95992		\$0.00	\$0.00		
95999		BR	BR		
96000		\$102.97	\$102.97		
96001		\$122.46	\$122.46		
96002		\$25.06	\$25.06		
96003		\$23.75	\$23.75		
96004		\$137.57	\$137.57		
96020		\$0.00	\$0.00		
96020	TC	\$0.00	\$0.00		
96020	26	\$193.42	\$193.42		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
96040		\$0.00	\$0.00		
96101		\$111.36	\$110.53		
96102		\$49.83	\$29.59		
96103		\$32.12	\$30.46		
96105		\$80.84	\$80.84		
96110		\$15.23	\$15.23		
96111		\$165.71	\$165.71		
96116		\$124.41	\$116.56		
96118		\$147.54	\$116.15		
96119		\$74.26	\$39.98		
96120		\$54.01	\$30.46		
96125		\$115.48	\$34.15		
96150		\$0.00	\$0.00		
96151		\$0.00	\$0.00		
96152		\$0.00	\$0.00		
96153		\$0.00	\$0.00		
96154		\$0.00	\$0.00		
96155		\$0.00	\$0.00		
96360		\$75.95	\$75.95		
96361		\$22.70	\$22.70		
96365		\$92.17	\$92.17		
96366		\$30.13	\$30.13		
96367		\$46.72	\$46.72		
96368		\$28.20	\$28.20		
96369		\$197.91	\$197.91		
96370		\$22.09	\$22.09		
96371		\$95.18	\$95.18		
96372		\$28.21	\$28.21		
96373		\$24.58	\$24.58		
96374		\$72.68	\$72.68		
96375		\$32.20	\$32.20		
96376		\$0.00	\$0.00		
96379		BR	BR		
96401		<del>\$72.93</del>	<del>\$72.93</del>		
96402		<del>\$39.41</del>	<del>\$39.41</del>		
96405		<del>\$104.68</del>	<del>\$33.21</del>		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
96406		\$143.67	\$48.39		
96409		\$134.24	\$134.24		
96411		\$77.95	\$77.95		
96413		\$189.34	\$189.34		
96415		\$43.24	\$43.24		
96416		\$203.17	\$203.17		
96417		\$92.87	\$92.87		
96420		\$55.25	\$55.25		
96422		\$54.41	\$54.41		
96423		\$20.92	\$20.92		
96425		\$62.77	\$62.77		
96440		\$418.49	\$152.69		
96445		\$407.65	\$142.26		
96450		\$346.85	\$123.26		
96521		\$167.61	\$167.61		
96522		\$121.35	\$121.35		
96523		\$30.70	\$30.70		
96542		\$223.06	\$87.23		
96549		BR	BR		
96567		\$43.09	\$43.09		
96570		\$65.28	\$65.28		
96571		\$33.27	\$33.27		
96900		\$21.33	\$21.33		
96902		\$28.81	\$25.05		
96904		\$0.00	\$0.00		
96910		\$46.85	\$46.85		
96912		\$58.98	\$58.98		
96913		\$79.51	\$79.51		
96920		\$378.05	\$78.81		
96921		\$381.85	\$80.11		
96922		\$457.30	\$143.02		
96999		BR	BR		
97001		\$98.55	\$85.07		
97002		\$52.88	\$42.77		
97003		\$104.81	\$82.66		
97004		\$61.07	\$40.85		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
97005		\$92.51	\$89.89		
97006		\$43.33	\$40.71		
97010		\$0.00	\$0.00		
97012		\$19.83	\$19.83		
97014		\$18.71	\$18.71		
97016		\$18.71	\$18.71		
97018		\$8.81	\$8.81		
97022		\$19.65	\$19.65		
97024		\$7.85	\$7.85		
97026		\$6.41	\$6.41		
97028		\$7.89	\$7.89		
97032		\$20.79	\$20.79		
97033		\$27.57	\$27.57		
97034		\$18.78	\$18.78		
97035		\$16.37	\$16.37		
97036		\$30.49	\$30.49		
97039		<del>\$15.39</del>	<del>\$15.39</del>		
97110		\$38.13	\$38.13		
97112		\$38.59	\$38.59		
97113		\$43.88	\$43.88		
97116		\$32.70	\$32.70		
97124		\$29.20	\$29.20		
97139		<del>\$21.48</del>	<del>\$21.48</del>		
97140		\$35.17	\$35.17		
97150		\$23.26	\$23.26		
97530		\$38.56	\$38.56		
97532		\$32.77	\$32.77		
97533		\$34.22	\$34.22		
97535		\$40.03	\$40.03		
97537		\$0.00	\$0.00		
97542		\$36.65	\$36.65		
97545		\$0.00	\$0.00		
97546		\$0.00	\$0.00		
97597		\$63.64	\$63.64		
97598		\$81.08	\$81.08		
97602		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
97605		BR	BR		
97606		BR	BR		
97750		\$38.10	\$38.10		
97755		\$46.19	\$46.19		
97760		\$40.62	\$33.96		
97761		\$37.27	\$32.99		
97762		\$33.73	\$22.79		
97799		BR	BR		
97802		\$0.00	\$0.00		
97803		\$0.00	\$0.00		
97804		\$0.00	\$0.00		
97810		\$32.09	\$32.09		
97811		\$26.99	\$26.99		
97813		\$34.64	\$34.64		
97814		\$29.54	\$29.54		
98925		\$39.06	\$29.91		
98926		\$54.44	\$45.77		
98927		\$70.85	\$60.25		
98928		\$82.74	\$70.22		
98929		\$95.14	\$79.74		
98940		\$34.72	\$28.95		
98941		\$48.18	\$42.40		
98942		\$63.62	\$57.36		
98943		\$32.20	\$28.35		
98960		\$0.00	\$0.00		
98961		\$0.00	\$0.00		
98962		\$0.00	\$0.00		
98966		\$0.00	\$0.00		
98967		\$0.00	\$0.00		
98968		\$0.00	\$0.00		
98969		\$0.00	\$0.00		
99000		<del>\$7.38</del>	<del>\$7.38</del>		
99001		<del>\$8.25</del>	<del>\$8.25</del>		
99002		\$0.00	\$0.00		
99024		\$0.00	\$0.00		
99026		BR	BR		

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99027		BR	BR		
99050		\$0.00	\$0.00		
99051		\$0.00	\$0.00		
99053		\$0.00	\$0.00		
99056		\$0.00	\$0.00		
99058		\$29.97	\$29.97		
99060		BR	BR		
99070		BR	BR		
99071		\$0.00	\$0.00		
99075		BR	BR		
99078		\$0.00	\$0.00		
99080		\$0.00	\$0.00		
99082		\$0.00	\$0.00		
99090		\$0.00	\$0.00		
99091		BR	BR		
99100		BR	BR		
99116		BR	BR		
99135		BR	BR		
99140		BR	BR		
99143		\$0.00	\$0.00		
99144		BR	BR		
99145		BR	BR		
99148		\$0.00	\$0.00		
99149		BR	BR		
99150		BR	BR		
99170		\$0.00	\$0.00		
99172		BR	BR		
99173		BR	BR		
99174		\$0.00	\$0.00		
99175		\$61.96	\$61.96		
99183		\$311.02	\$138.42		
99185		\$28.46	\$28.46		
99186		\$92.81	\$92.81		
99190		\$569.11	\$569.11		
99191		\$426.52	\$426.52		
99192		\$284.35	\$284.35		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99195		\$19.25	\$19.25		
99199		\$0.00	\$0.00		
99201		\$41.85	\$27.23		
99202		\$73.64	\$54.00		
99203		\$110.52	\$82.93		
99204		\$156.54	\$121.85		
99205		\$197.97	\$160.77		
99211		\$25.00	\$10.37		
99212		\$43.94	\$27.23		
99213		\$60.69	\$40.63		
99214		\$94.12	\$66.12		
99215		\$137.25	\$106.74		
99217		\$0.00	\$80.69		
99218		\$0.00	\$76.51		
99219		\$0.00	\$127.12		
99220		\$0.00	\$178.10		
99221		\$0.00	\$76.93		
99222		\$0.00	\$127.96		
99223		\$0.00	\$178.09		
99231		\$0.00	\$38.46		
99232		\$0.00	\$63.10		
99233		\$0.00	\$90.33		
99234		\$0.00	\$158.48		
99235		\$0.00	\$209.48		
99236		\$0.00	\$260.49		
99238		\$0.00	\$80.68		
99239		\$0.00	\$109.60		
99241		\$57.30	\$39.33		
99242		\$105.00	\$80.34		
99243		\$138.86	\$106.26		
99244		\$196.58	\$157.29		
99245		\$253.00	\$208.28		
99251		\$0.00	\$41.46		
99252		\$0.00	\$82.90		
99253		\$0.00	\$112.30		
99254		\$0.00	\$161.12		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99255		\$0.00	\$222.49		
99281		\$0.00	\$21.95		
99282		\$0.00	\$36.91		
99283		\$0.00	\$81.83		
99284		\$0.00	\$127.77		
99285		\$0.00	\$199.19		
99288		\$0.00	BR		
99289		\$0.00	\$0.00		
99290		\$0.00	\$0.00		
99291		\$280.41	\$235.28		
99292		\$124.32	\$117.22		
99293		\$0.00	\$0.00		
99294		\$0.00	\$0.00		
99295		\$0.00	\$0.00		
99296		\$0.00	\$0.00		
99298		\$0.00	\$0.00		
99299		\$0.00	\$0.00		
99300		\$0.00	\$0.00		
99304		\$75.53	\$75.53		
99305		\$100.33	\$100.33		
99306		\$123.85	\$123.85		
99307		\$39.01	\$39.01		
99308		\$64.59	\$64.59		
99309		\$91.07	\$91.07		
99310		\$114.04	\$114.04		
99315		\$70.77	\$67.01		
99316		\$94.07	\$89.47		
99318		\$75.53	\$75.53		
99324		\$67.12	\$62.57		
99325		\$98.41	\$93.04		
99326		\$142.82	\$137.04		
99327		\$188.09	\$183.13		
99328		\$232.92	\$228.37		
99334		\$51.90	\$46.11		
99335		\$82.33	\$76.14		
99336		\$127.19	\$120.58		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99337		\$187.26	\$180.24		
99339		BR	BR		
99340		BR	BR		
99341		\$0.00	\$66.79		
99342		\$0.00	\$97.04		
99343		\$0.00	\$141.98		
99344		\$0.00	\$186.95		
99345		\$0.00	\$231.50		
99347		\$0.00	\$52.09		
99348		\$0.00	\$86.49		
99349		\$0.00	\$134.80		
99350		\$0.00	\$196.56		
99354		\$110.91	\$105.47		
99355		\$110.07	\$104.22		
99356		\$0.00	\$103.27		
99357		\$0.00	\$104.10		
99358		\$155.86	\$155.86		
99359		\$77.68	\$77.68		
99360		\$106.02	\$106.02		
99363		\$128.78	\$91.15		
99364		\$45.08	\$35.57		
99366		\$45.26	\$35.38		
99367		\$47.16	\$46.75		
99368		\$61.03	\$61.03		
99371		\$14.40	\$14.40		
99372		\$35.44	\$35.44		
99373		\$70.98	\$70.98		
99374		\$79.07	\$67.79		
99375		\$143.43	\$143.43		
99377		\$79.07	\$67.79		
99378		\$159.73	\$159.73		
99379		\$78.64	\$78.64		
99380		\$119.60	\$119.60		
99381		\$0.00	\$0.00		
99382		\$0.00	\$0.00		
99383		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99384		\$0.00	\$0.00		
99385		\$0.00	\$0.00		
99386		\$0.00	\$0.00		
99387		\$0.00	\$0.00		
99391		\$0.00	\$0.00		
99392		\$0.00	\$0.00		
99393		\$0.00	\$0.00		
99394		\$0.00	\$0.00		
99395		\$0.00	\$0.00		
99396		\$0.00	\$0.00		
99397		\$0.00	\$0.00		
99401		\$47.75	\$29.36		
99402		\$79.64	\$59.17		
99403		\$110.69	\$88.96		
99404		\$142.58	\$118.34		
99406		\$0.00	\$0.00		
99407		\$0.00	\$0.00		
99408		<del>\$29.86</del>	<del>\$27.80</del>		
99409		<del>\$36.86</del>	<del>\$35.21</del>		
99411		\$0.00	\$0.00		
99412		\$0.00	\$0.00		
99420		\$0.00	\$0.00		
99429		\$0.00	\$0.00		
99431		\$0.00	\$0.00		
99432		\$0.00	\$0.00		
99433		\$0.00	\$0.00		
99435		\$0.00	\$0.00		
99436		\$0.00	\$0.00		
99440		\$0.00	\$0.00		
99441		\$0.00	\$0.00		
99442		\$0.00	\$0.00		
99443		\$0.00	\$0.00		
99444		\$0.00	\$0.00		
99450		\$0.00	\$0.00		
99455		\$0.00	\$0.00		
99456		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
99477		\$0.00	\$0.00		
99499		BR	BR		
99500		\$0.00	\$0.00		
99501		\$0.00	\$0.00		
99502		\$0.00	\$0.00		
99503		BR	BR		
99504		\$0.00	\$0.00		
99505		\$0.00	\$0.00		
99506		\$0.00	\$0.00		
99507		\$0.00	\$0.00		
99509		\$0.00	\$0.00		
99510		\$0.00	\$0.00		
99511		\$0.00	\$0.00		
99512		\$0.00	\$0.00		
99605		\$0.00	\$0.00		
99606		\$0.00	\$0.00		
99607		\$0.00	\$0.00		
A0021		\$0.00	\$0.00		
A0090		\$0.00	\$0.00		
A0100		\$2.50	\$2.50		
A0110		BR	BR		
A0120		BR	BR		
A0130		\$30.00	\$30.00		
A0140		BR	BR		
A0160		\$0.00	\$0.00		
A0170		\$0.00	\$0.00		
A0180		\$0.00	\$0.00		
A0190		\$0.00	\$0.00		
A0200		\$0.00	\$0.00		
A0210		\$0.00	\$0.00		
A0225		\$0.00	\$0.00		
A0380		\$5.50	\$5.50		
A0382		\$0.00	\$0.00		
A0384		\$0.00	\$0.00		
A0390		\$6.60	\$6.60		
A0392		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A0394		\$0.00	\$0.00		
A0396		\$0.00	\$0.00		
A0398		\$0.00	\$0.00		
A0420		\$20.00	\$20.00		
A0422		\$0.00	\$0.00		
A0424		\$20.00	\$20.00		
A0425		\$2.50	\$2.50		
A0426		\$425.00	\$425.00		
A0427		\$425.00	\$425.00		
A0428		\$200.00	\$200.00		
A0429		\$250.00	\$250.00		
A0430		BR	BR		
A0431		BR	BR		
A0432		\$0.00	\$0.00		
A0433		\$525.00	\$525.00		
A0434		BR	BR		
A0435		BR	BR		
A0436		BR	BR		
A0888		\$0.00	\$0.00		
A0998		BR	BR		
A0999		BR	BR		
A4206		\$0.32	\$0.32		
A4207		\$0.34	\$0.34		
A4208		\$0.46	\$0.46		
A4209		\$0.43	\$0.43		
A4210		\$15.00	\$15.00		
A4211		BR	BR		
A4212		\$9.00	\$9.00		
A4213		\$0.68	\$0.68		
A4215		\$0.27	\$0.27		
A4216		\$1.42	\$1.42		
A4217		\$6.04	\$6.04		
A4218		BR	BR		
A4220		BR	BR		
A4221		\$21.59	\$21.59		
A4222		\$42.86	\$42.86		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4223		BR	BR		
A4230		BR	BR		
A4231		BR	BR		
A4232		\$2.61	\$2.61		
A4233		\$6.28	\$6.28		
A4234		\$3.63	\$3.63		
A4235		\$2.34	\$2.34		
A4236		\$1.68	\$1.68		
A4244		\$0.95	\$0.95		
A4245		BR	BR		
A4246		BR	BR		
A4247		BR	BR		
A4248		BR	BR		
A4250		BR	BR		
A4252		\$0.00	\$0.00		
A4253		\$42.00	\$42.00		
A4255		\$3.73	\$3.73		
A4256		\$11.50	\$11.50		
A4257		\$12.69	\$12.69		
A4258		\$20.00	\$20.00		
A4259		\$14.00	\$14.00		
A4261		\$0.00	\$0.00		
A4262		BR	BR		
A4263		BR	BR		
A4265		\$25.00	\$25.00		
A4266		\$0.00	\$0.00		
A4267		\$0.00	\$0.00		
A4268		\$0.00	\$0.00		
A4269		\$0.00	\$0.00		
A4270		\$20.00	\$20.00		
A4280		\$4.69	\$4.69		
A4290		\$139.81	\$139.81		
A4300		BR	BR		
A4301		BR	BR		
A4305		BR	BR		
A4306		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4310		\$7.37	\$7.37		
A4311		\$14.16	\$14.16		
A4312		\$17.20	\$17.20		
A4313		\$17.67	\$17.67		
A4314		\$24.12	\$24.12		
A4315		\$25.17	\$25.17		
A4316		<del>\$27.09</del>	<del>\$27.09</del>		
A4320		\$4.53	\$4.53		
A4321		BR	BR		
A4322		\$3.00	\$3.00		
A4326		\$9.89	\$9.89		
A4327		\$40.32	\$40.32		
A4328		\$9.04	\$9.04		
A4330		\$5.80	\$5.80		
A4331		\$3.25	\$3.25		
A4332		\$0.00	\$0.00		
A4333		\$2.10	\$2.10		
A4334		\$4.71	\$4.71		
A4335		\$1.00	\$1.00		
A4338		\$11.70	\$11.70		
A4340		\$28.00	\$28.00		
A4344		\$18.00	\$18.00		
A4346		<del>\$18.69</del>	<del>\$18.69</del>		
A4349		\$1.04	\$1.04		
A4351		\$1.75	\$1.75		
A4352		\$6.00	\$6.00		
A4353		\$6.71	\$6.71		
A4354		\$11.25	\$11.25		
A4355		\$8.50	\$8.50		
A4356		\$55.00	\$55.00		
A4357		\$10.50	\$10.50		
A4358		\$6.33	\$6.33		
A4361		\$17.52	\$17.52		
A4362		\$4.00	\$4.00		
A4363		\$2.36	\$2.36		
A4364		\$2.38	\$2.38		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4365		\$10.80	\$10.80		
A4366		\$12.91	\$12.91		
A4367		\$7.01	\$7.01		
A4368		\$0.43	\$0.43		
A4369		\$3.00	\$3.00		
A4371		\$6.50	\$6.50		
A4372		\$3.98	\$3.98		
A4373		\$6.28	\$6.28		
A4375		\$16.38	\$16.38		
A4376		\$45.38	\$45.38		
A4377		\$4.09	\$4.09		
A4378		\$29.33	\$29.33		
A4379		\$14.33	\$14.33		
A4380		\$35.60	\$35.60		
A4381		\$4.40	\$4.40		
A4382		\$23.48	\$23.48		
A4383		\$26.89	\$26.89		
A4384		\$9.18	\$9.18		
A4385		\$4.86	\$4.86		
A4387		\$3.83	\$3.83		
A4388		\$4.16	\$4.16		
A4389		\$5.93	\$5.93		
A4390		\$9.17	\$9.17		
A4391		\$6.74	\$6.74		
A4392		\$6.34	\$6.34		
A4393		\$8.75	\$8.75		
A4394		\$2.46	\$2.46		
A4395		\$0.05	\$0.05		
A4396		\$40.48	\$40.48		
A4397		\$4.57	\$4.57		
A4398		\$13.17	\$13.17		
A4399		\$9.95	\$9.95		
A4400		\$46.62	\$46.62		
A4402		\$1.52	\$1.52		
A4404		\$2.00	\$2.00		
A4405		\$3.40	\$3.40		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4406		\$5.74	\$5.74		
A4407		\$8.76	\$8.76		
A4408		\$9.87	\$9.87		
A4409		\$6.22	\$6.22		
A4410		\$9.04	\$9.04		
A4411		\$5.10	\$5.10		
A4412		\$2.70	\$2.40		
A4413		\$5.50	\$5.50		
A4414		\$4.93	\$4.93		
A4415		\$6.00	\$6.00		
A4416		\$2.75	\$2.75		
A4417		\$3.72	\$3.72		
