



Physician Payment Rates in Alaska and Comparison States

Prepared for:
Alaska Health Care Commission

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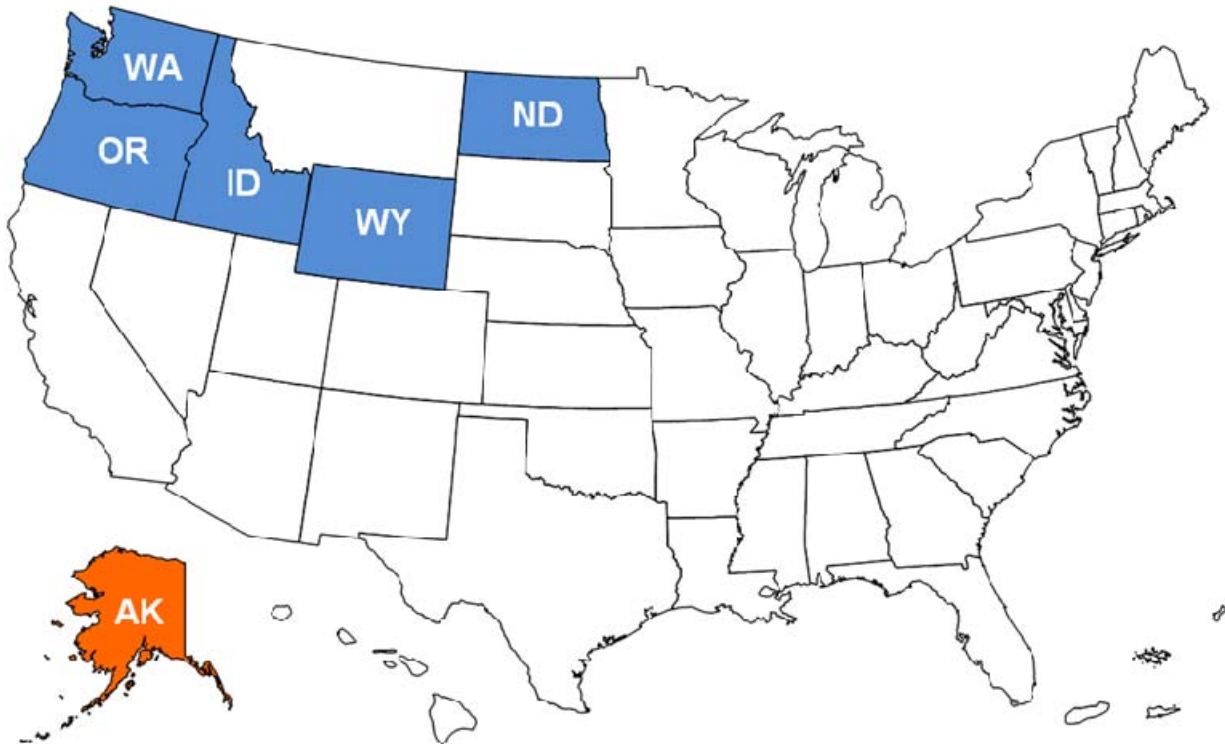
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1. EXECUTIVE SUMMARY

The Alaska Health Care Commission (“AHCC”) engaged Milliman to compare Alaska’s health care payment rates and underlying drivers to those in certain other states. The comparison states are Washington, Oregon, Idaho, Wyoming, and North Dakota.



This report is the first of three reports. This report is focused on how Alaska’s physician payment rates compare to other states. The second report will analyze facility payment rates. The final report will identify the key drivers of the cost differences across states.

Our results show that Alaska’s physician reimbursement is approximately 59% higher than the average of the comparison states. Physician reimbursement in Alaska exceeds each of the comparison states for each type of payer and each provider specialty, though the differential varies. The results here should be interpreted with caution, since they only identify the relative reimbursement among states and do not consider reasons for the differences such as staff wages, cost of living, cost of business operation, or provider availability, which may account for some or all of the relative differences in reimbursement. Analysis of the drivers behind the differences will be presented in the third report in this series.

2. RESULTS

For this report, we define physician reimbursement to be the full amounts that providers may collect for a given service, commonly called “allowed amounts”. These allowed amounts include member-paid amounts such as co-pays, co-insurance, and deductibles, as well as payments from the insurer (or government entity).

We compared relative allowed amounts for physicians in Alaska to those in the comparison states for procedure codes that were either in the top 25 by utilization rate or the top 25 in total cost (reflecting both utilization rates and the cost per service). The comparison was done separately using 2011 fee schedules for each of the following payers: Medicare, Medicaid, TRICARE, VA, and Workers’ Compensation. In addition, we summarized the mean, median, and 80th percentile of 2009 commercial allowed amounts; a single fee schedule does not exist for commercial amounts since each commercial insurer negotiates its own fee schedule with providers and therefore, we have summarized fee levels from a database of health care claims.

Finally, we have included the mean, median, and 80th percentile of provider billed charges. Billed charges are the amounts that providers bill. In many cases, due either to contractual agreements with commercial insurers or government-set fee schedules, allowed amounts are less than billed charges.

We are providing the analysis for the top 25 codes overall across all specialties (including specialties not included in the list below). We have also performed the analysis separately for the top 25 codes for each of the following specialties:

- cardiology
- cardiothoracic surgery
- chiropractic
- DME
- ENT
- Family practice
- gastroenterology
- general surgery
- internal medicine
- interventional cardiology
- lab
- neurology

- ophthalmology
- orthopedics
- pediatrics
- radiology
- urology

For some specialties, such as chiropractic, there were fewer than 25 codes with significant volume and therefore, some of the analyses by specialty include fewer than 25 codes.

Detailed fee information for each state, payer, specialty and procedure code is included in Appendix A to this report.

Relative Reimbursement by Payer across States

Table 2.1 below shows physician relative allowed charges by state and payer. This table is based upon aggregate data across all of the specialties listed above except for DME. The table is calibrated so that the average across the five comparison states for each payer is equal to 100%. As an example, the 127% shown for Alaska Medicare indicates that Medicare reimbursement in Alaska is equal to 127% of the average Medicare reimbursement in the five comparison states. Across all payers, Alaska relative reimbursement is 160% of the comparison states across specialties that were analyzed.

**Table 2.1
Physician Reimbursement Levels by State and Payer**

| | AK | ID | ND | OR ⁽¹⁾ | WA ⁽¹⁾ | WY |
|--------------------------------|------|------|------|-------------------|-------------------|------|
| Medicare ⁽¹⁾ | 127% | 96% | 98% | 100% | 105% | 101% |