A4418		\$1.81	\$1.81		
A4419		\$1.74	\$1.74		
A4420		BR	BR		
A4422		\$0.12	\$0.12		
A4423		\$1.86	\$1.86		
A4424		\$4.75	\$4.75		
A4425		\$3.58	\$3.58		
A4426		\$2.73	\$2.73		
A4427		\$2.78	\$2.78		
A4428		\$6.51	\$6.51		
A4429		\$8.25	\$8.25		
A4430		\$8.52	\$8.52		
A4431		\$6.22	\$6.22		
A4432		\$3.59	\$3.59		
A4433		\$3.34	\$3.34		
A4434		\$3.76	\$3.76		
A4450		\$0.09	\$0.09		
A4452		\$0.36	\$0.36		
A4455		\$1.36	\$1.36		
A4458		BR	BR		
A4461		\$24.00	\$24.00		
A4463		\$24.00	\$24.00		
A4465		\$5.00	\$5.00		
A4470		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4480		\$0.00	\$0.00		
A4481		\$0.36	\$0.36		
A4483		BR	BR		
A4490		\$40.00	\$40.00		
A4495		\$65.00	\$65.00		
A4500		\$40.00	\$40.00		
A4510		\$73.00	\$73.00		
A4520		BR	BR		
A4550		\$30.00	\$30.00		
A4554		\$0.48	\$0.48		
A4556		\$0.00	\$0.00		
A4557		\$19.50	\$19.50		
A4558		\$0.00	\$0.00		
A4559		\$0.00	\$0.00		
A4561		\$0.00	\$0.00		
A4562		\$0.00	\$0.00		
A4565		\$6.30	\$6.30		
A4570		\$15.00	\$15.00		
A4575		BR	BR		
A4580		\$0.00	\$0.00		
A4590		\$0.00	\$0.00		
A4595		\$0.00	\$0.00		
A4600		BR	BR		
A4601		BR	BR		
A4604		\$66.81	\$66.81		
A4605		\$16.40	\$16.40		
A4606		BR	BR		
A4608		\$58.15	\$58.15		
A4611		\$187.38	\$187.38		
A4612		\$64.80	\$64.80		
A4613		\$137.55	\$137.55		
A4614		\$22.68	\$22.68		
A4615		\$2.00	\$2.00		
A4616		\$1.64	\$1.64		
A4617		\$5.19	\$5.19		
A4618		\$7.21	\$7.21		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A4619		\$2.61	\$2.61		
A4620		\$2.22	\$2.22		
A4623		\$5.31	\$5.31		
A4624		\$2.51	\$2.51		
A4625		\$6.61	\$6.61		
A4626		\$3.05	\$3.05		
A4627		\$22.91	\$22.91		
A4628		\$0.00	\$0.00		
A4629		\$6.61	\$6.61		
A4630		\$0.00	\$0.00		
A4633		\$41.04	\$41.04		
A4634		\$0.00	\$0.00		
A4635		\$4.19	\$4.19		
A4636		\$3.82	\$3.82		
A4637		\$2.62	\$2.62		
A4638		BR	BR		
A4639		\$0.00	\$0.00		
A4640		\$51.68	\$51.68		
A4641		BR	BR		
A4648		\$0.00	\$0.00		
A4649		\$10.00	\$10.00		
A4650		\$0.00	\$0.00		
A4660		\$43.50	\$43.50		
A4663		\$16.50	\$16.50		
A4670		\$79.00	\$79.00		
A4927		\$15.50	\$15.50		
A4930		\$1.00	\$1.00		
A4931		BR	BR		
A4932		BR	BR		
A5051		\$1.91	\$1.91		
A5052		\$1.78	\$1.78		
A5053		\$1.66	\$1.66		
A5054		\$1.86	\$1.86		
A5055		\$1.54	\$1.54		
A5061		\$2.84	\$2.84		
A5062		\$2.65	\$2.65		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A5063		\$2.63	\$2.63		
A5071		\$4.42	\$4.42		
A5072		\$3.36	\$3.36		
A5073		\$3.12	\$3.12		
A5081		\$3.14	\$3.14		
A5082		\$11.34	\$11.34		
A5083		\$2.39	\$2.39		
A5093		\$1.58	\$1.58		
A5102		\$23.00	\$23.00		
A5105		\$45.68	\$45.68		
A5112		\$30.05	\$30.05		
A5113		\$3.81	\$3.81		
A5114		\$7.24	\$7.24		
A5120		\$0.22	\$0.22		
A5121		\$6.80	\$6.80		
A5122		\$12.26	\$12.26		
A5126		\$1.07	\$1.07		
A5131		\$18.00	\$18.00		
A5200		\$10.77	\$10.77		
A5500		\$59.36	\$59.36		
A5501		\$178.04	\$178.04		
A5503		\$26.40	\$26.40		
A5504		\$26.40	\$26.40		
A5505		\$26.40	\$26.40		
A5506		\$26.40	\$26.40		
A5507		\$26.40	\$26.40		
A5508		BR	BR		
A5510		BR	BR		
A5512		\$24.00	\$24.00		
A5513		\$36.00	\$36.00		
A6000		BR	BR		
A6010		\$30.60	\$30.60		
A6011		\$2.28	\$2.28		
A6021		\$21.02	\$21.02		
A6022		\$21.02	\$21.02		
A6023		\$190.30	\$190.30		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A6024		\$6.19	\$6.19		
A6025		\$69.50	\$69.50		
A6154		\$13.29	\$13.29		
A6196		\$7.10	\$7.10		
A6197		\$15.68	\$15.68		
A6198		\$22.00	\$22.00		
A6199		\$5.04	\$5.04		
A6200		\$9.06	\$9.06		
A6201		\$19.84	\$19.84		
A6202		\$33.27	\$33.27		
A6203		\$3.19	\$3.19		
A6204		\$5.94	\$5.94		
A6205		\$4.57	\$4.57		
A6206		\$0.97	\$0.97		
A6207		\$7.00	\$7.00		
A6208		\$7.00	\$7.00		
A6209		\$7.14	\$7.14		
A6210		\$19.00	\$19.00		
A6211		\$28.00	\$28.00		
A6212		\$9.25	\$9.25		
A6213		\$10.00	\$10.00		
A6214		\$14.63	\$14.63		
A6215		\$2.33	\$2.33		
A6216		\$0.08	\$0.08		
A6217		\$0.35	\$0.35		
A6218		\$0.58	\$0.58		
A6219		\$0.91	\$0.91		
A6220		\$2.46	\$2.46		
A6221		\$2.60	\$2.60		
A6222		\$2.28	\$2.28		
A6223		\$2.45	\$2.45		
A6224		\$3.44	\$3.44		
A6228		\$1.00	\$1.00		
A6229		\$3.44	\$3.44		
A6230		\$2.80	\$2.80		
A6231		\$4.66	\$4.66		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A6232		\$6.88	\$6.88		
A6233		\$19.19	\$19.19		
A6234		\$6.24	\$6.24		
A6235		\$16.05	\$16.05		
A6236		\$25.99	\$25.99		
A6237		\$7.54	\$7.54		
A6238		\$21.74	\$21.74		
A6239		\$23.00	\$23.00		
A6240		\$11.68	\$11.68		
A6241		\$2.45	\$2.45		
A6242		\$5.79	\$5.79		
A6243		\$11.75	\$11.75		
A6244		\$37.46	\$37.46		
A6245		\$6.93	\$6.93		
A6246		\$9.46	\$9.46		
A6247		\$22.68	\$22.68		
A6248		\$15.49	\$15.49		
A6250		\$50.00	\$50.00		
A6251		\$1.90	\$1.90		
A6252		\$3.10	\$3.10		
A6253		\$6.05	\$6.05		
A6254		\$1.16	\$1.16		
A6255		\$2.89	\$2.89		
A6256		\$5.00	\$5.00		
A6257		\$1.46	\$1.46		
A6258		\$4.10	\$4.10		
A6259		\$10.43	\$10.43		
A6260		\$20.00	\$20.00		
A6261		\$3.21	\$3.21		
A6262		\$0.45	\$0.45		
A6266		\$1.83	\$1.83		
A6402		\$0.15	\$0.15		
A6403		\$0.41	\$0.41		
A6404		\$0.82	\$0.82		
A6407		\$1.88	\$1.88		
A6410		\$0.39	\$0.39		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A6411		BR	BR		
A6412		BR	BR		
A6413		\$0.00	\$0.00		
A6441		\$0.67	\$0.67		
A6442		\$0.17	\$0.17		
A6443		\$0.29	\$0.29		
A6444		\$0.56	\$0.56		
A6445		\$0.32	\$0.32		
A6446		\$0.41	\$0.41		
A6447		\$0.67	\$0.67		
A6448		\$1.16	\$1.16		
A6449		\$1.75	\$1.75		
A6450		BR	BR		
A6451		\$5.91	\$5.91		
A6452		\$5.91	\$5.91		
A6453		\$0.61	\$0.61		
A6454		\$0.77	\$0.77		
A6455		\$1.39	\$1.39		
A6456		\$1.28	\$1.28		
A6457		\$1.14	\$1.14		
A6501		BR	BR		
A6502		BR	BR		
A6503		BR	BR		
A6504		BR	BR		
A6505		BR	BR		
A6506		BR	BR		
A6507		BR	BR		
A6508		BR	BR		
A6509		BR	BR		
A6510		BR	BR		
A6511		BR	BR		
A6512		BR	BR		
A6513		BR	BR		
A6530		\$45.00	\$45.00		
A6531		\$43.27	\$43.27		
A6532		\$60.96	\$60.96		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A6533		\$44.00	\$44.00		
A6534		\$60.00	\$60.00		
A6535		\$65.00	\$65.00		
A6536		\$73.00	\$73.00		
A6537		\$65.00	\$65.00		
A6538		\$65.00	\$65.00		
A6539		\$125.00	\$125.00		
A6540		\$150.00	\$150.00		
A6541		\$175.00	\$175.00		
A6542		\$200.00	\$200.00		
A6543		\$150.00	\$150.00		
A6544		\$50.00	\$50.00		
A6545		BR	BR		
A6549		<del>\$45.00</del>	<del>\$45.00</del>		
A6550		\$27.42	\$27.42		
A7000		\$8.59	\$8.59		
A7001		\$31.55	\$31.55		
A7002		\$3.65	\$3.65		
A7003		\$2.22	\$2.22		
A7004		\$1.72	\$1.72		
A7005		\$29.40	\$29.40		
A7006		\$9.10	\$9.10		
A7007		\$4.40	\$4.40		
A7008		\$10.49	\$10.49		
A7009		\$40.10	\$40.10		
A7010		\$22.50	\$22.50		
A7011		BR	BR		
A7012		\$3.07	\$3.07		
A7013		\$0.79	\$0.79		
A7014		\$4.28	\$4.28		
A7015		\$1.56	\$1.56		
A7016		\$6.91	\$6.91		
A7017		\$127.85	\$127.85		
A7018		\$3.60	\$3.60		
A7025		\$434.94	\$434.94		
A7026		\$28.75	\$28.75		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A7027		\$223.82	\$223.82		
A7028		\$59.45	\$59.45		
A7029		\$24.29	\$24.29		
A7030		\$188.64	\$188.64		
A7031		\$69.77	\$69.77		
A7032		\$40.53	\$40.53		
A7033		\$28.41	\$28.41		
A7034		\$117.64	\$117.64		
A7035		\$39.75	\$39.75		
A7036		\$15.47	\$15.47		
A7037		\$40.87	\$40.87		
A7038		\$4.58	\$4.58		
A7039		\$13.99	\$13.99		
A7040		BR	BR		
A7041		BR	BR		
A7042		\$180.47	\$180.47		
A7043		BR	BR		
A7044		\$120.91	\$120.91		
A7045		\$19.47	\$19.47		
A7046		\$19.51	\$19.51		
A7501		\$105.03	\$105.03		
A7502		\$49.91	\$49.91		
A7503		\$11.33	\$11.33		
A7504		\$0.67	\$0.67		
A7505		\$4.68	\$4.68		
A7506		\$0.33	\$0.33		
A7507		\$2.49	\$2.49		
A7508		\$2.87	\$2.87		
A7509		\$1.41	\$1.41		
A7520		\$47.48	\$47.48		
A7521		\$47.05	\$47.05		
A7522		\$45.16	\$45.16		
A7523		BR	BR		
A7524		\$77.40	\$77.40		
A7525		\$2.07	\$2.07		
A7526		\$3.37	\$3.37		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A7527		\$3.58	\$3.58		
A8000		\$153.35	\$153.35		
A8001		BR	BR		
A8002		\$555.00	\$555.00		
A8003		BR	BR		
A8004		BR	BR		
A9150		\$0.00	\$0.00		
A9152		\$0.00	\$0.00		
A9153		\$0.00	\$0.00		
A9155		\$6.99	\$6.99		
A9180		BR	BR		
A9270		\$0.00	\$0.00		
A9274		\$0.00	\$0.00		
A9275		BR	BR		
A9276		\$0.00	\$0.00		
A9277		\$0.00	\$0.00		
A9278		\$0.00	\$0.00		
A9279		\$0.00	\$0.00		
A9280		\$0.00	\$0.00		
A9281		BR	BR		
A9282		BR	BR		
A9283		\$0.00	\$0.00		
A9284		BR	BR		
A9300		BR	BR		
A9500		BR	BR		
A9501		\$60.00	\$60.00		
A9502		BR	BR		
A9503		BR	BR		
A9504		BR	BR		
A9505		BR	BR		
A9507		BR	BR		
A9508		BR	BR		
A9509		\$100.00	\$100.00		
A9510		\$60.00	\$60.00		
A9512		BR	BR		
A9516		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A9517		BR	BR		
A9521		BR	BR		
A9524		BR	BR		
A9526		BR	BR		
A9527		BR	BR		
A9528		BR	BR		
A9529		BR	BR		
A9530		BR	BR		
A9531		BR	BR		
A9532		BR	BR		
A9535		BR	BR		
A9536		BR	BR		
A9537		BR	BR		
A9538		BR	BR		
A9539		BR	BR		
A9540		BR	BR		
A9541		BR	BR		
A9542		BR	BR		
A9543		BR	BR		
A9544		BR	BR		
A9545		BR	BR		
A9546		BR	BR		
A9547		BR	BR		
A9548		BR	BR		
A9550		BR	BR		
A9551		BR	BR		
A9552		BR	BR		
A9553		BR	BR		
A9554		BR	BR		
A9555		BR	BR		
A9556		BR	BR		
A9557		BR	BR		
A9558		BR	BR		
A9559		BR	BR		
A9560		BR	BR		
A9561		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
A9562		BR	BR		
A9563		BR	BR		
A9564		BR	BR		
A9565		BR	BR		
A9566		BR	BR		
A9567		BR	BR		
A9568		BR	BR		
A9569		\$0.00	\$0.00		
A9570		\$0.00	\$0.00		
A9571		\$0.00	\$0.00		
A9572		\$60.00	\$60.00		
A9576		\$2.96	\$2.96		
A9577		\$3.43	\$3.43		
A9578		\$3.22	\$3.22		
A9579		\$3.06	\$3.06		
A9580		BR	BR		
A9698		\$0.00	\$0.00		
A9700		BR	BR		
A9900		\$0.00	\$0.00		
A9901		\$0.00	\$0.00		
A9999		\$0.00	\$0.00		
B4034		\$7.50	\$7.50		
B4035		\$15.00	\$15.00		
B4036		\$10.00	\$10.00		
B4081		\$36.00	\$36.00		
B4082		\$26.00	\$26.00		
B4083		\$6.00	\$6.00		
B4087		\$45.86	\$45.86		
B4088		\$45.86	\$45.86		
B4100		BR	BR		
B4102		BR	BR		
B4103		\$0.00	\$0.00		
B4104		BR	BR		
B4149		BR	BR		
B4150		\$0.90	\$0.90		
B4152		\$1.80	\$1.80		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
B4153		\$1.28	\$1.28		
B4154		\$3.00	\$3.00		
B4155		\$2.00	\$2.00		
B4157		BR	BR		
B4158		\$0.00	\$0.00		
B4159		\$0.00	\$0.00		
B4160		\$0.00	\$0.00		
B4161		\$0.00	\$0.00		
B4162		\$0.00	\$0.00		
B4164		\$0.00	\$0.00		
B4168		\$0.00	\$0.00		
B4172		\$0.00	\$0.00		
B4176		\$0.00	\$0.00		
B4178		\$0.00	\$0.00		
B4180		\$0.00	\$0.00		
B4185		\$0.00	\$0.00		
B4189		\$0.00	\$0.00		
B4193		\$0.00	\$0.00		
B4197		\$0.00	\$0.00		
B4199		\$0.00	\$0.00		
B4216		\$0.00	\$0.00		
B4220		\$0.00	\$0.00		
B4222		\$0.00	\$0.00		
B4224		\$0.00	\$0.00		
B5000		\$0.00	\$0.00		
B5100		\$0.00	\$0.00		
B5200		\$0.00	\$0.00		
B9000		\$0.00	\$0.00		
B9002		\$150.00	\$150.00		
B9004		\$0.00	\$0.00		
B9006		\$0.00	\$0.00		
B9998		\$0.00	\$0.00		
B9999		\$0.00	\$0.00		
D0120		\$31.00	\$31.00		
D0140		\$55.00	\$55.00		
D0145		NC	NC		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D0150		\$50.00	\$50.00		
D0160		\$68.00	\$68.00		
D0170		\$53.00	\$53.00		
D0180		\$70.00	\$70.00		
D0210		\$91.00	\$91.00		
D0220		\$23.00	\$23.00		
D0230		\$20.00	\$20.00		
D0240		\$25.00	\$25.00		
D0250		\$23.00	\$23.00		
D0260		\$20.00	\$20.00		
D0270		\$16.00	\$16.00		
D0272		\$29.00	\$29.00		
D0273		BR	BR		
D0274		\$42.00	\$42.00		
D0277		\$73.00	\$73.00		
D0290		\$65.00	\$65.00		
D0310		\$129.00	\$129.00		
D0320		\$160.00	\$160.00		
D0321		\$100.00	\$100.00		
D0322		\$54.00	\$54.00		
D0330		\$75.00	\$75.00		
D0340		\$68.00	\$68.00		
D0350		\$46.00	\$46.00		
D0360		BR	BR		
D0362		BR	BR		
D0363		BR	BR		
D0415		BR	BR		
D0416		BR	BR		
D0417		\$0.00	\$0.00		
D0418		\$0.00	\$0.00		
D0421		\$0.00	\$0.00		
D0425		\$0.00	\$0.00		
D0431		\$0.00	\$0.00		
D0460		\$35.00	\$35.00		
D0470		\$67.00	\$67.00		
D0472		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D0473		BR	BR		
D0474		BR	BR		
D0475		BR	BR		
D0476		BR	BR		
D0477		BR	BR		
D0478		BR	BR		
D0479		BR	BR		
D0480		BR	BR		
D0481		BR	BR		
D0482		BR	BR		
D0483		BR	BR		
D0484		BR	BR		
D0485		BR	BR		
D0486		BR	BR		
D0502		\$150.00	\$150.00		
D0999		BR	BR		
D1110		<del>\$62.00</del>	<del>\$62.00</del>		
D1120		\$0.00	\$0.00		
D1203		\$0.00	\$0.00		
D1204		\$0.00	\$0.00		
D1206		\$0.00	\$0.00		
D1310		\$0.00	\$0.00		
D1320		\$0.00	\$0.00		
D1330		<del>\$59.00</del>	<del>\$59.00</del>		
D1351		BR	BR		
D1510		\$250.00	\$250.00		
D1515		\$370.00	\$370.00		
D1520		\$250.00	\$250.00		
D1525		\$370.00	\$370.00		
D1550		\$61.00	\$61.00		
D1555		BR	BR		
D2140		\$81.00	\$81.00		
D2150		\$99.00	\$99.00		
D2160		\$119.00	\$119.00		
D2161		\$142.00	\$142.00		
D2330		\$117.00	\$117.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D2331		\$121.00	\$121.00		
D2332		\$133.00	\$133.00		
D2335		\$187.00	\$187.00		
D2390		BR	BR		
D2391		BR	BR		
D2392		\$170.00	\$170.00		
D2393		\$172.00	\$172.00		
D2394		BR	BR		
D2410		\$0.00	\$0.00		
D2420		\$0.00	\$0.00		
D2430		\$0.00	\$0.00		
D2510		\$456.00	\$456.00		
D2520		\$505.00	\$505.00		
D2530		\$533.00	\$533.00		
D2542		\$617.00	\$617.00		
D2543		\$617.00	\$617.00		
D2544		\$660.00	\$660.00		
D2610		\$440.00	\$440.00		
D2620		\$464.00	\$464.00		
D2630		\$540.00	\$540.00		
D2642		\$495.00	\$495.00		
D2643		\$541.00	\$541.00		
D2644		\$617.00	\$617.00		
D2650		\$405.00	\$405.00		
D2651		\$460.00	\$460.00		
D2652		\$545.00	\$545.00		
D2662		\$460.00	\$460.00		
D2663		\$596.00	\$596.00		
D2664		\$615.00	\$615.00		
D2710		\$420.00	\$420.00		
D2712		BR	BR		
D2720		\$663.00	\$663.00		
D2721		\$556.00	\$556.00		
D2722		\$385.00	\$385.00		
D2740		\$750.00	\$750.00		
D2750		\$765.00	\$765.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D2751		\$668.00	\$668.00		
D2752		\$707.00	\$707.00		
D2780		BR	BR		
D2781		BR	BR		
D2782		BR	BR		
D2783		BR	BR		
D2790		\$764.00	\$764.00		
D2791		\$461.00	\$461.00		
D2792		\$635.00	\$635.00		
D2794		BR	BR		
D2799		\$250.00	\$250.00		
D2910		\$61.00	\$61.00		
D2915		BR	BR		
D2920		\$65.00	\$65.00		
D2930		\$0.00	\$0.00		
D2931		\$175.00	\$175.00		
D2932		\$162.00	\$162.00		
D2933		\$100.00	\$100.00		
D2934		\$0.00	\$0.00		
D2940		\$70.00	\$70.00		
D2950		\$214.00	\$214.00		
D2951		\$50.00	\$50.00		
D2952		\$271.00	\$271.00		
D2953		BR	BR		
D2954		\$245.00	\$245.00		
D2955		\$100.00	\$100.00		
D2957		BR	BR		
D2960		\$282.00	\$282.00		
D2961		\$500.00	\$500.00		
D2962		\$669.00	\$669.00		
D2971		BR	BR		
D2975		BR	BR		
D2980		\$125.00	\$125.00		
D2999		BR	BR		
D3110		\$50.00	\$50.00		
D3120		\$46.00	\$46.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D3220		\$95.00	\$95.00		
D3221		BR	BR		
D3222		\$0.00	\$0.00		
D3230		\$0.00	\$0.00		
D3240		\$0.00	\$0.00		
D3310		\$519.00	\$519.00		
D3320		\$595.00	\$595.00		
D3330		\$750.00	\$750.00		
D3331		BR	BR		
D3332		\$159.00	\$159.00		
D3333		BR	BR		
D3346		\$355.00	\$355.00		
D3347		\$412.00	\$412.00		
D3348		\$557.00	\$557.00		
D3351		BR	BR		
D3352		BR	BR		
D3353		BR	BR		
D3410		\$426.00	\$426.00		
D3421		\$375.00	\$375.00		
D3425		\$450.00	\$450.00		
D3426		\$150.00	\$150.00		
D3430		\$150.00	\$150.00		
D3450		\$210.00	\$210.00		
D3460		\$600.00	\$600.00		
D3470		\$180.00	\$180.00		
D3910		BR	BR		
D3920		\$210.00	\$210.00		
D3950		\$100.00	\$100.00		
D3999		BR	BR		
D4210		\$325.00	\$325.00		
D4211		\$121.00	\$121.00		
D4230		BR	BR		
D4231		BR	BR		
D4240		\$500.00	\$500.00		
D4241		BR	BR		
D4245		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D4249		\$500.00	\$500.00		
D4260		\$783.00	\$783.00		
D4261		BR	BR		
D4263		\$750.00	\$750.00		
D4264		\$750.00	\$750.00		
D4265		BR	BR		
D4266		\$750.00	\$750.00		
D4267		\$750.00	\$750.00		
D4268		BR	BR		
D4270		\$750.00	\$750.00		
D4271		\$750.00	\$750.00		
D4273		\$750.00	\$750.00		
D4274		\$750.00	\$750.00		
D4275		BR	BR		
D4276		BR	BR		
D4320		\$184.00	\$184.00		
D4321		\$260.00	\$260.00		
D4341		\$170.00	\$170.00		
D4342		BR	BR		
D4355		\$135.00	\$135.00		
D4381		BR	BR		
D4910		\$204.00	\$204.00		
D4920		BR	BR		
D4999		BR	BR		
D5110		\$953.00	\$953.00		
D5120		\$953.00	\$953.00		
D5130		\$1,015.00	\$1,015.00		
D5140		\$845.00	\$845.00		
D5211		\$805.00	\$805.00		
D5212		\$808.00	\$808.00		
D5213		\$1,128.00	\$1,128.00		
D5214		\$1,134.00	\$1,134.00		
D5225		BR	BR		
D5226		BR	BR		
D5281		\$600.00	\$600.00		
D5410		\$75.00	\$75.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D5411		\$75.00	\$75.00		
D5421		\$42.00	\$42.00		
D5422		\$42.00	\$42.00		
D5510		\$133.00	\$133.00		
D5520		\$120.00	\$120.00		
D5610		\$120.00	\$120.00		
D5620		\$160.00	\$160.00		
D5630		\$150.00	\$150.00		
D5640		\$120.00	\$120.00		
D5650		\$166.00	\$166.00		
D5660		\$150.00	\$150.00		
D5670		BR	BR		
D5671		BR	BR		
D5710		\$500.00	\$500.00		
D5711		\$500.00	\$500.00		
D5720		\$500.00	\$500.00		
D5721		\$500.00	\$500.00		
D5730		\$198.00	\$198.00		
D5731		\$193.00	\$193.00		
D5740		\$75.00	\$75.00		
D5741		\$75.00	\$75.00		
D5750		\$310.00	\$310.00		
D5751		\$255.00	\$255.00		
D5760		\$250.00	\$250.00		
D5761		\$250.00	\$250.00		
D5810		\$400.00	\$400.00		
D5811		\$400.00	\$400.00		
D5820		\$400.00	\$400.00		
D5821		\$400.00	\$400.00		
D5850		\$68.00	\$68.00		
D5851		\$68.00	\$68.00		
D5860		\$930.00	\$930.00		
D5861		\$842.00	\$842.00		
D5862		\$285.00	\$285.00		
D5867		BR	BR		
D5875		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D5899		BR	BR		
D5911		BR	BR		
D5912		BR	BR		
D5913		\$0.00	\$0.00		
D5914		\$0.00	\$0.00		
D5915		\$0.00	\$0.00		
D5916		\$0.00	\$0.00		
D5919		\$0.00	\$0.00		
D5922		\$0.00	\$0.00		
D5923		\$0.00	\$0.00		
D5924		\$0.00	\$0.00		
D5925		\$0.00	\$0.00		
D5926		\$0.00	\$0.00		
D5927		\$0.00	\$0.00		
D5928		\$0.00	\$0.00		
D5929		\$0.00	\$0.00		
D5931		\$0.00	\$0.00		
D5932		\$0.00	\$0.00		
D5933		\$0.00	\$0.00		
D5934		\$0.00	\$0.00		
D5935		\$0.00	\$0.00		
D5936		\$0.00	\$0.00		
D5937		BR	BR		
D5951		BR	BR		
D5952		\$0.00	\$0.00		
D5953		\$3,931.00	\$3,931.00		
D5954		BR	BR		
D5955		BR	BR		
D5958		BR	BR		
D5959		BR	BR		
D5960		\$3,931.00	\$3,931.00		
D5982		\$1,680.00	\$1,680.00		
D5983		BR	BR		
D5984		BR	BR		
D5985		BR	BR		
D5986		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D5987		BR	BR		
D5988		BR	BR		
D5991		\$0.00	\$0.00		
D5999		BR	BR		
D6010		\$1,783.00	\$1,783.00		
D6012		\$0.00	\$0.00		
D6040		\$4,000.00	\$4,000.00		
D6050		\$1,712.00	\$1,712.00		
D6053		BR	BR		
D6054		BR	BR		
D6055		\$1,000.00	\$1,000.00		
D6056		\$499.00	\$499.00		
D6057		\$480.00	\$480.00		
D6058		\$1,000.00	\$1,000.00		
D6059		\$1,063.00	\$1,063.00		
D6060		\$900.00	\$900.00		
D6061		\$1,150.00	\$1,150.00		
D6062		BR	BR		
D6063		BR	BR		
D6064		BR	BR		
D6065		\$998.00	\$998.00		
D6066		\$1,140.00	\$1,140.00		
D6067		BR	BR		
D6068		BR	BR		
D6069		BR	BR		
D6070		BR	BR		
D6071		BR	BR		
D6072		BR	BR		
D6073		BR	BR		
D6074		BR	BR		
D6075		BR	BR		
D6076		BR	BR		
D6077		BR	BR		
D6078		BR	BR		
D6079		BR	BR		
D6080		\$219.00	\$219.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D6090		\$75.00	\$75.00		
D6091		BR	BR		
D6092		BR	BR		
D6093		BR	BR		
D6094		BR	BR		
D6095		\$75.00	\$75.00		
D6100		\$200.00	\$200.00		
D6190		BR	BR		
D6194		BR	BR		
D6199		BR	BR		
D6205		BR	BR		
D6210		\$752.00	\$752.00		
D6211		\$350.00	\$350.00		
D6212		\$495.00	\$495.00		
D6214		BR	BR		
D6240		\$756.00	\$756.00		
D6241		\$716.00	\$716.00		
D6242		\$783.00	\$783.00		
D6245		BR	BR		
D6250		\$671.00	\$671.00		
D6251		\$600.00	\$600.00		
D6252		\$571.00	\$571.00		
D6253		BR	BR		
D6545		\$482.00	\$482.00		
D6548		BR	BR		
D6600		BR	BR		
D6601		BR	BR		
D6602		BR	BR		
D6603		BR	BR		
D6604		BR	BR		
D6605		BR	BR		
D6606		BR	BR		
D6607		BR	BR		
D6608		BR	BR		
D6609		BR	BR		
D6610		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D6611		BR	BR		
D6612		BR	BR		
D6613		BR	BR		
D6614		BR	BR		
D6615		BR	BR		
D6624		BR	BR		
D6634		BR	BR		
D6710		BR	BR		
D6720		\$600.00	\$600.00		
D6721		\$350.00	\$350.00		
D6722		\$415.00	\$415.00		
D6740		BR	BR		
D6750		\$722.00	\$722.00		
D6751		\$722.00	\$722.00		
D6752		\$670.00	\$670.00		
D6780		\$714.00	\$714.00		
D6781		BR	BR		
D6782		BR	BR		
D6783		BR	BR		
D6790		\$761.00	\$761.00		
D6791		\$400.00	\$400.00		
D6792		\$415.00	\$415.00		
D6793		BR	BR		
D6794		BR	BR		
D6920		\$50.00	\$50.00		
D6930		\$94.00	\$94.00		
D6940		\$160.00	\$160.00		
D6950		\$280.00	\$280.00		
D6970		\$164.00	\$164.00		
D6972		\$167.00	\$167.00		
D6973		\$167.00	\$167.00		
D6975		\$200.00	\$200.00		
D6976		BR	BR		
D6977		BR	BR		
D6980		\$363.00	\$363.00		
D6985		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D6999		BR	BR		
D7111		BR	BR		
D7140		BR	BR		
D7210		\$190.00	\$190.00		
D7220		\$208.00	\$208.00		
D7230		\$228.00	\$228.00		
D7240		\$297.00	\$297.00		
D7241		\$343.00	\$343.00		
D7250		\$225.00	\$225.00		
D7260		\$425.00	\$425.00		
D7261		BR	BR		
D7270		\$250.00	\$250.00		
D7272		\$250.00	\$250.00		
D7280		\$260.00	\$260.00		
D7282		BR	BR		
D7283		\$0.00	\$0.00		
D7285		\$245.00	\$245.00		
D7286		\$245.00	\$245.00		
D7287		BR	BR		
D7288		BR	BR		
D7290		BR	BR		
D7291		BR	BR		
D7292		BR	BR		
D7293		BR	BR		
D7294		BR	BR		
D7310		\$245.00	\$245.00		
D7311		BR	BR		
D7320		\$386.00	\$386.00		
D7321		BR	BR		
D7340		\$1,178.00	\$1,178.00		
D7350		\$3,350.00	\$3,350.00		
D7410		\$200.00	\$200.00		
D7411		BR	BR		
D7412		BR	BR		
D7413		BR	BR		
D7414		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D7415		BR	BR		
D7440		BR	BR		
D7441		BR	BR		
D7450		\$600.00	\$600.00		
D7451		\$1,200.00	\$1,200.00		
D7460		\$220.00	\$220.00		
D7461		\$440.00	\$440.00		
D7465		\$1,200.00	\$1,200.00		
D7471		BR	BR		
D7472		BR	BR		
D7473		BR	BR		
D7485		BR	BR		
D7490		\$2,000.00	\$2,000.00		
D7510		\$120.00	\$120.00		
D7511		BR	BR		
D7520		\$149.00	\$149.00		
D7521		BR	BR		
D7530		\$162.00	\$162.00		
D7540		\$200.00	\$200.00		
D7550		\$2,000.00	\$2,000.00		
D7560		\$559.00	\$559.00		
D7610		\$1,400.00	\$1,400.00		
D7620		\$884.00	\$884.00		
D7630		\$1,000.00	\$1,000.00		
D7640		\$2,207.00	\$2,207.00		
D7650		\$746.00	\$746.00		
D7660		\$406.00	\$406.00		
D7670		\$360.00	\$360.00		
D7671		BR	BR		
D7680		\$2,531.00	\$2,531.00		
D7710		\$1,563.00	\$1,563.00		
D7720		\$1,253.00	\$1,253.00		
D7730		\$1,563.00	\$1,563.00		
D7740		\$2,472.00	\$2,472.00		
D7750		\$1,089.00	\$1,089.00		
D7760		\$406.00	\$406.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D7770		\$1,437.00	\$1,437.00		
D7771		BR	BR		
D7780		\$2,405.00	\$2,405.00		
D7810		\$1,381.00	\$1,381.00		
D7820		\$113.00	\$113.00		
D7830		\$250.00	\$250.00		
D7840		\$1,796.00	\$1,796.00		
D7850		\$1,697.00	\$1,697.00		
D7852		\$1,000.00	\$1,000.00		
D7854		\$990.00	\$990.00		
D7856		\$600.00	\$600.00		
D7858		\$2,291.00	\$2,291.00		
D7860		\$1,548.00	\$1,548.00		
D7865		\$2,447.00	\$2,447.00		
D7870		\$1,697.00	\$1,697.00		
D7871		BR	BR		
D7872		BR	BR		
D7873		\$1,508.00	\$1,508.00		
D7874		\$1,508.00	\$1,508.00		
D7875		\$1,508.00	\$1,508.00		
D7876		\$1,508.00	\$1,508.00		
D7877		\$1,508.00	\$1,508.00		
D7880		\$586.00	\$586.00		
D7899		BR	BR		
D7910		\$194.00	\$194.00		
D7911		\$273.00	\$273.00		
D7912		\$827.00	\$827.00		
D7920		\$1,189.00	\$1,189.00		
D7940		\$1,675.00	\$1,675.00		
D7941		\$2,307.00	\$2,307.00		
D7943		\$2,673.00	\$2,673.00		
D7944		\$1,900.00	\$1,900.00		
D7945		\$2,307.00	\$2,307.00		
D7946		BR	BR		
D7947		BR	BR		
D7948		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D7949		BR	BR		
D7950		\$3,860.00	\$3,860.00		
D7951		BR	BR		
D7953		BR	BR		
D7955		BR	BR		
D7960		\$0.00	\$0.00		
D7963		\$0.00	\$0.00		
D7970		\$300.00	\$300.00		
D7971		\$100.00	\$100.00		
D7972		BR	BR		
D7980		\$261.00	\$261.00		
D7981		\$618.00	\$618.00		
D7982		\$702.00	\$702.00		
D7983		\$686.00	\$686.00		
D7990		\$634.00	\$634.00		
D7991		\$1,174.00	\$1,174.00		
D7995		\$250.00	\$250.00		
D7996		\$2,083.00	\$2,083.00		
D7997		BR	BR		
D7998		BR	BR		
D7999		BR	BR		
D8010		\$0.00	\$0.00		
D8020		BR	BR		
D8030		BR	BR		
D8040		\$1,446.00	\$1,446.00		
D8050		\$0.00	\$0.00		
D8060		BR	BR		
D8070		BR	BR		
D8080		BR	BR		
D8090		\$3,600.00	\$3,600.00		
D8210		\$140.00	\$140.00		
D8220		BR	BR		
D8660		\$35.00	\$35.00		
D8670		\$0.00	\$0.00		
D8680		\$470.00	\$470.00		
D8690		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D8691		BR	BR		
D8692		\$220.00	\$220.00		
D8693		BR	BR		
D8999		BR	BR		
D9110		\$95.00	\$95.00		
D9120		BR	BR		
D9210		\$32.00	\$32.00		
D9211		\$150.00	\$150.00		
D9212		\$127.00	\$127.00		
D9215		\$21.00	\$21.00		
D9220		\$210.00	\$210.00		
D9221		\$105.00	\$105.00		
D9230		\$33.00	\$33.00		
D9241		\$203.00	\$203.00		
D9242		\$60.00	\$60.00		
D9248		\$49.00	\$49.00		
D9310		\$52.00	\$52.00		
D9410		\$85.00	\$85.00		
D9420		\$125.00	\$125.00		
D9430		\$42.00	\$42.00		
D9440		\$85.00	\$85.00		
D9450		BR	BR		
D9610		\$25.00	\$25.00		
D9612		BR	BR		
D9630		\$28.00	\$28.00		
D9910		\$20.00	\$20.00		
D9911		BR	BR		
D9920		\$62.00	\$62.00		
D9930		\$75.00	\$75.00		
D9940		\$369.00	\$369.00		
D9941		\$130.00	\$130.00		
D9942		BR	BR		
D9950		\$300.00	\$300.00		
D9951		\$94.00	\$94.00		
D9952		\$405.00	\$405.00		
D9970		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
D9971		BR	BR		
D9972		\$246.00	\$246.00		
D9973		\$246.00	\$246.00		
D9974		\$164.00	\$164.00		
D9999		BR	BR		
E0100		\$24.50	\$24.50		
E0105		\$52.00	\$52.00		
E0110		\$119.00	\$119.00		
E0111		\$50.00	\$50.00		
E0112		\$33.00	\$33.00		
E0113		\$17.25	\$17.25		
E0114		\$40.00	\$40.00		
E0116		\$22.50	\$22.50		
E0117		\$192.71	\$192.71		
E0118		BR	BR		
E0130		\$61.36	\$61.36		
E0135		\$73.09	\$73.09		
E0140		\$360.71	\$360.71		
E0141		\$93.47	\$93.47		
E0143		\$142.50	\$142.50		
E0144		\$305.00	\$305.00		
E0147		\$528.27	\$528.27		
E0148		\$150.00	\$150.00		
E0149		\$212.89	\$212.89		
E0153		\$56.25	\$56.25		
E0154		\$100.00	\$100.00		
E0155		\$44.00	\$44.00		
E0156		\$22.50	\$22.50		
E0157		\$66.42	\$66.42		
E0158		\$26.09	\$26.09		
E0159		\$25.00	\$25.00		
E0160		\$26.80	\$26.80		
E0161		\$25.01	\$25.01		
E0162		\$133.45	\$133.45		
E0163		\$98.19	\$98.19		
E0165		\$190.00	\$190.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0167		\$11.45	\$11.45		
E0168		\$175.00	\$175.00		
E0170		\$502.60	\$502.60		
E0171		\$289.20	\$289.20		
E0172		BR	BR		
E0175		\$58.00	\$58.00		
E0181		\$230.00	\$230.00		
E0182		\$223.00	\$223.00		
E0184		\$157.85	\$157.85		
E0185		\$259.33	\$259.33		
E0186		\$550.00	\$550.00		
E0187		\$250.00	\$250.00		
E0188		\$23.16	\$23.16		
E0189		\$53.97	\$53.97		
E0190		\$25.00	\$25.00		
E0191		\$9.47	\$9.47		
E0193		\$904.00	\$904.00		
E0194		\$2,980.00	\$2,980.00		
E0196		\$310.00	\$310.00		
E0197		\$211.35	\$211.35		
E0198		\$211.35	\$211.35		
E0199		\$28.00	\$28.00		
E0200		\$75.62	\$75.62		
E0202		\$0.00	\$0.00		
E0203		\$0.00	\$0.00		
E0205		\$185.10	\$185.10		
E0210		\$31.13	\$31.13		
E0215		\$69.00	\$69.00		
E0217		\$402.52	\$402.52		
E0218		\$402.52	\$402.52		
E0220		\$8.00	\$8.00		
E0221		\$0.00	\$0.00		
E0225		\$315.10	\$315.10		
E0230		\$10.16	\$10.16		
E0231		BR	BR		
E0232		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0235		\$140.00	\$140.00		
E0236		\$322.00	\$322.00		
E0238		\$21.92	\$21.92		
E0239		\$364.70	\$364.70		
E0240		BR	BR		
E0241		\$30.00	\$30.00		
E0242		\$50.00	\$50.00		
E0243		\$38.00	\$38.00		
E0244		\$45.00	\$45.00		
E0245		\$70.00	\$70.00		
E0246		\$51.89	\$51.89		
E0247		BR	BR		
E0248		BR	BR		
E0249		\$120.00	\$120.00		
E0250		\$976.00	\$976.00		
E0251		\$685.40	\$685.40		
E0255		\$1,174.00	\$1,174.00		
E0256		\$677.60	\$677.60		
E0260		\$1,950.00	\$1,950.00		
E0261		\$1,306.20	\$1,306.20		
E0265		\$2,250.00	\$2,250.00		
E0266		\$1,731.00	\$1,731.00		
E0270		\$60.00	\$60.00		
E0271		\$180.01	\$180.01		
E0272		\$182.00	\$182.00		
E0273		BR	BR		
E0274		\$135.00	\$135.00		
E0275		\$14.60	\$14.60		
E0276		\$11.26	\$11.26		
E0277		\$810.00	\$810.00		
E0280		\$35.48	\$35.48		
E0290		\$606.00	\$606.00		
E0291		\$440.20	\$440.20		
E0292		\$681.40	\$681.40		
E0293		\$579.80	\$579.80		
E0294		\$1,232.90	\$1,232.90		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0295		\$1,214.70	\$1,214.70		
E0296		\$1,331.30	\$1,331.30		
E0297		\$1,140.50	\$1,140.50		
E0300		\$0.00	\$0.00		
E0301		\$3,039.80	\$3,039.80		
E0302		\$6,500.00	\$6,500.00		
E0303		\$3,845.50	\$3,845.50		
E0304		\$7,706.50	\$7,706.50		
E0305		\$60.00	\$60.00		
E0310		\$159.46	\$159.46		
E0315		\$60.00	\$60.00		
E0316		\$197.50	\$197.50		
E0325		\$8.19	\$8.19		
E0326		\$14.95	\$14.95		
E0328		\$0.00	\$0.00		
E0329		\$0.00	\$0.00		
E0350		BR	BR		
E0352		\$50.00	\$50.00		
E0370		\$21.16	\$21.16		
E0371		\$423.95	\$423.95		
E0372		\$514.44	\$514.44		
E0373		\$586.09	\$586.09		
E0424		\$326.87	\$326.87		
E0425		BR	BR		
E0430		BR	BR		
E0431		\$46.69	\$46.69		
E0434		\$46.69	\$46.69		
E0435		BR	BR		
E0439		\$326.87	\$326.87		
E0440		\$326.87	\$326.87		
E0441		\$232.83	\$232.83		
E0442		\$232.83	\$232.83		
E0443		\$30.59	\$30.59		
E0444		\$30.59	\$30.59		
E0445		BR	BR		
E0450		\$910.44	\$910.44		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0455		BR	BR		
E0457		\$65.10	\$65.10		
E0459		\$485.40	\$485.40		
E0460		\$699.70	\$699.70		
E0461		\$1,002.05	\$1,002.05		
E0462		\$2,747.80	\$2,747.80		
E0463		BR	BR		
E0464		BR	BR		
E0470		\$2,566.00	\$2,566.00		
E0471		\$6,421.70	\$6,421.70		
E0472		\$6,421.70	\$6,421.70		
E0480		\$41.91	\$41.91		
E0481		BR	BR		
E0482		\$427.89	\$427.89		
E0483		\$1,063.13	\$1,063.13		
E0484		\$36.92	\$36.92		
E0485		BR	BR		
E0486		BR	BR		
E0487		BR	BR		
E0500		\$104.71	\$104.71		
E0550		\$40.64	\$40.64		
E0555		\$79.10	\$79.10		
E0560		\$163.60	\$163.60		
E0561		\$107.00	\$107.00		
E0562		\$301.22	\$301.22		
E0565		\$55.00	\$55.00		
E0570		\$195.00	\$195.00		
E0571		\$28.58	\$28.58		
E0572		\$36.34	\$36.34		
E0574		\$38.40	\$38.40		
E0575		\$103.00	\$103.00		
E0580		\$127.93	\$127.93		
E0585		\$33.45	\$33.45		
E0590		BR	BR		
E0600		\$46.00	\$46.00		
E0601		\$125.00	\$125.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0602		\$0.00	\$0.00		
E0603		\$0.00	\$0.00		
E0604		\$0.00	\$0.00		
E0605		\$31.00	\$31.00		
E0606		\$21.88	\$21.88		
E0607		\$175.00	\$175.00		
E0610		\$226.88	\$226.88		
E0615		\$423.52	\$423.52		
E0617		\$304.05	\$304.05		
E0618		\$280.35	\$280.35		
E0619		BR	BR		
E0620		\$874.39	\$874.39		
E0621		\$91.56	\$91.56		
E0625		\$582.00	\$582.00		
E0627		\$363.00	\$363.00		
E0628		\$315.44	\$315.44		
E0629		\$305.44	\$305.44		
E0630		\$972.00	\$972.00		
E0635		\$2,500.00	\$2,500.00		
E0636		\$10,545.00	\$10,545.00		
E0637		\$2,104.97	\$2,104.97		
E0638		\$853.57	\$853.57		
E0639		BR	BR		
E0640		BR	BR		
E0641		BR	BR		
E0642		BR	BR		
E0650		\$629.23	\$629.23		
E0651		\$744.62	\$744.62		
E0652		\$4,997.70	\$4,997.70		
E0655		\$87.50	\$87.50		
E0656		BR	BR		
E0657		BR	BR		
E0660		\$129.51	\$129.51		
E0665		\$111.07	\$111.07		
E0666		\$111.95	\$111.95		
E0667		\$308.81	\$308.81		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0668		\$358.26	\$358.26		
E0669		\$166.02	\$166.02		
E0671		\$396.17	\$396.17		
E0672		\$307.83	\$307.83		
E0673		\$255.79	\$255.79		
E0675		\$3,219.90	\$3,219.90		
E0676		\$0.00	\$0.00		
E0691		\$898.59	\$898.59		
E0692		\$1,128.37	\$1,128.37		
E0693		\$1,390.80	\$1,390.80		
E0694		\$4,427.34	\$4,427.34		
E0700		\$25.00	\$25.00		
E0705		BR	BR		
E0710		\$6.00	\$6.00		
E0720		\$199.80	\$199.80		
E0730		\$199.80	\$199.80		
E0731		\$240.00	\$240.00		
E0735		\$42.75	\$42.75		
E0740		\$52.00	\$52.00		
E0744		\$0.00	\$0.00		
E0745		\$233.10	\$233.10		
E0746		\$0.00	\$0.00		
E0747		\$3,364.35	\$3,364.35		
E0748		\$3,342.55	\$3,342.55		
E0749		\$3,251.51	\$3,251.51		
E0755		BR	BR		
E0760		\$3,251.51	\$3,251.51		
E0761		BR	BR		
E0762		\$0.00	\$0.00		
E0764		\$10,177.19	\$10,177.19		
E0765		\$0.00	\$0.00		
E0769		BR	BR		
E0770		BR	BR		
E0776		\$140.00	\$140.00		
E0779		\$16.73	\$16.73		
E0780		\$10.37	\$10.37		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0781		\$264.87	\$264.87		
E0782		\$3,648.85	\$3,648.85		
E0783		\$7,373.94	\$7,373.94		
E0784		\$417.49	\$417.49		
E0785		\$425.58	\$425.58		
E0786		\$7,033.47	\$7,033.47		
E0791		\$268.00	\$268.00		
E0830		\$50.00	\$50.00		
E0840		\$69.76	\$69.76		
E0849		\$515.00	\$515.00		
E0850		\$100.21	\$100.21		
E0855		\$494.22	\$494.22		
E0856		\$25.00	\$25.00		
E0860		\$36.75	\$36.75		
E0870		\$110.94	\$110.94		
E0880		\$119.74	\$119.74		
E0890		\$97.62	\$97.62		
E0900		\$120.00	\$120.00		
E0910		\$91.59	\$91.59		
E0911		\$498.50	\$498.50		
E0912		\$1,144.70	\$1,144.70		
E0920		\$435.39	\$435.39		
E0930		\$436.00	\$436.00		
E0935		\$22.00	\$22.00		
E0936		\$22.00	\$22.00		
E0940		\$250.00	\$250.00		
E0941		\$365.00	\$365.00		
E0942		\$16.09	\$16.09		
E0944		\$37.20	\$37.20		
E0945		\$42.28	\$42.28		
E0946		\$480.00	\$480.00		
E0947		\$491.69	\$491.69		
E0948		\$475.58	\$475.58		
E0950		\$88.36	\$88.36		
E0951		\$16.01	\$16.01		
E0952		\$16.01	\$16.01		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E0955		\$202.18	\$202.18		
E0956		\$98.58	\$98.58		
E0957		\$137.93	\$137.93		
E0958		\$436.00	\$436.00		
E0959		\$37.58	\$37.58		
E0960		\$90.98	\$90.98		
E0961		\$25.28	\$25.28		
E0966		\$64.76	\$64.76		
E0967		\$112.31	\$112.31		
E0968		\$175.59	\$175.59		
E0969		\$126.99	\$126.99		
E0970		\$0.00	\$0.00		
E0971		\$59.00	\$59.00		
E0973		\$97.72	\$97.72		
E0974		\$78.41	\$78.41		
E0978		\$41.98	\$41.98		
E0980		\$31.96	\$31.96		
E0981		\$40.08	\$40.08		
E0982		\$43.80	\$43.80		
E0983		\$2,499.30	\$2,499.30		
E0984		\$1,623.99	\$1,623.99		
E0985		\$202.85	\$202.85		
E0986		\$4,864.24	\$4,864.24		
E0990		\$99.82	\$99.82		
E0992		\$95.15	\$95.15		
E0994		\$17.63	\$17.63		
E0995		\$25.84	\$25.84		
E1002		\$4,113.02	\$4,113.02		
E1003		\$4,391.30	\$4,391.30		
E1004		\$4,869.05	\$4,869.05		
E1005		\$5,270.36	\$5,270.36		
E1006		\$6,455.70	\$6,455.70		
E1007		\$8,741.27	\$8,741.27		
E1008		\$8,742.05	\$8,742.05		
E1009		BR	BR		
E1010		\$1,151.36	\$1,151.36		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E1014		\$0.00	\$0.00		
E1015		\$114.70	\$114.70		
E1016		\$131.31	\$131.31		
E1017		BR	BR		
E1018		BR	BR		
E1020		\$243.41	\$243.41		
E1028		\$206.54	\$206.54		
E1029		\$369.54	\$369.54		
E1030		\$1,165.27	\$1,165.27		
E1031		\$505.00	\$505.00		
E1035		\$6,132.00	\$6,132.00		
E1038		\$400.10	\$400.10		
E1039		\$227.00	\$227.00		
E1050		\$1,018.40	\$1,018.40		
E1060		\$1,260.70	\$1,260.70		
E1065		\$2,629.73	\$2,629.73		
E1070		\$931.00	\$931.00		
E1083		\$787.40	\$787.40		
E1084		\$981.10	\$981.10		
E1085		\$0.00	\$0.00		
E1086		\$0.00	\$0.00		
E1087		\$1,230.50	\$1,230.50		
E1088		\$1,347.70	\$1,347.70		
E1089		\$0.00	\$0.00		
E1090		\$0.00	\$0.00		
E1092		\$1,111.80	\$1,111.80		
E1093		\$995.50	\$995.50		
E1100		\$882.40	\$882.40		
E1110		\$896.20	\$896.20		
E1130		\$0.00	\$0.00		
E1140		\$0.00	\$0.00		
E1150		\$815.80	\$815.80		
E1160		\$1,260.70	\$1,260.70		
E1161		\$2,366.09	\$2,366.09		
E1170		\$759.10	\$759.10		
E1171		\$681.30	\$681.30		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E1172		\$832.60	\$832.60		
E1180		\$894.40	\$894.40		
E1190		\$1,028.80	\$1,028.80		
E1195		\$1,067.90	\$1,067.90		
E1200		\$735.90	\$735.90		
E1220		\$0.00	\$0.00		
E1221		\$475.10	\$475.10		
E1222		\$636.40	\$636.40		
E1223		\$740.30	\$740.30		
E1224		\$811.50	\$811.50		
E1225		\$452.00	\$452.00		
E1226		\$463.80	\$463.80		
E1227		\$235.88	\$235.88		
E1228		\$280.20	\$280.20		
E1229		\$0.00	\$0.00		
E1230		\$5,000.00	\$5,000.00		
E1231		\$0.00	\$0.00		
E1232		\$0.00	\$0.00		
E1233		\$0.00	\$0.00		
E1234		\$0.00	\$0.00		
E1235		\$0.00	\$0.00		
E1236		\$0.00	\$0.00		
E1237		\$0.00	\$0.00		
E1238		\$0.00	\$0.00		
E1240		\$1,030.20	\$1,030.20		
E1250		\$0.00	\$0.00		
E1260		\$0.00	\$0.00		
E1270		\$789.40	\$789.40		
E1280		\$1,201.10	\$1,201.10		
E1285		\$0.00	\$0.00		
E1290		\$0.00	\$0.00		
E1295		\$1,123.40	\$1,123.40		
E1296		\$415.85	\$415.85		
E1297		\$88.48	\$88.48		
E1298		\$360.10	\$360.10		
E1300		\$180.00	\$180.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E1310		\$0.00	\$0.00		
E1340		\$40.00	\$40.00		
E1353		\$110.00	\$110.00		
E1354		BR	BR		
E1355		\$20.00	\$20.00		
E1356		BR	BR		
E1357		BR	BR		
E1358		BR	BR		
E1372		\$132.18	\$132.18		
E1390		\$326.83	\$326.83		
E1391		\$228.80	\$228.80		
E1392		\$32.08	\$32.08		
E1399		BR	BR		
E1405		\$360.32	\$360.32		
E1406		\$310.18	\$310.18		
E1700		\$29.00	\$29.00		
E1701		\$10.61	\$10.61		
E1702		\$22.57	\$22.57		
E1800		\$124.00	\$124.00		
E1801		\$128.37	\$128.37		
E1802		\$326.80	\$326.80		
E1805		\$114.09	\$114.09		
E1806		\$105.39	\$105.39		
E1810		\$125.00	\$125.00		
E1811		\$133.46	\$133.46		
E1812		BR	BR		
E1815		\$126.00	\$126.00		
E1816		\$135.57	\$135.57		
E1818		\$138.41	\$138.41		
E1820		\$73.55	\$73.55		
E1821		\$104.72	\$104.72		
E1825		\$126.00	\$126.00		
E1830		\$126.00	\$126.00		
E1840		\$380.82	\$380.82		
E1841		\$453.00	\$453.00		
E1902		BR	BR		

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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E2000		\$51.58	\$51.58		
E2100		\$640.01	\$640.01		
E2101		\$187.63	\$187.63		
E2120		\$0.00	\$0.00		
E2201		\$373.10	\$373.10		
E2202		\$473.98	\$473.98		
E2203		\$479.05	\$479.05		
E2204		\$813.40	\$813.40		
E2205		\$33.00	\$33.00		
E2206		\$41.00	\$41.00		
E2207		\$41.35	\$41.35		
E2208		\$113.30	\$113.30		
E2209		\$165.00	\$165.00		
E2210		\$6.25	\$6.25		
E2211		\$34.77	\$34.77		
E2212		\$5.88	\$5.88		
E2213		\$30.40	\$30.40		
E2214		\$35.00	\$35.00		
E2215		\$10.00	\$10.00		
E2216		BR	BR		
E2217		BR	BR		
E2218		BR	BR		
E2219		\$38.65	\$38.65		
E2220		\$24.24	\$24.24		
E2221		\$25.55	\$25.55		
E2222		\$21.06	\$21.06		
E2223		\$5.61	\$5.61		
E2224		\$83.35	\$83.35		
E2225		\$17.40	\$17.40		
E2226		\$37.94	\$37.94		
E2227		\$0.00	\$0.00		
E2228		\$0.00	\$0.00		
E2230		BR	BR		
E2231		\$193.63	\$193.63		
E2291		\$0.00	\$0.00		
E2292		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E2293		\$0.00	\$0.00		
E2294		\$0.00	\$0.00		
E2295		\$0.00	\$0.00		
E2300		BR	BR		
E2301		BR	BR		
E2310		\$1,170.24	\$1,170.24		
E2311		\$2,369.20	\$2,369.20		
E2312		\$2,420.05	\$2,420.05		
E2313		\$384.31	\$384.31		
E2321		\$1,532.90	\$1,532.90		
E2322		\$1,410.36	\$1,410.36		
E2323		\$64.64	\$64.64		
E2324		\$44.99	\$44.99		
E2325		\$1,346.83	\$1,346.83		
E2326		\$319.60	\$319.60		
E2327		\$2,306.14	\$2,306.14		
E2328		\$3,877.32	\$3,877.32		
E2329		\$1,730.31	\$1,730.31		
E2330		\$3,333.27	\$3,333.27		
E2331		BR	BR		
E2340		\$314.22	\$314.22		
E2341		\$462.97	\$462.97		
E2342		\$448.03	\$448.03		
E2343		\$259.27	\$259.27		
E2351		\$698.63	\$698.63		
E2360		\$102.16	\$102.16		
E2361		\$139.47	\$139.47		
E2362		\$91.98	\$91.98		
E2363		\$186.00	\$186.00		
E2364		\$102.16	\$102.16		
E2365		\$112.17	\$112.17		
E2366		\$224.08	\$224.08		
E2367		\$419.08	\$419.08		
E2368		\$516.00	\$516.00		
E2369		\$450.00	\$450.00		
E2370		\$803.00	\$803.00		

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E2371		\$150.74	\$150.74		
E2372		BR	BR		
E2373		BR	BR		
E2374		BR	BR		
E2375		BR	BR		
E2376		BR	BR		
E2377		BR	BR		
E2381		\$95.00	\$95.00		
E2382		\$100.00	\$100.00		
E2383		BR	BR		
E2384		\$57.00	\$57.00		
E2385		BR	BR		
E2386		\$95.00	\$95.00		
E2387		\$57.00	\$57.00		
E2388		BR	BR		
E2389		BR	BR		
E2390		BR	BR		
E2391		BR	BR		
E2392		BR	BR		
E2393		BR	BR		
E2394		BR	BR		
E2395		BR	BR		
E2396		BR	BR		
E2397		\$200.00	\$200.00		
E2399		BR	BR		
E2402		\$1,716.46	\$1,716.46		
E2500		\$391.06	\$391.06		
E2502		\$1,195.80	\$1,195.80		
E2504		\$1,577.42	\$1,577.42		
E2506		\$2,312.96	\$2,312.96		
E2508		\$3,576.61	\$3,576.61		
E2510		\$6,768.25	\$6,768.25		
E2511		BR	BR		
E2512		BR	BR		
E2599		BR	BR		
E2601		\$89.00	\$89.00		

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
E2602		\$162.00	\$162.00		
E2603		\$223.00	\$223.00		
E2604		\$316.00	\$316.00		
E2605		\$322.00	\$322.00		
E2606		\$436.00	\$436.00		
E2607		\$296.00	\$296.00		
E2608		\$354.00	\$354.00		
E2609		BR	BR		
E2610		BR	BR		
E2611		\$312.00	\$312.00		
E2612		\$423.00	\$423.00		
E2613		\$393.00	\$393.00		
E2614		\$544.00	\$544.00		
E2615		\$452.00	\$452.00		
E2616		\$609.00	\$609.00		
E2617		BR	BR		
E2619		\$51.00	\$51.00		
E2620		\$575.00	\$575.00		
E2621		\$548.00	\$548.00		
E8000		BR	BR		
E8001		BR	BR		
E8002		BR	BR		
J0120		\$12.50	\$12.50		
J0128		\$0.00	\$0.00		
J0129		BR	BR		
J0130		\$513.02	\$513.02		
J0132		BR	BR		
J0133		BR	BR		
J0135		\$0.00	\$0.00		
J0150		\$38.89	\$38.89		
J0152		BR	BR		
J0170		\$2.38	\$2.38		
J0180		\$0.00	\$0.00		
J0190		\$3.33	\$3.33		
J0200		\$17.52	\$17.52		
J0205		\$37.53	\$37.53		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J0207		\$452.97	\$452.97		
J0210		\$11.88	\$11.88		
J0215		BR	BR		
J0220		\$0.00	\$0.00		
J0256		\$0.00	\$0.00		
J0270		\$0.00	\$0.00		
J0275		\$0.00	\$0.00		
J0278		BR	BR		
J0280		\$1.62	\$1.62		
J0282		\$15.96	\$15.96		
J0285		\$15.77	\$15.77		
J0287		\$21.85	\$21.85		
J0288		\$15.20	\$15.20		
J0289		\$35.80	\$35.80		
J0290		\$2.30	\$2.30		
J0295		\$7.26	\$7.26		
J0300		\$2.66	\$2.66		
J0330		\$1.00	\$1.00		
J0348		BR	BR		
J0350		\$2,517.58	\$2,517.58		
J0360		\$16.04	\$16.04		
J0364		BR	BR		
J0365		BR	BR		
J0380		\$1.27	\$1.27		
J0390		\$19.68	\$19.68		
J0395		\$182.40	\$182.40		
J0400		\$0.00	\$0.00		
J0456		\$25.55	\$25.55		
J0460		\$3.38	\$3.38		
J0470		\$23.67	\$23.67		
J0475		\$215.65	\$215.65		
J0476		\$79.80	\$79.80		
J0480		BR	BR		
J0500		\$17.06	\$17.06		
J0515		\$3.90	\$3.90		
J0520		\$5.34	\$5.34		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J0530		\$11.92	\$11.92		
J0540		\$23.40	\$23.40		
J0550		\$50.12	\$50.12		
J0560		\$9.89	\$9.89		
J0570		\$19.78	\$19.78		
J0580		\$39.56	\$39.56		
J0583		BR	BR		
J0585		\$4.95	\$4.95		
J0587		\$8.79	\$8.79		
J0592		\$1.03	\$1.03		
J0594		\$0.00	\$0.00		
J0595		BR	BR		
J0600		\$44.10	\$44.10		
J0610		\$1.50	\$1.50		
J0620		\$6.42	\$6.42		
J0630		<del>\$38.41</del>	<del>\$38.41</del>		
J0636		\$1.38	\$1.38		
J0637		\$32.95	\$32.95		
J0640		\$0.00	\$0.00		
J0641		\$1.26	\$1.26		
J0670		\$2.15	\$2.15		
J0690		\$2.25	\$2.25		
J0692		\$8.13	\$8.13		
J0694		\$10.69	\$10.69		
J0696		\$14.92	\$14.92		
J0697		\$6.42	\$6.42		
J0698		\$11.60	\$11.60		
J0702		\$4.98	\$4.98		
J0704		\$3.22	\$3.22		
J0706		\$3.44	\$3.44		
J0710		\$2.35	\$2.35		
J0713		\$7.11	\$7.11		
J0715		\$4.96	\$4.96		
J0720		\$7.22	\$7.22		
J0725		\$0.00	\$0.00		
J0735		\$55.16	\$55.16		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J0740		<del>\$843.60</del>	<del>\$843.60</del>		
J0743		\$15.87	\$15.87		
J0744		\$14.83	\$14.83		
J0745		\$0.50	\$0.50		
J0760		\$7.07	\$7.07		
J0770		\$54.15	\$54.15		
J0780		\$5.86	\$5.86		
J0795		BR	BR		
J0800		\$102.03	\$102.03		
J0835		\$0.00	\$0.00		
J0850		\$712.07	\$712.07		
J0878		BR	BR		
J0881		BR	BR		
J0882		BR	BR		
J0885		BR	BR		
J0886		BR	BR		
J0894		\$0.00	\$0.00		
J0895		\$15.63	\$15.63		
J0900		\$1.63	\$1.63		
J0945		\$1.00	\$1.00		
J0970		\$1.62	\$1.62		
J1000		\$1.90	\$1.90		
J1020		\$2.68	\$2.68		
J1030		\$8.90	\$8.90		
J1040		\$8.27	\$8.27		
J1051		\$0.00	\$0.00		
J1055		\$0.00	\$0.00		
J1056		\$0.00	\$0.00		
J1060		\$4.65	\$4.65		
J1070		\$4.95	\$4.95		
J1080		\$9.43	\$9.43		
J1094		\$0.71	\$0.71		
J1100		\$0.72	\$0.72		
J1110		\$31.30	\$31.30		
J1120		\$21.38	\$21.38		
J1160		\$1.79	\$1.79		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J1162		BR	BR		
J1165		\$0.86	\$0.86		
J1170		\$1.55	\$1.55		
J1180		\$9.02	\$9.02		
J1190		\$244.10	\$244.10		
J1200		\$1.61	\$1.61		
J1205		\$10.49	\$10.49		
J1212		\$44.60	\$44.60		
J1230		\$0.75	\$0.75		
J1240		\$0.38	\$0.38		
J1245		\$12.66	\$12.66		
J1250		\$4.74	\$4.74		
J1260		\$16.45	\$16.45		
J1265		BR	BR		
J1267		\$0.78	\$0.78		
J1300		\$0.00	\$0.00		
J1270		\$4.58	\$4.58		
J1320		\$2.40	\$2.40		
J1324		BR	BR		
J1325		\$18.06	\$18.06		
J1327		\$12.83	\$12.83		
J1330		\$4.50	\$4.50		
J1335		BR	BR		
J1364		\$3.77	\$3.77		
J1380		\$12.60	\$12.60		
J1390		\$1.05	\$1.05		
J1410		\$61.54	\$61.54		
J1430		BR	BR		
J1435		\$0.00	\$0.00		
J1436		\$76.95	\$76.95		
J1438		\$155.16	\$155.16		
J1440		\$185.90	\$185.90		
J1441		\$314.07	\$314.07		
J1450		\$92.68	\$92.68		
J1451		BR	BR		
J1452		\$950.00	\$950.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J1453		\$1.88	\$1.88		
J1455		<del>\$13.07</del>	<del>\$13.07</del>		
J1457		\$0.00	\$0.00		
J1458		\$0.00	\$0.00		
J1459		\$0.00	\$0.00		
J1460		\$13.47	\$13.47		
J1470		\$26.94	\$26.94		
J1480		\$40.41	\$40.41		
J1490		\$53.88	\$53.88		
J1500		\$67.36	\$67.36		
J1510		\$80.83	\$80.83		
J1520		\$94.29	\$94.29		
J1530		\$107.77	\$107.77		
J1540		\$121.24	\$121.24		
J1550		\$134.71	\$134.71		
J1560		BR	BR		
J1561		\$39.46	\$39.46		
J1562		BR	BR		
J1565		\$0.00	\$0.00		
J1566		\$0.00	\$0.00		
J1568		\$40.57	\$40.57		
J1569		\$37.98	\$37.98		
J1570		\$35.25	\$35.25		
J1571		\$71.11	\$71.11		
J1572		\$39.13	\$39.13		
J1573		\$71.11	\$71.11		
J1580		\$1.90	\$1.90		
J1590		\$0.91	\$0.91		
J1595		BR	BR		
J1600		\$0.00	\$0.00		
J1610		\$0.00	\$0.00		
J1620		\$0.00	\$0.00		
J1626		\$18.54	\$18.54		
J1630		\$6.83	\$6.83		
J1631		\$19.08	\$19.08		
J1640		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J1642		\$0.06	\$0.06		
J1644		\$0.40	\$0.40		
J1645		\$15.69	\$15.69		
J1650		\$64.70	\$64.70		
J1652		\$8.27	\$8.27		
J1655		\$3.83	\$3.83		
J1670		\$124.69	\$124.69		
J1675		\$0.00	\$0.00		
J1700		\$0.34	\$0.34		
J1710		\$5.57	\$5.57		
J1720		\$2.49	\$2.49		
J1730		\$122.95	\$122.95		
J1740		\$0.00	\$0.00		
J1742		\$251.35	\$251.35		
J1743		\$0.00	\$0.00		
J1745		<del>\$657.03</del>	<del>\$657.03</del>		
J1750		\$14.14	\$14.14		
J1756		<del>\$0.66</del>	<del>\$0.66</del>		
J1785		\$3.75	\$3.75		
J1790		\$1.58	\$1.58		
J1800		\$11.63	\$11.63		
J1810		\$9.44	\$9.44		
J1815		<del>\$0.10</del>	<del>\$0.10</del>		
J1817		<del>\$2.80</del>	<del>\$2.80</del>		
J1825		\$280.92	\$280.92		
J1830		\$0.00	\$0.00		
J1835		\$35.12	\$35.12		
J1840		\$3.30	\$3.30		
J1850		\$1.43	\$1.43		
J1885		\$3.56	\$3.56		
J1890		\$10.80	\$10.80		
J1930		\$0.00	\$0.00		
J1931		\$0.00	\$0.00		
J1940		\$1.00	\$1.00		
J1945		BR	BR		
J1950		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J1953		\$0.00	\$0.00		
J1955		\$0.00	\$0.00		
J1956		\$19.66	\$19.66		
J1960		\$3.76	\$3.76		
J1980		\$8.23	\$8.23		
J1990		\$24.99	\$24.99		
J2001		BR	BR		
J2010		\$3.18	\$3.18		
J2020		\$36.80	\$36.80		
J2060		\$3.44	\$3.44		
J2150		\$3.27	\$3.27		
J2170		\$0.00	\$0.00		
J2175		\$0.56	\$0.56		
J2180		\$4.61	\$4.61		
J2185		BR	BR		
J2210		\$0.00	\$0.00		
J2248		BR	BR		
J2250		\$0.61	\$0.61		
J2260		\$18.57	\$18.57		
J2270		\$0.77	\$0.77		
J2271		\$13.85	\$13.85		
J2275		\$9.18	\$9.18		
J2278		\$7.06	\$7.06		
J2280		BR	BR		
J2300		\$1.48	\$1.48		
J2310		\$2.47	\$2.47		
J2315		BR	BR		
J2320		\$5.46	\$5.46		
J2321		\$10.73	\$10.73		
J2322		\$21.28	\$21.28		
J2323		\$0.00	\$0.00		
J2325		\$35.33	\$35.33		
J2353		\$0.00	\$0.00		
J2354		\$0.00	\$0.00		
J2355		\$256.63	\$256.63		
J2357		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J2360		\$14.52	\$14.52		
J2370		\$1.28	\$1.28		
J2400		\$6.39	\$6.39		
J2405		\$6.11	\$6.11		
J2410		\$3.58	\$3.58		
J2425		\$0.00	\$0.00		
J2430		\$0.00	\$0.00		
J2440		\$3.56	\$3.56		
J2460		\$1.00	\$1.00		
J2469		BR	BR		
J2501		\$5.02	\$5.02		
J2503		\$0.00	\$0.00		
J2504		\$0.00	\$0.00		
J2505		<del>\$4,785.30</del>	<del>\$4,785.30</del>		
J2510		\$9.60	\$9.60		
J2513		\$0.00	\$0.00		
J2515		\$1.32	\$1.32		
J2540		\$0.29	\$0.29		
J2543		\$5.22	\$5.22		
J2545		\$0.00	\$0.00		
J2550		\$2.85	\$2.85		
J2560		\$1.62	\$1.62		
J2590		\$1.72	\$1.72		
J2597		\$3.45	\$3.45		
J2650		\$0.31	\$0.31		
J2670		\$3.92	\$3.92		
J2675		\$0.00	\$0.00		
J2680		\$9.42	\$9.42		
J2690		\$2.15	\$2.15		
J2700		\$0.80	\$0.80		
J2710		\$3.88	\$3.88		
J2720		\$0.67	\$0.67		
J2724		\$0.00	\$0.00		
J2725		\$0.00	\$0.00		
J2730		\$60.92	\$60.92		
J2760		\$31.92	\$31.92		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J2765		\$1.99	\$1.99		
J2770		\$114.58	\$114.58		
J2778		\$0.00	\$0.00		
J2780		\$1.43	\$1.43		
J2783		BR	BR		
J2785		\$56.88	\$56.88		
J2788		\$0.00	\$0.00		
J2790		\$0.00	\$0.00		
J2791		\$0.00	\$0.00		
J2792		\$0.00	\$0.00		
J2794		\$4.80	\$4.80		
J2795		\$0.07	\$0.07		
J2800		\$14.77	\$14.77		
J2805		\$0.00	\$0.00		
J2810		\$1.59	\$1.59		
J2820		\$29.06	\$29.06		
J2850		\$0.00	\$0.00		
J2910		\$17.31	\$17.31		
J2916		\$8.17	\$8.17		
J2920		\$1.95	\$1.95		
J2930		\$3.24	\$3.24		
J2940		\$0.00	\$0.00		
J2941		\$0.00	\$0.00		
J2950		\$0.46	\$0.46		
J2993		\$1,364.44	\$1,364.44		
J2995		\$89.06	\$89.06		
J2997		\$36.70	\$36.70		
J3000		\$6.35	\$6.35		
J3010		\$0.93	\$0.93		
J3030		\$26.46	\$26.46		
J3070		\$5.23	\$5.23		
J3101		\$0.00	\$0.00		
J3105		\$29.39	\$29.39		
J3110		\$0.00	\$0.00		
J3120		\$8.98	\$8.98		
J3130		\$17.96	\$17.96		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J3140		\$0.40	\$0.40		
J3150		\$1.71	\$1.71		
J3230		\$4.40	\$4.40		
J3240		\$0.00	\$0.00		
J3243		BR	BR		
J3246		\$0.00	\$0.00		
J3250		\$1.55	\$1.55		
J3260		\$4.46	\$4.46		
J3265		\$1.56	\$1.56		
J3280		\$5.65	\$5.65		
J3285		\$0.00	\$0.00		
J3300		\$3.90	\$3.90		
J3301		\$1.62	\$1.62		
J3302		\$0.34	\$0.34		
J3303		\$1.01	\$1.01		
J3305		<del>\$157.61</del>	<del>\$157.61</del>		
J3310		\$6.31	\$6.31		
J3315		<del>\$398.62</del>	<del>\$398.62</del>		
J3320		\$28.27	\$28.27		
J3350		\$1.00	\$1.00		
J3355		\$0.00	\$0.00		
J3360		\$0.86	\$0.86		
J3364		\$10.26	\$10.26		
J3365		\$511.50	\$511.50		
J3370		\$7.03	\$7.03		
J3396		\$0.00	\$0.00		
J3400		\$12.48	\$12.48		
J3410		\$1.21	\$1.21		
J3411		BR	BR		
J3415		BR	BR		
J3420		<del>\$0.97</del>	<del>\$0.97</del>		
J3430		\$2.42	\$2.42		
J3465		BR	BR		
J3470		\$7.22	\$7.22		
J3471		BR	BR		
J3472		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J3473		BR	BR		
J3475		\$5.51	\$5.51		
J3480		\$0.66	\$0.66		
J3485		\$1.00	\$1.00		
J3486		BR	BR		
J3487		\$217.43	\$217.43		
J3488		\$0.00	\$0.00		
J3490		BR	BR		
J3520		\$0.00	\$0.00		
J3530		\$0.00	\$0.00		
J3535		\$0.00	\$0.00		
J3570		\$0.00	\$0.00		
J3590		BR	BR		
J7030		\$10.77	\$10.77		
J7040		\$5.39	\$5.39		
J7042		\$9.44	\$9.44		
J7050		\$3.61	\$3.61		
J7060		\$9.04	\$9.04		
J7070		\$10.97	\$10.97		
J7100		\$63.20	\$63.20		
J7110		\$46.30	\$46.30		
J7120		\$12.45	\$12.45		
J7130		\$0.52	\$0.52		
J7186		\$1.03	\$1.03		
J7187		BR	BR		
J7189		BR	BR		
J7190		\$0.87	\$0.87		
J7191		\$2.04	\$2.04		
J7192		\$1.26	\$1.26		
J7193		\$1.12	\$1.12		
J7194		\$0.37	\$0.37		
J7195		\$1.12	\$1.12		
J7197		\$1.25	\$1.25		
J7198		\$1.43	\$1.43		
J7199		BR	BR		
J7300		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J7302		\$0.00	\$0.00		
J7303		\$0.00	\$0.00		
J7304		\$0.00	\$0.00		
J7306		\$0.00	\$0.00		
J7307		\$0.00	\$0.00		
J7308		BR	BR		
J7310		\$0.00	\$0.00		
J7311		BR	BR		
J7318		BR	BR		
J7321		\$250.00	\$250.00		
J7322		\$250.00	\$250.00		
J7323		\$250.00	\$250.00		
J7324		\$250.00	\$250.00		
J7330		<del>\$15,162.00</del>	<del>\$15,162.00</del>		
J7500		\$0.00	\$0.00		
J7501		\$0.00	\$0.00		
J7502		\$0.00	\$0.00		
J7504		\$0.00	\$0.00		
J7505		\$0.00	\$0.00		
J7506		\$0.00	\$0.00		
J7507		\$0.00	\$0.00		
J7509		\$0.00	\$0.00		
J7510		\$0.00	\$0.00		
J7511		<del>\$357.58</del>	<del>\$357.58</del>		
J7513		\$0.00	\$0.00		
J7515		\$0.00	\$0.00		
J7516		\$0.00	\$0.00		
J7517		\$0.00	\$0.00		
J7518		\$0.00	\$0.00		
J7520		\$0.00	\$0.00		
J7525		\$0.00	\$0.00		
J7599		\$0.00	\$0.00		
J7604		\$0.00	\$0.00		
J7605		\$5.66	\$5.66		
J7606		\$5.02	\$5.02		
J7607		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J7608		BR	BR		
J7609		\$0.00	\$0.00		
J7610		BR	BR		
J7611		\$0.09	\$0.09		
J7612		\$0.15	\$0.15		
J7613		\$0.06	\$0.06		
J7614		\$0.34	\$0.34		
J7615		BR	BR		
J7620		BR	BR		
J7622		BR	BR		
J7624		BR	BR		
J7626		BR	BR		
J7627		\$0.00	\$0.00		
J7628		BR	BR		
J7629		BR	BR		
J7631		BR	BR		
J7632		\$0.00	\$0.00		
J7633		\$0.06	\$0.06		
J7634		BR	BR		
J7635		\$0.37	\$0.37		
J7636		BR	BR		
J7637		BR	BR		
J7638		BR	BR		
J7639		BR	BR		
J7640		BR	BR		
J7641		BR	BR		
J7642		\$0.56	\$0.56		
J7643		BR	BR		
J7644		BR	BR		
J7645		BR	BR		
J7647		BR	BR		
J7648		\$0.68	\$0.68		
J7649		BR	BR		
J7650		BR	BR		
J7657		BR	BR		
J7658		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J7659		BR	BR		
J7660		BR	BR		
J7667		BR	BR		
J7668		\$0.25	\$0.25		
J7669		BR	BR		
J7670		BR	BR		
J7674		\$0.00	\$0.00		
J7676		\$0.00	\$0.00		
J7680		\$0.00	\$0.00		
J7681		\$0.00	\$0.00		
J7682		BR	BR		
J7683		\$11.00	\$11.00		
J7684		BR	BR		
J7685		BR	BR		
J7699		BR	BR		
J7799		BR	BR		
J8498		\$0.00	\$0.00		
J8499		BR	BR		
J8501		\$0.00	\$0.00		
J8510		\$0.00	\$0.00		
J8515		\$0.00	\$0.00		
J8520		\$0.00	\$0.00		
J8521		\$0.00	\$0.00		
J8530		\$0.00	\$0.00		
J8540		\$0.00	\$0.00		
J8560		\$0.00	\$0.00		
J8565		\$0.00	\$0.00		
J8597		\$0.00	\$0.00		
J8600		\$0.00	\$0.00		
J8610		\$0.00	\$0.00		
J8650		\$0.00	\$0.00		
J8700		\$0.00	\$0.00		
J8705		\$0.00	\$0.00		
J8999		\$0.00	\$0.00		
J9000		\$0.00	\$0.00		
J9001		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J9010		\$0.00	\$0.00		
J9015		\$0.00	\$0.00		
J9017		\$0.00	\$0.00		
J9020		\$0.00	\$0.00		
J9025		\$0.00	\$0.00		
J9027		\$0.00	\$0.00		
J9031		\$0.00	\$0.00		
J9033		\$0.00	\$0.00		
J9035		\$0.00	\$0.00		
J9040		\$0.00	\$0.00		
J9041		\$0.00	\$0.00		
J9045		<del>\$28.84</del>	<del>\$28.84</del>		
J9050		\$0.00	\$0.00		
J9055		\$0.00	\$0.00		
J9060		<del>\$24.79</del>	<del>\$24.79</del>		
J9062		<del>\$123.92</del>	<del>\$123.92</del>		
J9065		\$0.00	\$0.00		
J9070		\$0.00	\$0.00		
J9080		\$0.00	\$0.00		
J9090		\$0.00	\$0.00		
J9091		\$0.00	\$0.00		
J9092		\$0.00	\$0.00		
J9093		\$0.00	\$0.00		
J9094		\$0.00	\$0.00		
J9095		\$0.00	\$0.00		
J9096		\$0.00	\$0.00		
J9097		\$0.00	\$0.00		
J9098		\$0.00	\$0.00		
J9100		\$0.00	\$0.00		
J9110		\$0.00	\$0.00		
J9120		\$0.00	\$0.00		
J9130		\$0.00	\$0.00		
J9140		\$0.00	\$0.00		
J9150		\$0.00	\$0.00		
J9151		\$0.00	\$0.00		
J9160		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J9165		\$0.00	\$0.00		
J9170		<del>\$712.80</del>	<del>\$712.80</del>		
J9175		\$0.00	\$0.00		
J9178		BR	BR		
J9181		\$0.00	\$0.00		
J9185		\$0.00	\$0.00		
J9190		\$0.00	\$0.00		
J9200		\$0.00	\$0.00		
J9201		\$127.38	\$127.38		
J9202		\$0.00	\$0.00		
J9206		\$0.00	\$0.00		
J9207		\$0.00	\$0.00		
J9208		\$0.00	\$0.00		
J9209		\$0.00	\$0.00		
J9211		\$0.00	\$0.00		
J9212		\$0.00	\$0.00		
J9213		\$0.00	\$0.00		
J9214		\$0.00	\$0.00		
J9215		\$0.00	\$0.00		
J9216		\$0.00	\$0.00		
J9217		\$0.00	\$0.00		
J9218		\$0.00	\$0.00		
J9219		\$0.00	\$0.00		
J9225		\$0.00	\$0.00		
J9226		\$0.00	\$0.00		
J9230		\$0.00	\$0.00		
J9245		\$0.00	\$0.00		
J9250		\$0.00	\$0.00		
J9260		\$0.00	\$0.00		
J9261		\$0.00	\$0.00		
J9263		\$0.00	\$0.00		
J9264		\$0.00	\$0.00		
J9265		\$0.00	\$0.00		
J9266		\$0.00	\$0.00		
J9268		\$0.00	\$0.00		
J9270		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
J9280		\$0.00	\$0.00		
J9290		\$0.00	\$0.00		
J9291		\$0.00	\$0.00		
J9293		\$0.00	\$0.00		
J9300		\$0.00	\$0.00		
J9303		\$0.00	\$0.00		
J9305		\$46.10	\$46.10		
J9310		\$0.00	\$0.00		
J9320		\$0.00	\$0.00		
J9330		\$0.00	\$0.00		
J9340		\$0.00	\$0.00		
J9350		\$0.00	\$0.00		
J9355		\$0.00	\$0.00		
J9357		\$0.00	\$0.00		
J9360		\$0.00	\$0.00		
J9370		\$0.00	\$0.00		
J9375		\$0.00	\$0.00		
J9380		\$0.00	\$0.00		
J9390		\$0.00	\$0.00		
J9395		BR	BR		
J9600		\$0.00	\$0.00		
J9999		\$0.00	\$0.00		
K0001		\$625.00	\$625.00		
K0002		\$825.00	\$825.00		
K0003		\$985.00	\$985.00		
K0004		\$1,250.00	\$1,250.00		
K0005		\$2,050.00	\$2,050.00		
K0006		\$1,064.00	\$1,064.00		
K0007		\$1,850.00	\$1,850.00		
K0009		\$2,875.00	\$2,875.00		
K0010		\$6,300.00	\$6,300.00		
K0011		\$8,350.00	\$8,350.00		
K0012		\$3,249.00	\$3,249.00		
K0014		\$6,300.00	\$6,300.00		
K0015		\$181.70	\$181.70		
K0017		\$48.75	\$48.75		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
K0018		\$47.25	\$47.25		
K0019		\$15.59	\$15.59		
K0020		\$55.15	\$55.15		
K0037		\$45.00	\$45.00		
K0038		\$32.00	\$32.00		
K0039		\$56.00	\$56.00		
K0040		\$71.22	\$71.22		
K0041		\$50.47	\$50.47		
K0042		\$33.04	\$33.04		
K0043		\$18.63	\$18.63		
K0044		\$15.87	\$15.87		
K0045		\$54.00	\$54.00		
K0046		\$18.63	\$18.63		
K0047		\$72.95	\$72.95		
K0050		\$31.00	\$31.00		
K0051		\$55.00	\$55.00		
K0052		\$88.17	\$88.17		
K0053		\$137.50	\$137.50		
K0056		\$95.10	\$95.10		
K0065		\$44.46	\$44.46		
K0069		\$125.00	\$125.00		
K0070		\$198.00	\$198.00		
K0071		\$120.00	\$120.00		
K0072		\$75.00	\$75.00		
K0073		\$31.93	\$31.93		
K0077		\$60.00	\$60.00		
K0099		\$85.00	\$85.00		
K0105		\$94.84	\$94.84		
K0108		\$2,000.00	\$2,000.00		
K0195		\$21.00	\$21.00		
K0455		\$252.64	\$252.64		
K0462		BR	BR		
K0552		\$2.61	\$2.61		
K0601		\$1.10	\$1.10		
K0602		\$6.36	\$6.36		
K0603		\$0.57	\$0.57		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
K0604		\$6.09	\$6.09		
K0605		\$14.60	\$14.60		
K0606		BR	BR		
K0607		\$198.31	\$198.31		
K0608		\$123.76	\$123.76		
K0609		\$823.02	\$823.02		
K0669		BR	BR		
K0672		\$92.15	\$92.15		
K0730		BR	BR		
K0733		\$200.00	\$200.00		
K0734		BR	BR		
K0735		BR	BR		
K0736		BR	BR		
K0800		\$1,422.05	\$1,422.05		
K0801		\$2,292.64	\$2,292.64		
K0802		\$2,594.53	\$2,594.53		
K0806		\$1,720.30	\$1,720.30		
K0807		\$2,610.36	\$2,610.36		
K0808		\$4,038.76	\$4,038.76		
K0813		\$2,451.13	\$2,451.13		
K0814		\$3,088.36	\$3,088.36		
K0815		\$3,794.01	\$3,794.01		
K0816		\$3,621.31	\$3,621.31		
K0820		\$2,760.56	\$2,760.56		
K0821		\$3,473.36	\$3,473.36		
K0822		\$4,304.30	\$4,304.30		
K0823		\$4,343.35	\$4,343.35		
K0824		\$5,234.90	\$5,234.90		
K0825		\$4,347.20	\$4,347.20		
K0826		\$6,804.27	\$6,804.27		
K0827		\$5,198.27	\$5,198.27		
K0828		\$7,506.84	\$7,506.84		
K0829		\$6,186.18	\$6,186.18		
K0830		\$4,868.49	\$4,868.49		
K0831		\$4,868.49	\$4,868.49		
K0835		\$4,454.78	\$4,454.78		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
K0836		\$4,536.40	\$4,536.40		
K0837		\$5,234.90	\$5,234.90		
K0838		\$4,724.06	\$4,724.06		
K0839		\$6,804.27	\$6,804.27		
K0840		\$9,185.66	\$9,185.66		
K0841		\$5,006.65	\$5,006.65		
K0842		\$5,006.65	\$5,006.65		
K0843		\$5,597.02	\$5,597.02		
K0848		\$5,690.41	\$5,690.41		
K0849		\$5,469.31	\$5,469.31		
K0850		\$6,316.31	\$6,316.31		
K0851		\$6,071.12	\$6,071.12		
K0852		\$7,668.10	\$7,668.10		
K0853		\$7,880.40	\$7,880.40		
K0854		\$10,027.16	\$10,027.16		
K0855		\$9,377.83	\$9,377.83		
K0856		\$6,117.43	\$6,117.43		
K0857		\$5,705.04	\$5,705.04		
K0858		\$7,618.82	\$7,618.82		
K0859		\$7,131.08	\$7,131.08		
K0860		\$10,707.51	\$10,707.51		
K0861		\$6,127.11	\$6,127.11		
K0862		\$7,618.82	\$7,618.82		
K0863		\$10,707.51	\$10,707.51		
K0864		\$12,741.63	\$12,741.63		
K0868		BR	BR		
K0869		BR	BR		
K0877		BR	BR		
K0879		BR	BR		
K0880		BR	BR		
K0884		BR	BR		
K0885		BR	BR		
K0886		BR	BR		
K0890		\$0.00	\$0.00		
K0891		\$0.00	\$0.00		
K0898		\$0.00	\$0.00		
L0113		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L0120		\$25.00	\$25.00		
L0130		\$116.00	\$116.00		
L0140		\$46.00	\$46.00		
L0150		\$90.00	\$90.00		
L0160		\$119.00	\$119.00		
L0170		\$611.00	\$611.00		
L0172		\$110.00	\$110.00		
L0174		\$212.00	\$212.00		
L0180		\$343.00	\$343.00		
L0190		\$405.00	\$405.00		
L0200		\$469.00	\$469.00		
L0210		\$42.00	\$42.00		
L0220		\$115.00	\$115.00		
L0430		\$1,227.00	\$1,227.00		
L0450		\$130.83	\$130.83		
L0452		\$254.62	\$254.62		
L0454		\$344.54	\$344.54		
L0456		\$800.69	\$800.69		
L0458		\$717.99	\$717.99		
L0460		\$800.15	\$800.15		
L0462		\$1,005.18	\$1,005.18		
L0464		\$1,196.67	\$1,196.67		
L0466		\$305.44	\$305.44		
L0468		\$382.79	\$382.79		
L0470		\$529.68	\$529.68		
L0472		\$325.93	\$325.93		
L0480		\$1,215.99	\$1,215.99		
L0482		\$1,358.27	\$1,358.27		
L0484		\$1,466.90	\$1,466.90		
L0486		\$1,647.00	\$1,647.00		
L0488		\$1,005.18	\$1,005.18		
L0490		\$1,039.20	\$1,039.20		
L0491		\$618.00	\$618.00		
L0492		\$402.60	\$402.60		
L0621		\$69.00	\$69.00		
L0622		\$215.00	\$215.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L0623		BR	BR		
L0624		BR	BR		
L0625		\$44.00	\$44.00		
L0626		\$63.00	\$63.00		
L0627		\$331.00	\$331.00		
L0628		\$68.00	\$68.00		
L0629		BR	BR		
L0630		\$130.00	\$130.00		
L0631		\$826.00	\$826.00		
L0632		BR	BR		
L0633		\$231.00	\$231.00		
L0634		BR	BR		
L0635		\$804.00	\$804.00		
L0636		\$1,169.14	\$1,169.14		
L0637		\$1,043.00	\$1,043.00		
L0638		\$1,062.00	\$1,062.00		
L0639		\$1,043.00	\$1,043.00		
L0640		\$842.00	\$842.00		
L0700		\$1,514.00	\$1,514.00		
L0710		\$1,664.00	\$1,664.00		
L0810		\$2,032.00	\$2,032.00		
L0820		\$1,599.00	\$1,599.00		
L0830		\$2,500.00	\$2,500.00		
L0859		\$917.00	\$917.00		
L0861		\$173.53	\$173.53		
L0970		\$81.00	\$81.00		
L0972		\$84.00	\$84.00		
L0974		\$133.00	\$133.00		
L0976		\$114.00	\$114.00		
L0978		\$143.00	\$143.00		
L0980		\$15.00	\$15.00		
L0982		\$12.00	\$12.00		
L0984		\$51.00	\$51.00		
L0999		BR	BR		
L1000		\$1,542.00	\$1,542.00		
L1001		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L1005		\$2,548.66	\$2,548.66		
L1010		\$69.00	\$69.00		
L1020		\$82.00	\$82.00		
L1025		\$118.00	\$118.00		
L1030		\$60.00	\$60.00		
L1040		\$67.00	\$67.00		
L1050		\$76.00	\$76.00		
L1060		\$82.00	\$82.00		
L1070		\$85.00	\$85.00		
L1080		\$40.00	\$40.00		
L1085		\$141.00	\$141.00		
L1090		\$77.00	\$77.00		
L1100		\$159.00	\$159.00		
L1110		\$242.00	\$242.00		
L1120		\$32.00	\$32.00		
L1200		\$1,361.00	\$1,361.00		
L1210		\$186.00	\$186.00		
L1220		\$182.00	\$182.00		
L1230		\$554.00	\$554.00		
L1240		\$69.00	\$69.00		
L1250		\$60.00	\$60.00		
L1260		\$72.00	\$72.00		
L1270		\$63.00	\$63.00		
L1280		\$66.00	\$66.00		
L1290		\$59.00	\$59.00		
L1300		\$1,310.00	\$1,310.00		
L1310		\$1,365.00	\$1,365.00		
L1499		BR	BR		
L1500		\$0.00	\$0.00		
L1510		\$0.00	\$0.00		
L1520		\$0.00	\$0.00		
L1600		\$0.00	\$0.00		
L1610		\$0.00	\$0.00		
L1620		\$0.00	\$0.00		
L1630		\$0.00	\$0.00		
L1640		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L1650		\$0.00	\$0.00		
L1652		\$0.00	\$0.00		
L1660		\$0.00	\$0.00		
L1680		\$866.00	\$866.00		
L1685		\$846.00	\$846.00		
L1686		\$750.00	\$750.00		
L1690		\$1,470.00	\$1,470.00		
L1700		\$0.00	\$0.00		
L1710		\$0.00	\$0.00		
L1720		\$0.00	\$0.00		
L1730		\$0.00	\$0.00		
L1755		\$0.00	\$0.00		
L1800		\$57.00	\$57.00		
L1810		\$99.00	\$99.00		
L1815		\$72.00	\$72.00		
L1820		\$120.00	\$120.00		
L1825		\$45.00	\$45.00		
L1830		\$70.00	\$70.00		
L1831		\$236.95	\$236.95		
L1832		\$524.00	\$524.00		
L1834		\$552.00	\$552.00		
L1836		\$107.40	\$107.40		
L1840		\$715.00	\$715.00		
L1843		\$682.00	\$682.00		
L1844		\$1,158.00	\$1,158.00		
L1845		\$637.00	\$637.00		
L1846		\$851.00	\$851.00		
L1847		\$437.00	\$437.00		
L1850		\$217.00	\$217.00		
L1860		\$948.00	\$948.00		
L1900		\$217.00	\$217.00		
L1901		\$14.24	\$14.24		
L1902		\$57.00	\$57.00		
L1904		\$343.00	\$343.00		
L1906		\$85.00	\$85.00		
L1907		\$453.00	\$453.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L1910		\$213.00	\$213.00		
L1920		\$312.00	\$312.00		
L1930		\$229.00	\$229.00		
L1932		\$715.00	\$715.00		
L1940		\$380.00	\$380.00		
L1945		\$853.00	\$853.00		
L1950		\$585.00	\$585.00		
L1951		\$676.11	\$676.11		
L1960		\$640.00	\$640.00		
L1970		\$600.00	\$600.00		
L1971		\$377.36	\$377.36		
L1980		\$307.00	\$307.00		
L1990		\$355.00	\$355.00		
L2000		\$851.00	\$851.00		
L2005		\$2,898.00	\$2,898.00		
L2010		\$663.00	\$663.00		
L2020		\$838.00	\$838.00		
L2030		\$824.00	\$824.00		
L2034		BR	BR		
L2035		\$0.00	\$0.00		
L2036		\$1,500.00	\$1,500.00		
L2037		\$1,261.00	\$1,261.00		
L2038		\$1,016.00	\$1,016.00		
L2040		\$0.00	\$0.00		
L2050		\$0.00	\$0.00		
L2060		\$0.00	\$0.00		
L2070		\$0.00	\$0.00		
L2080		\$0.00	\$0.00		
L2090		\$0.00	\$0.00		
L2106		\$865.00	\$865.00		
L2108		\$874.00	\$874.00		
L2112		\$384.00	\$384.00		
L2114		\$480.00	\$480.00		
L2116		\$586.00	\$586.00		
L2126		\$971.00	\$971.00		
L2128		\$1,219.00	\$1,219.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L2132		\$740.00	\$740.00		
L2134		\$876.00	\$876.00		
L2136		\$959.00	\$959.00		
L2180		\$101.00	\$101.00		
L2182		\$87.00	\$87.00		
L2184		\$106.00	\$106.00		
L2186		\$154.00	\$154.00		
L2188		\$236.00	\$236.00		
L2190		\$70.00	\$70.00		
L2192		\$253.00	\$253.00		
L2200		\$42.00	\$42.00		
L2210		\$48.00	\$48.00		
L2220		\$62.00	\$62.00		
L2230		\$74.00	\$74.00		
L2232		BR	BR		
L2240		\$72.00	\$72.00		
L2250		\$254.00	\$254.00		
L2260		\$143.00	\$143.00		
L2265		\$102.00	\$102.00		
L2270		\$47.00	\$47.00		
L2275		\$99.00	\$99.00		
L2280		\$429.00	\$429.00		
L2300		\$192.00	\$192.00		
L2310		\$87.00	\$87.00		
L2320		\$147.00	\$147.00		
L2330		\$286.00	\$286.00		
L2335		\$244.00	\$244.00		
L2340		\$318.00	\$318.00		
L2350		\$633.00	\$633.00		
L2360		\$39.00	\$39.00		
L2370		\$243.00	\$243.00		
L2375		\$94.00	\$94.00		
L2380		\$98.00	\$98.00		
L2385		\$115.00	\$115.00		
L2387		BR	BR		
L2390		\$78.00	\$78.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L2395		\$111.00	\$111.00		
L2397		\$93.00	\$93.00		
L2405		\$70.00	\$70.00		
L2415		\$136.00	\$136.00		
L2425		\$146.00	\$146.00		
L2430		\$153.00	\$153.00		
L2492		\$89.00	\$89.00		
L2500		\$238.00	\$238.00		
L2510		\$613.00	\$613.00		
L2520		\$409.00	\$409.00		
L2525		\$867.00	\$867.00		
L2526		\$510.00	\$510.00		
L2530		\$182.00	\$182.00		
L2540		\$345.00	\$345.00		
L2550		\$259.00	\$259.00		
L2570		\$339.00	\$339.00		
L2580		\$330.00	\$330.00		
L2600		\$162.00	\$162.00		
L2610		\$179.00	\$179.00		
L2620		\$190.00	\$190.00		
L2622		\$242.00	\$242.00		
L2624		\$297.00	\$297.00		
L2627		\$1,625.00	\$1,625.00		
L2628		\$1,191.00	\$1,191.00		
L2630		\$176.00	\$176.00		
L2640		\$239.00	\$239.00		
L2650		\$105.00	\$105.00		
L2660		\$136.00	\$136.00		
L2670		\$121.00	\$121.00		
L2680		\$111.00	\$111.00		
L2750		\$59.00	\$59.00		
L2755		\$132.00	\$132.00		
L2760		\$43.00	\$43.00		
L2768		\$103.74	\$103.74		
L2770		\$47.00	\$47.00		
L2780		\$48.00	\$48.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L2785		\$60.00	\$60.00		
L2795		\$74.00	\$74.00		
L2800		\$77.00	\$77.00		
L2810		\$62.00	\$62.00		
L2820		\$62.00	\$62.00		
L2830		\$67.00	\$67.00		
L2840		\$45.00	\$45.00		
L2850		\$46.00	\$46.00		
L2999		BR	BR		
L3000		\$240.00	\$240.00		
L3001		\$75.00	\$75.00		
L3002		\$75.00	\$75.00		
L3003		\$135.00	\$135.00		
L3010		\$145.00	\$145.00		
L3020		\$140.00	\$140.00		
L3030		\$25.00	\$25.00		
L3031		BR	BR		
L3040		\$25.00	\$25.00		
L3050		\$25.00	\$25.00		
L3060		\$32.00	\$32.00		
L3070		\$20.00	\$20.00		
L3080		\$20.00	\$20.00		
L3090		\$30.00	\$30.00		
L3100		\$0.00	\$0.00		
L3140		\$0.00	\$0.00		
L3150		\$0.00	\$0.00		
L3160		\$0.00	\$0.00		
L3170		\$20.00	\$20.00		
L3201		\$0.00	\$0.00		
L3202		\$0.00	\$0.00		
L3203		BR	BR		
L3204		\$0.00	\$0.00		
L3206		\$0.00	\$0.00		
L3207		BR	BR		
L3208		\$0.00	\$0.00		
L3209		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L3211		BR	BR		
L3212		\$0.00	\$0.00		
L3213		\$0.00	\$0.00		
L3214		BR	BR		
L3215		\$200.00	\$200.00		
L3216		\$110.00	\$110.00		
L3217		\$120.00	\$120.00		
L3219		\$220.00	\$220.00		
L3221		\$140.00	\$140.00		
L3222		\$150.00	\$150.00		
L3230		\$300.00	\$300.00		
L3224		\$130.00	\$130.00		
L3225		\$155.00	\$155.00		
L3250		\$300.00	\$300.00		
L3251		\$201.00	\$201.00		
L3252		\$100.00	\$100.00		
L3253		\$75.00	\$75.00		
L3254		\$200.00	\$200.00		
L3255		\$200.00	\$200.00		
L3257		\$50.00	\$50.00		
L3260		\$30.00	\$30.00		
L3265		\$50.00	\$50.00		
L3300		\$55.00	\$55.00		
L3310		\$66.00	\$66.00		
L3320		\$57.00	\$57.00		
L3330		\$330.00	\$330.00		
L3332		\$50.00	\$50.00		
L3334		\$30.00	\$30.00		
L3340		\$48.00	\$48.00		
L3350		\$18.00	\$18.00		
L3360		\$25.00	\$25.00		
L3370		\$32.00	\$32.00		
L3380		\$0.00	\$0.00		
L3390		\$36.00	\$36.00		
L3400		\$45.00	\$45.00		
L3410		\$60.00	\$60.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L3420		\$60.00	\$60.00		
L3430		\$45.00	\$45.00		
L3440		\$40.00	\$40.00		
L3450		\$50.00	\$50.00		
L3455		\$18.00	\$18.00		
L3460		\$20.00	\$20.00		
L3465		\$35.00	\$35.00		
L3470		\$48.00	\$48.00		
L3480		\$40.00	\$40.00		
L3485		\$38.00	\$38.00		
L3500		\$18.00	\$18.00		
L3510		\$11.00	\$11.00		
L3520		\$39.00	\$39.00		
L3530		\$24.00	\$24.00		
L3540		\$46.00	\$46.00		
L3550		\$8.00	\$8.00		
L3560		\$18.00	\$18.00		
L3570		\$100.00	\$100.00		
L3580		\$40.00	\$40.00		
L3590		\$50.00	\$50.00		
L3595		\$35.00	\$35.00		
L3600		\$70.00	\$70.00		
L3610		\$130.00	\$130.00		
L3620		\$60.00	\$60.00		
L3630		\$117.00	\$117.00		
L3640		\$0.00	\$0.00		
L3649		BR	BR		
L3650		\$50.00	\$50.00		
L3651		\$48.24	\$48.24		
L3652		\$145.38	\$145.38		
L3660		\$72.00	\$72.00		
L3670		\$79.00	\$79.00		
L3671		BR	BR		
L3672		BR	BR		
L3673		BR	BR		
L3675		\$121.00	\$121.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L3677		BR	BR		
L3700		\$53.00	\$53.00		
L3701		\$14.93	\$14.93		
L3702		BR	BR		
L3710		\$99.00	\$99.00		
L3720		\$473.00	\$473.00		
L3730		\$627.00	\$627.00		
L3740		\$743.00	\$743.00		
L3760		\$366.00	\$366.00		
L3762		\$78.78	\$78.78		
L3763		BR	BR		
L3764		BR	BR		
L3765		BR	BR		
L3766		BR	BR		
L3806		BR	BR		
L3807		\$175.00	\$175.00		
L3808		BR	BR		
L3900		\$1,121.00	\$1,121.00		
L3901		\$1,469.00	\$1,469.00		
L3904		\$2,336.00	\$2,336.00		
L3905		BR	BR		
L3906		\$351.00	\$351.00		
L3908		\$51.00	\$51.00		
L3909		\$10.37	\$10.37		
L3911		\$18.00	\$18.00		
L3912		\$73.00	\$73.00		
L3913		BR	BR		
L3915		BR	BR		
L3917		\$77.37	\$77.37		
L3919		BR	BR		
L3921		BR	BR		
L3923		\$27.00	\$27.00		
L3925		\$61.86	\$61.86		
L3927		\$61.86	\$61.86		
L3929		\$86.02	\$86.02		
L3931		\$196.36	\$196.36		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L3933		BR	BR		
L3935		BR	BR		
L3956		\$76.00	\$76.00		
L3960		\$552.00	\$552.00		
L3961		BR	BR		
L3962		\$522.76	\$522.76		
L3964		\$590.00	\$590.00		
L3965		\$804.00	\$804.00		
L3966		\$634.00	\$634.00		
L3967		BR	BR		
L3968		\$901.00	\$901.00		
L3969		\$561.00	\$561.00		
L3970		\$224.00	\$224.00		
L3971		\$1,161.00	\$1,161.00		
L3972		\$142.00	\$142.00		
L3973		\$1,161.00	\$1,161.00		
L3974		\$121.00	\$121.00		
L3975		BR	BR		
L3976		BR	BR		
L3977		BR	BR		
L3978		BR	BR		
L3980		\$267.00	\$267.00		
L3982		\$272.00	\$272.00		
L3984		\$239.00	\$239.00		
L3995		\$30.00	\$30.00		
L3999		BR	BR		
L4000		\$1,063.00	\$1,063.00		
L4002		BR	BR		
L4010		\$646.00	\$646.00		
L4020		\$776.00	\$776.00		
L4030		\$493.00	\$493.00		
L4040		\$350.00	\$350.00		
L4045		\$233.00	\$233.00		
L4050		\$350.00	\$350.00		
L4055		\$190.00	\$190.00		
L4060		\$247.00	\$247.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L4070		\$200.00	\$200.00		
L4080		\$80.00	\$80.00		
L4090		\$70.00	\$70.00		
L4100		\$77.00	\$77.00		
L4110		\$65.00	\$65.00		
L4130		\$385.00	\$385.00		
L4205		\$50.00	\$50.00		
L4210		\$50.00	\$50.00		
L4350		\$74.00	\$74.00		
L4360		\$197.00	\$197.00		
L4370		\$179.00	\$179.00		
L4380		\$87.00	\$87.00		
L4386		\$127.65	\$127.65		
L4392		\$19.00	\$19.00		
L4394		\$14.00	\$14.00		
L4396		\$135.00	\$135.00		
L4398		\$62.00	\$62.00		
L5000		\$437.00	\$437.00		
L5010		\$1,220.00	\$1,220.00		
L5020		\$1,911.00	\$1,911.00		
L5050		\$2,087.00	\$2,087.00		
L5060		\$2,573.00	\$2,573.00		
L5100		\$2,078.00	\$2,078.00		
L5105		\$2,933.00	\$2,933.00		
L5150		\$3,261.00	\$3,261.00		
L5160		\$3,580.00	\$3,580.00		
L5200		\$2,769.00	\$2,769.00		
L5210		\$2,199.00	\$2,199.00		
L5220		\$2,422.00	\$2,422.00		
L5230		\$3,633.00	\$3,633.00		
L5250		\$4,259.00	\$4,259.00		
L5270		\$4,746.00	\$4,746.00		
L5280		\$4,613.00	\$4,613.00		
L5301		\$4,260.19	\$4,260.19		
L5311		\$3,367.90	\$3,367.90		
L5321		\$2,850.39	\$2,850.39		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L5331		\$4,174.79	\$4,174.79		
L5341		\$4,486.55	\$4,486.55		
L5400		\$1,215.00	\$1,215.00		
L5410		\$355.00	\$355.00		
L5420		\$1,535.00	\$1,535.00		
L5430		\$417.00	\$417.00		
L5450		\$360.00	\$360.00		
L5460		\$473.00	\$473.00		
L5500		\$1,123.00	\$1,123.00		
L5505		\$1,580.00	\$1,580.00		
L5510		\$1,341.00	\$1,341.00		
L5520		\$1,203.00	\$1,203.00		
L5530		\$1,581.00	\$1,581.00		
L5535		\$1,474.00	\$1,474.00		
L5540		\$1,561.00	\$1,561.00		
L5560		\$1,778.00	\$1,778.00		
L5570		\$1,726.00	\$1,726.00		
L5580		\$2,152.00	\$2,152.00		
L5585		\$2,509.00	\$2,509.00		
L5590		\$2,233.00	\$2,233.00		
L5595		\$3,850.00	\$3,850.00		
L5600		\$4,088.00	\$4,088.00		
L5610		\$2,000.00	\$2,000.00		
L5611		\$1,220.00	\$1,220.00		
L5613		\$1,856.00	\$1,856.00		
L5614		\$3,411.00	\$3,411.00		
L5616		\$1,315.00	\$1,315.00		
L5617		\$426.00	\$426.00		
L5618		\$275.00	\$275.00		
L5620		\$267.00	\$267.00		
L5622		\$363.00	\$363.00		
L5624		\$319.00	\$319.00		
L5626		\$481.00	\$481.00		
L5628		\$488.00	\$488.00		
L5629		\$241.00	\$241.00		
L5630		\$430.00	\$430.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L5631		\$350.00	\$350.00		
L5632		\$205.00	\$205.00		
L5634		\$264.00	\$264.00		
L5636		\$196.00	\$196.00		
L5637		\$303.00	\$303.00		
L5638		\$491.00	\$491.00		
L5639		\$873.00	\$873.00		
L5640		\$573.00	\$573.00		
L5642		\$561.00	\$561.00		
L5643		\$1,559.00	\$1,559.00		
L5644		\$460.00	\$460.00		
L5645		\$765.00	\$765.00		
L5646		\$470.00	\$470.00		
L5647		\$602.00	\$602.00		
L5648		\$556.00	\$556.00		
L5649		\$1,867.00	\$1,867.00		
L5650		\$370.00	\$370.00		
L5651		\$1,205.00	\$1,205.00		
L5652		\$340.00	\$340.00		
L5653		\$515.00	\$515.00		
L5654		\$307.00	\$307.00		
L5655		\$222.00	\$222.00		
L5656		\$328.00	\$328.00		
L5658		\$346.00	\$346.00		
L5661		\$496.00	\$496.00		
L5665		\$441.00	\$441.00		
L5666		\$61.00	\$61.00		
L5668		\$122.00	\$122.00		
L5670		\$211.00	\$211.00		
L5671		\$394.56	\$394.56		
L5672		\$272.00	\$272.00		
L5673		\$633.97	\$633.97		
L5676		\$274.00	\$274.00		
L5677		\$420.00	\$420.00		
L5678		\$35.00	\$35.00		
L5679		\$528.30	\$528.30		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L5680		\$231.00	\$231.00		
L5681		\$1,061.04	\$1,061.04		
L5682		\$474.00	\$474.00		
L5683		\$1,061.04	\$1,061.04		
L5684		\$40.00	\$40.00		
L5685		BR	BR		
L5686		\$48.00	\$48.00		
L5688		\$64.00	\$64.00		
L5690		\$117.00	\$117.00		
L5692		\$101.00	\$101.00		
L5694		\$137.00	\$137.00		
L5695		\$124.00	\$124.00		
L5696		\$149.00	\$149.00		
L5697		\$71.00	\$71.00		
L5698		\$91.00	\$91.00		
L5699		\$155.00	\$155.00		
L5700		\$2,405.00	\$2,405.00		
L5701		\$2,983.00	\$2,983.00		
L5702		\$3,653.00	\$3,653.00		
L5703		BR	BR		
L5704		\$489.00	\$489.00		
L5705		\$898.00	\$898.00		
L5706		\$852.00	\$852.00		
L5707		\$1,145.00	\$1,145.00		
L5710		\$272.00	\$272.00		
L5711		\$457.00	\$457.00		
L5712		\$336.00	\$336.00		
L5714		\$332.00	\$332.00		
L5716		\$657.00	\$657.00		
L5718		\$702.00	\$702.00		
L5722		\$854.00	\$854.00		
L5724		\$1,316.00	\$1,316.00		
L5726		\$1,567.00	\$1,567.00		
L5728		\$1,836.00	\$1,836.00		
L5780		\$1,011.00	\$1,011.00		
L5781		\$3,227.47	\$3,227.47		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L5782		\$3,402.00	\$3,402.00		
L5785		\$393.00	\$393.00		
L5790		\$568.00	\$568.00		
L5795		\$813.00	\$813.00		
L5810		\$433.00	\$433.00		
L5811		\$660.00	\$660.00		
L5812		\$462.00	\$462.00		
L5814		\$2,829.00	\$2,829.00		
L5816		\$644.00	\$644.00		
L5818		\$727.00	\$727.00		
L5822		\$1,334.00	\$1,334.00		
L5824		\$1,261.00	\$1,261.00		
L5826		\$2,403.00	\$2,403.00		
L5828		\$2,419.00	\$2,419.00		
L5830		\$1,514.00	\$1,514.00		
L5840		\$2,971.00	\$2,971.00		
L5845		\$2,777.00	\$2,777.00		
L5848		\$867.39	\$867.39		
L5850		\$97.00	\$97.00		
L5855		\$234.00	\$234.00		
L5856		\$19,364.00	\$19,364.00		
L5857		\$6,871.00	\$6,871.00		
L5858		\$14,991.00	\$14,991.00		
L5910		\$274.00	\$274.00		
L5920		\$402.00	\$402.00		
L5925		\$254.00	\$254.00		
L5930		\$2,564.00	\$2,564.00		
L5940		\$379.00	\$379.00		
L5950		\$589.00	\$589.00		
L5960		\$881.00	\$881.00		
L5962		\$445.00	\$445.00		
L5964		\$854.00	\$854.00		
L5966		\$1,100.00	\$1,100.00		
L5968		\$2,768.00	\$2,768.00		
L5970		\$165.00	\$165.00		
L5971		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L5972		\$301.00	\$301.00		
L5974		\$176.00	\$176.00		
L5975		\$353.00	\$353.00		
L5976		\$448.00	\$448.00		
L5978		\$237.00	\$237.00		
L5979		\$1,899.00	\$1,899.00		
L5980		\$2,894.00	\$2,894.00		
L5981		\$2,599.00	\$2,599.00		
L5982		\$488.00	\$488.00		
L5984		\$490.00	\$490.00		
L5985		\$215.00	\$215.00		
L5986		\$591.00	\$591.00		
L5987		\$5,480.00	\$5,480.00		
L5988		\$1,522.00	\$1,522.00		
L5990		\$1,447.44	\$1,447.44		
L5999		BR	BR		
L6000		\$1,342.00	\$1,342.00		
L6010		\$1,493.00	\$1,493.00		
L6020		\$1,392.00	\$1,392.00		
L6025		\$6,454.93	\$6,454.93		
L6050		\$1,894.00	\$1,894.00		
L6055		\$2,415.00	\$2,415.00		
L6100		\$1,916.00	\$1,916.00		
L6110		\$2,027.00	\$2,027.00		
L6120		\$2,293.00	\$2,293.00		
L6130		\$2,533.54	\$2,533.54		
L6200		\$2,492.00	\$2,492.00		
L6205		\$3,437.00	\$3,437.00		
L6250		\$2,452.00	\$2,452.00		
L6300		\$3,381.00	\$3,381.00		
L6310		\$3,064.00	\$3,064.00		
L6320		\$1,597.00	\$1,597.00		
L6350		\$3,705.00	\$3,705.00		
L6360		\$3,216.00	\$3,216.00		
L6370		\$1,865.00	\$1,865.00		
L6380		\$1,247.00	\$1,247.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCP	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L6382		\$1,284.00	\$1,284.00		
L6384		\$1,624.00	\$1,624.00		
L6386		\$356.00	\$356.00		
L6388		\$402.00	\$402.00		
L6400		\$2,198.00	\$2,198.00		
L6450		\$2,745.00	\$2,745.00		
L6500		\$2,660.00	\$2,660.00		
L6550		\$3,446.00	\$3,446.00		
L6570		\$3,847.00	\$3,847.00		
L6580		\$1,538.00	\$1,538.00		
L6582		\$1,292.00	\$1,292.00		
L6584		\$1,913.00	\$1,913.00		
L6586		\$1,704.00	\$1,704.00		
L6588		\$2,714.00	\$2,714.00		
L6590		\$2,366.00	\$2,366.00		
L6600		\$173.00	\$173.00		
L6605		\$178.00	\$178.00		
L6610		\$168.00	\$168.00		
L6611		BR	BR		
L6615		\$163.00	\$163.00		
L6616		\$49.00	\$49.00		
L6620		\$285.00	\$285.00		
L6621		BR	BR		
L6623		\$543.00	\$543.00		
L6624		BR	BR		
L6625		\$403.00	\$403.00		
L6628		\$434.00	\$434.00		
L6629		\$148.00	\$148.00		
L6630		\$350.00	\$350.00		
L6632		\$49.00	\$49.00		
L6635		\$157.00	\$157.00		
L6637		\$378.00	\$378.00		
L6638		\$2,017.15	\$2,017.15		
L6639		BR	BR		
L6640		\$256.00	\$256.00		
L6641		\$152.00	\$152.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L6642		\$220.00	\$220.00		
L6645		\$277.00	\$277.00		
L6646		\$2,544.10	\$2,544.10		
L6647		\$418.85	\$418.85		
L6648		\$2,623.87	\$2,623.87		
L6650		\$301.00	\$301.00		
L6655		\$60.00	\$60.00		
L6660		\$86.00	\$86.00		
L6665		\$43.00	\$43.00		
L6670		\$46.00	\$46.00		
L6672		\$210.00	\$210.00		
L6675		\$98.00	\$98.00		
L6676		\$112.00	\$112.00		
L6677		BR	BR		
L6680		\$268.00	\$268.00		
L6682		\$259.00	\$259.00		
L6684		\$352.00	\$352.00		
L6686		\$641.00	\$641.00		
L6687		\$437.00	\$437.00		
L6688		\$483.00	\$483.00		
L6689		\$576.00	\$576.00		
L6690		\$678.00	\$678.00		
L6691		\$268.00	\$268.00		
L6692		\$487.00	\$487.00		
L6693		\$2,163.00	\$2,163.00		
L6694		BR	BR		
L6695		BR	BR		
L6696		BR	BR		
L6697		BR	BR		
L6698		BR	BR		
L6703		BR	BR		
L6704		BR	BR		
L6706		BR	BR		
L6707		BR	BR		
L6708		BR	BR		
L6709		\$1,207.00	\$1,207.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L6711		\$731.92	\$731.92		
L6712		\$1,347.65	\$1,347.65		
L6713		\$1,700.83	\$1,700.83		
L6714		\$1,440.60	\$1,440.60		
L6721		\$2,560.54	\$2,560.54		
L6722		\$2,207.35	\$2,207.35		
L6805		\$292.00	\$292.00		
L6810		\$155.00	\$155.00		
L6881		\$2,361.81	\$2,361.81		
L6882		\$2,474.25	\$2,474.25		
L6883		BR	BR		
L6884		BR	BR		
L6885		BR	BR		
L6890		\$167.00	\$167.00		
L6895		\$509.00	\$509.00		
L6900		\$1,477.00	\$1,477.00		
L6905		\$1,462.00	\$1,462.00		
L6910		\$1,437.00	\$1,437.00		
L6915		\$1,074.00	\$1,074.00		
L6920		\$6,381.00	\$6,381.00		
L6925		\$7,322.00	\$7,322.00		
L6930		\$6,146.00	\$6,146.00		
L6935		\$7,184.87	\$7,184.87		
L6940		\$7,937.00	\$7,937.00		
L6945		\$8,854.00	\$8,854.00		
L6950		\$7,922.00	\$7,922.00		
L6955		\$9,400.00	\$9,400.00		
L6960		\$10,252.00	\$10,252.00		
L6965		\$12,020.00	\$12,020.00		
L6970		\$13,242.00	\$13,242.00		
L6975		\$14,767.00	\$14,767.00		
L7007		BR	BR		
L7008		\$0.00	\$0.00		
L7009		BR	BR		
L7040		\$2,317.00	\$2,317.00		
L7045		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L7170		\$4,582.00	\$4,582.00		
L7180		\$29,645.00	\$29,645.00		
L7181		BR	BR		
L7185		\$4,817.00	\$4,817.00		
L7186		\$0.00	\$0.00		
L7190		\$6,768.00	\$6,768.00		
L7191		\$0.00	\$0.00		
L7260		\$1,663.00	\$1,663.00		
L7261		\$3,581.00	\$3,581.00		
L7266		\$802.65	\$802.65		
L7272		\$1,798.00	\$1,798.00		
L7274		\$5,575.00	\$5,575.00		
L7360		\$202.00	\$202.00		
L7362		\$220.00	\$220.00		
L7364		\$390.00	\$390.00		
L7366		\$536.00	\$536.00		
L7367		\$314.05	\$314.05		
L7368		\$407.11	\$407.11		
L7400		BR	BR		
L7401		BR	BR		
L7402		BR	BR		
L7403		BR	BR		
L7404		BR	BR		
L7405		BR	BR		
L7499		BR	BR		
L7500		\$152.00	\$152.00		
L7510		\$250.00	\$250.00		
L7520		\$50.00	\$50.00		
L7600		BR	BR		
L7900		\$400.00	\$400.00		
L8000		\$33.00	\$33.00		
L8001		\$100.09	\$100.09		
L8002		\$131.63	\$131.63		
L8015		\$46.00	\$46.00		
L8020		\$172.00	\$172.00		
L8030		\$266.00	\$266.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L8035		\$2,791.00	\$2,791.00		
L8039		BR	BR		
L8040		\$2,166.14	\$2,166.14		
L8041		\$2,166.14	\$2,166.14		
L8042		\$2,166.14	\$2,166.14		
L8043		\$2,166.14	\$2,166.14		
L8044		\$2,166.14	\$2,166.14		
L8045		\$2,166.14	\$2,166.14		
L8046		\$2,166.14	\$2,166.14		
L8047		\$2,166.14	\$2,166.14		
L8048		\$2,166.14	\$2,166.14		
L8049		BR	BR		
L8300		\$135.00	\$135.00		
L8310		\$175.00	\$175.00		
L8320		\$47.00	\$47.00		
L8330		\$37.00	\$37.00		
L8400		\$12.00	\$12.00		
L8410		\$16.00	\$16.00		
L8415		\$16.00	\$16.00		
L8417		\$57.00	\$57.00		
L8420		\$16.00	\$16.00		
L8430		\$18.00	\$18.00		
L8435		\$17.00	\$17.00		
L8440		\$37.00	\$37.00		
L8460		\$52.00	\$52.00		
L8465		\$47.00	\$47.00		
L8470		\$5.00	\$5.00		
L8480		\$7.00	\$7.00		
L8485		\$9.00	\$9.00		
L8499		BR	BR		
L8500		\$501.00	\$501.00		
L8501		\$91.00	\$91.00		
L8505		BR	BR		
L8507		\$33.42	\$33.42		
L8509		\$87.13	\$87.13		
L8510		\$201.62	\$201.62		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L8511		\$59.00	\$59.00		
L8512		\$1.76	\$1.76		
L8513		\$4.19	\$4.19		
L8514		\$76.00	\$76.00		
L8515		\$51.00	\$51.00		
L8600		\$667.72	\$667.72		
L8603		\$351.17	\$351.17		
L8604		\$0.00	\$0.00		
L8606		\$165.67	\$165.67		
L8609		BR	BR		
L8610		\$0.00	\$0.00		
L8612		\$0.00	\$0.00		
L8613		\$0.00	\$0.00		
L8614		BR	BR		
L8615		\$15,793.62	\$15,793.62		
L8616		BR	BR		
L8617		BR	BR		
L8618		BR	BR		
L8619		BR	BR		
L8621		BR	BR		
L8622		BR	BR		
L8623		BR	BR		
L8624		BR	BR		
L8630		\$0.00	\$0.00		
L8631		\$0.00	\$0.00		
L8641		\$0.00	\$0.00		
L8642		\$0.00	\$0.00		
L8658		\$0.00	\$0.00		
L8659		\$0.00	\$0.00		
L8670		\$0.00	\$0.00		
L8680		\$500.00	\$500.00		
L8681		\$510.00	\$510.00		
L8682		\$5,646.72	\$5,646.72		
L8683		\$4,462.63	\$4,462.63		
L8684		\$682.08	\$682.08		
L8685		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
L8686		BR	BR		
L8687		BR	BR		
L8688		BR	BR		
L8689		BR	BR		
L8690		BR	BR		
L8691		BR	BR		
L8695		BR	BR		
L8699		\$0.00	\$0.00		
L9900		BR	BR		
Q0136		\$13.50	\$13.50		
Q4001		\$39.23	\$39.23		
Q4002		\$148.26	\$148.26		
Q4003		\$28.18	\$28.18		
Q4004		\$97.55	\$97.55		
Q4005		\$10.38	\$10.38		
Q4006		\$23.41	\$23.41		
Q4007		\$0.00	\$0.00		
Q4008		\$0.00	\$0.00		
Q4009		\$6.93	\$6.93		
Q4010		\$15.61	\$15.61		
Q4011		\$0.00	\$0.00		
Q4012		\$0.00	\$0.00		
Q4013		\$12.61	\$12.61		
Q4014		\$21.29	\$21.29		
Q4015		\$0.00	\$0.00		
Q4016		\$0.00	\$0.00		
Q4017		\$7.30	\$7.30		
Q4018		\$11.64	\$11.64		
Q4019		\$0.00	\$0.00		
Q4020		\$0.00	\$0.00		
Q4021		\$5.40	\$5.40		
Q4022		\$9.75	\$9.75		
Q4023		\$0.00	\$0.00		
Q4024		\$0.00	\$0.00		
Q4025		\$30.30	\$30.30		
Q4026		\$94.57	\$94.57		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
Q4027		\$0.00	\$0.00		
Q4028		\$0.00	\$0.00		
Q4029		\$23.16	\$23.16		
Q4030		\$60.96	\$60.96		
Q4031		\$0.00	\$0.00		
Q4032		\$0.00	\$0.00		
Q4033		\$21.60	\$21.60		
Q4034		\$53.74	\$53.74		
Q4035		\$0.00	\$0.00		
Q4036		\$0.00	\$0.00		
Q4037		\$13.18	\$13.18		
Q4038		\$33.02	\$33.02		
Q4039		\$0.00	\$0.00		
Q4040		\$0.00	\$0.00		
Q4041		\$16.02	\$16.02		
Q4042		\$27.36	\$27.36		
Q4043		\$0.00	\$0.00		
Q4044		\$0.00	\$0.00		
Q4045		\$9.30	\$9.30		
Q4046		\$14.96	\$14.96		
Q4047		\$0.00	\$0.00		
Q4048		\$0.00	\$0.00		
Q4049		\$1.69	\$1.69		
Q4050		BR	BR		
Q4051		BR	BR		
Q4081		BR	BR		
Q4100		BR	BR		
Q4101		\$37.67	\$37.67		
Q4102		\$5.22	\$5.22		
Q4103		\$5.22	\$5.22		
Q4104		\$14.24	\$14.24		
Q4105		\$14.24	\$14.24		
Q4106		\$46.14	\$46.14		
Q4107		\$106.76	\$106.76		
Q4108		\$22.62	\$22.62		
Q4109		\$93.31	\$93.31		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
Q4110		\$41.12	\$41.12		
Q4111		\$9.07	\$9.07		
Q4112		\$373.63	\$373.63		
Q4113		\$373.63	\$373.63		
Q4114		\$1,076.53	\$1,076.53		
Q9951		BR	BR		
Q9953		BR	BR		
Q9954		BR	BR		
Q9955		\$0.00	\$0.00		
Q9956		\$0.00	\$0.00		
Q9957		\$0.00	\$0.00		
Q9958		BR	BR		
Q9959		BR	BR		
Q9960		BR	BR		
Q9961		BR	BR		
Q9962		BR	BR		
Q9963		BR	BR		
Q9964		BR	BR		
Q9965		\$5.00	\$5.00		
Q9966		\$5.00	\$5.00		
Q9967		\$5.00	\$5.00		
R0070		BR	BR		
R0075		BR	BR		
R0076		BR	BR		
V2020		\$110.00	\$110.00		
V2025		<del>\$265.00</del>	<del>\$265.00</del>		
V2100		\$54.00	\$54.00		
V2101		\$66.00	\$66.00		
V2102		\$66.00	\$66.00		
V2103		\$48.00	\$48.00		
V2104		\$40.00	\$40.00		
V2105		\$47.00	\$47.00		
V2106		\$41.00	\$41.00		
V2107		\$44.00	\$44.00		
V2108		\$55.00	\$55.00		
V2109		\$51.00	\$51.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
V2110		\$42.00	\$42.00		
V2111		\$55.00	\$55.00		
V2112		\$56.00	\$56.00		
V2113		\$57.00	\$57.00		
V2114		\$73.00	\$73.00		
V2115		\$73.00	\$73.00		
V2118		\$79.00	\$79.00		
V2121		\$69.45	\$69.45		
V2199		BR	BR		
V2200		\$66.00	\$66.00		
V2201		\$66.00	\$66.00		
V2202		\$61.00	\$61.00		
V2203		\$70.00	\$70.00		
V2204		\$79.00	\$79.00		
V2205		\$51.00	\$51.00		
V2206		\$56.00	\$56.00		
V2207		\$83.00	\$83.00		
V2208		\$46.00	\$46.00		
V2209		\$75.00	\$75.00		
V2210		\$58.00	\$58.00		
V2211		\$57.00	\$57.00		
V2212		\$59.00	\$59.00		
V2213		\$63.00	\$63.00		
V2214		\$65.00	\$65.00		
V2215		\$81.00	\$81.00		
V2218		\$89.00	\$89.00		
V2219		\$48.00	\$48.00		
V2220		\$88.00	\$88.00		
V2221		\$70.84	\$70.84		
V2299		BR	BR		
V2300		\$88.00	\$88.00		
V2301		\$99.00	\$99.00		
V2302		\$88.00	\$88.00		
V2303		\$94.00	\$94.00		
V2304		\$98.00	\$98.00		
V2305		\$88.00	\$88.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
V2306		\$98.00	\$98.00		
V2307		\$66.00	\$66.00		
V2308		\$68.00	\$68.00		
V2309		\$69.00	\$69.00		
V2310		\$99.00	\$99.00		
V2311		\$80.00	\$80.00		
V2312		\$74.00	\$74.00		
V2313		\$81.00	\$81.00		
V2314		\$83.00	\$83.00		
V2315		\$92.00	\$92.00		
V2318		\$121.00	\$121.00		
V2319		\$51.00	\$51.00		
V2320		\$57.00	\$57.00		
V2321		\$94.32	\$94.32		
V2399		BR	BR		
V2410		\$85.00	\$85.00		
V2430		\$99.00	\$99.00		
V2499		BR	BR		
V2500		\$77.00	\$77.00		
V2501		\$107.00	\$107.00		
V2502		\$144.00	\$144.00		
V2503		\$131.00	\$131.00		
V2510		\$101.00	\$101.00		
V2511		\$150.00	\$150.00		
V2512		\$173.00	\$173.00		
V2513		\$174.00	\$174.00		
V2520		\$101.00	\$101.00		
V2521		\$200.00	\$200.00		
V2522		\$146.00	\$146.00		
V2523		\$154.00	\$154.00		
V2530		\$243.00	\$243.00		
V2531		\$444.00	\$444.00		
V2599		BR	BR		
V2600		\$28.00	\$28.00		
V2610		\$22.00	\$22.00		
V2615		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
V2623		\$990.00	\$990.00		
V2624		\$52.00	\$52.00		
V2625		\$398.00	\$398.00		
V2626		\$163.00	\$163.00		
V2627		\$1,023.00	\$1,023.00		
V2628		\$251.00	\$251.00		
V2629		\$275.00	\$275.00		
V2630		BR	BR		
V2631		BR	BR		
V2632		BR	BR		
V2700		\$66.00	\$66.00		
V2702		BR	BR		
V2710		\$110.00	\$110.00		
V2715		\$13.00	\$13.00		
V2718		\$29.00	\$29.00		
V2730		\$22.00	\$22.00		
V2744		\$44.00	\$44.00		
V2745		\$8.24	\$8.24		
V2750		\$38.00	\$38.00		
V2755		\$12.44	\$12.44		
V2756		\$0.00	\$0.00		
V2760		\$14.00	\$14.00		
V2761		BR	BR		
V2762		\$48.08	\$48.08		
V2770		\$17.00	\$17.00		
V2780		\$10.00	\$10.00		
V2781		BR	BR		
V2782		\$51.94	\$51.94		
V2783		\$58.55	\$58.55		
V2784		\$38.07	\$38.07		
V2785		\$385.00	\$385.00		
V2786		BR	BR		
V2787		\$0.00	\$0.00		
V2788		BR	BR		
V2790		BR	BR		
V2797		\$0.00	\$0.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
V2799		BR	BR		
V5008		\$35.00	\$35.00		
V5010		\$110.00	\$110.00		
V5011		\$200.00	\$200.00		
V5014		\$300.00	\$300.00		
V5020		\$80.00	\$80.00		
V5030		\$800.00	\$800.00		
V5040		\$800.00	\$800.00		
V5050		\$1,300.00	\$1,300.00		
V5060		\$1,200.00	\$1,200.00		
V5070		\$800.00	\$800.00		
V5080		\$800.00	\$800.00		
V5090		\$900.00	\$900.00		
V5095		BR	BR		
V5100		\$800.00	\$800.00		
V5110		\$500.00	\$500.00		
V5120		\$800.00	\$800.00		
V5130		\$3,000.00	\$3,000.00		
V5140		\$1,450.00	\$1,450.00		
V5150		\$800.00	\$800.00		
V5160		\$600.00	\$600.00		
V5170		\$1,000.00	\$1,000.00		
V5180		\$900.00	\$900.00		
V5190		\$800.00	\$800.00		
V5200		\$600.00	\$600.00		
V5210		\$1,300.00	\$1,300.00		
V5220		\$1,200.00	\$1,200.00		
V5230		\$800.00	\$800.00		
V5240		\$600.00	\$600.00		
V5241		BR	BR		
V5242		BR	BR		
V5243		BR	BR		
V5244		BR	BR		
V5245		BR	BR		
V5246		BR	BR		
V5247		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
V5248		BR	BR		
V5249		BR	BR		
V5250		BR	BR		
V5251		BR	BR		
V5252		BR	BR		
V5253		BR	BR		
V5254		BR	BR		
V5255		BR	BR		
V5256		BR	BR		
V5257		BR	BR		
V5258		BR	BR		
V5259		BR	BR		
V5260		BR	BR		
V5261		BR	BR		
V5262		BR	BR		
V5263		BR	BR		
V5264		BR	BR		
V5265		BR	BR		
V5266		BR	BR		
V5267		BR	BR		
V5268		BR	BR		
V5269		BR	BR		
V5270		BR	BR		
V5271		BR	BR		
V5272		BR	BR		
V5273		BR	BR		
V5274		BR	BR		
V5275		BR	BR		
V5298		BR	BR		
V5299		BR	BR		
V5336		\$1,000.00	\$1,000.00		
V5362		\$66.00	\$66.00		
V5363		\$66.00	\$66.00		
V5364		\$66.00	\$66.00		
W0100		\$46.00	\$46.00		
W0101		\$15.00	\$15.00		

Ohio Bureau of Workers' Compensation  
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HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
W0105		\$94.00	\$94.00		
W0110		\$34.50	\$34.50		
W0120		\$20.50	\$20.50		
W0168		\$90.00	\$90.00		
W0169		\$116.25	\$116.25		
W0170		\$175.00	\$175.00		
W0174		BR	BR		
W0176		negotiated	negotiated		
W0177		\$662.00	\$662.00		
W0178		\$914.00	\$914.00		
W0179		\$494.00	\$494.00		
W0180		\$130.00	\$130.00		
W0181		\$578.00	\$578.00		
W0182		\$221.00	\$221.00		
W0183		BR	BR		
W0184		BR	BR		
W0185		\$347.00	\$347.00		
W0270		\$100.00	\$100.00		
W0271		\$120.00	\$120.00		
W0500		BR	BR		
W0549		BR	BR		
W0610		\$70.00	\$70.00		
W0620		\$300.00	\$300.00		
W0631		\$70.00	\$70.00		
W0635		\$37.50	\$37.50		
W0637		\$45.00	\$45.00		
W0638		\$30.00	\$30.00		
W0641		\$32.50	\$32.50		
W0644		BR	BR		
W0645		BR	BR		
W0647		BR	BR		
W0648		\$200.00	\$200.00		
W0650		\$500.00	\$500.00		
W0660		\$7.00	\$7.00		
W0662		\$300.00	\$300.00		
W0663		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
W0665		\$2,250.00	\$2,250.00		
W0672		\$50.00	\$50.00		
W0674		BR	BR		
W0675		BR	BR		
W0676		\$359.00	\$359.00		
W0677		BR	BR		
W0678		BR	BR		
W0679		BR	BR		
W0691		BR	BR		
W0692		BR	BR		
W0694		BR	BR		
W0695		\$700.00	\$700.00		
W0702		\$128.25	\$128.25		
W0703		\$51.18	\$51.18		
W0710		\$37.50	\$37.50		
W0750		\$60.00	\$60.00		
W0751		\$1,000.00	\$1,000.00		
W1000		\$400.00	\$400.00		
W1001		\$400.00	\$400.00		
W1002		\$200.00	\$200.00		
W1930		\$20.00	\$20.00		
W1931		\$3.50	\$3.50		
W1932		\$3.50	\$3.50		
W1933		\$0.30	\$0.30		
W2703		\$94.00	\$94.00		
W2704		\$0.30	\$0.30		
W2705		\$3.50	\$3.50		
W2706		\$2.00	\$2.00		
W3000		\$7.00	\$7.00		
W3001		\$7.00	\$7.00		
W3002		\$7.00	\$7.00		
W3003		\$7.00	\$7.00		
W3004		\$7.00	\$7.00		
W3005		\$7.00	\$7.00		
W3006		\$7.00	\$7.00		
W3010		\$7.00	\$7.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
W3011		\$7.00	\$7.00		
W3012		\$7.00	\$7.00		
W3013		\$7.00	\$7.00		
W3014		\$7.00	\$7.00		
W3015		\$7.00	\$7.00		
W3016		\$7.00	\$7.00		
W3020		\$7.00	\$7.00		
W3025		\$7.00	\$7.00		
W3030		\$7.00	\$7.00		
W3035		\$7.00	\$7.00		
W3036		\$7.00	\$7.00		
W3040		\$7.00	\$7.00		
W3045		\$3.50	\$3.50		
W3046		\$3.50	\$3.50		
W3047		\$0.30	\$0.30		
W3050		\$3.50	\$3.50		
W3051		\$3.50	\$3.50		
W3052		\$0.30	\$0.30		
W4000		\$1,800.00	\$1,800.00		
W4001		\$2,750.00	\$2,750.00		
W4215		\$0.30	\$0.30		
W5000		\$1,000.00	\$1,000.00		
W5001		\$500.00	\$500.00		
W9006		\$5.90	\$5.90		
W9010		negotiated	negotiated		
W9020		negotiated	negotiated		
W9030		negotiated	negotiated		
W9040		negotiated	negotiated		
W9050		negotiated	negotiated		
W9060		negotiated	negotiated		
W9070		negotiated	negotiated		
Y2010		\$130.00	\$130.00		
Y2222		\$210.00	\$210.00		
Y2224		\$175.00	\$175.00		
Y2226		\$50.00	\$50.00		
Y8888		BR	BR		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
Z0100		<del>\$2.00</del>	<del>\$2.00</del>		
Z0180		\$100.00	\$100.00		
Z0450		<del>\$500.00</del>	<del>\$500.00</del>		
Z0500		\$100.00	\$100.00		
Z0550		\$150.00	\$150.00		
Z0560		\$485.00	\$485.00		
Z0600		BR	BR		
Z0601		BR	BR		
Z0602		BR	BR		
Z0700		<del>\$2,000.00</del>	<del>\$2,000.00</del>		
Z1000		\$100.00	\$100.00		
Z1600		\$450.00	\$450.00		
Z1601		\$50.00	\$50.00		
Z1605		\$112.53	\$112.53		
Z1606		\$375.00	\$375.00		
Z2000		\$1,950.00	\$1,950.00		
Z2050		\$1,500.00	\$1,500.00		
Z2100		\$250.00	\$250.00		
Z2150		\$1,500.00	\$1,500.00		
Z2200		\$348.00	\$348.00		
Z2250		\$5,646.72	\$5,646.72		
Z2300		\$2,000.00	\$2,000.00		
Z2350		\$2,499.00	\$2,499.00		
Z2400		\$3,648.85	\$3,648.85		
Z2450		\$7,373.94	\$7,373.94		
Z2500		\$425.58	\$425.58		
Z2600		\$1,205.00	\$1,205.00		
Z2650		<del>\$1,205.00</del>	<del>\$1,205.00</del>		
Z3000		\$7.00	\$7.00		
Z3001		\$7.00	\$7.00		
Z3002		\$7.00	\$7.00		
Z3003		\$7.00	\$7.00		
Z3004		\$7.00	\$7.00		
Z3005		\$7.00	\$7.00		
Z3006		\$7.00	\$7.00		
Z3010		\$7.00	\$7.00		

Ohio Bureau of Workers' Compensation  
2009 Provider Fee Schedule

HCPCS	MOD	NON-FAC FEE	FACILITY FEE	ASC LEVEL	ASC FEE
Z3011		\$7.00	\$7.00		
Z3012		\$7.00	\$7.00		
Z3013		\$7.00	\$7.00		
Z3014		\$7.00	\$7.00		
Z3015		\$7.00	\$7.00		
Z3016		\$7.00	\$7.00		
Z3020		\$7.00	\$7.00		
Z3025		\$7.00	\$7.00		
Z3035		\$7.00	\$7.00		
Z3036		\$7.00	\$7.00		
Z3040		\$7.00	\$7.00		
Z3045		\$3.50	\$3.50		
Z3046		\$3.50	\$3.50		
Z3047		\$0.30	\$0.30		
Z3050		\$3.50	\$3.50		
Z3051		\$3.50	\$3.50		
Z3052		\$0.30	\$0.30		
Z4000		\$950.00	\$950.00		
Z5601		\$100.00	\$100.00		
Z5602		\$34.95	\$34.95		
Z9600		\$624.00	\$624.00		
Z9601		\$50.00	\$50.00		
Z9605		\$143.00	\$143.00		
Z9606		\$458.00	\$458.00		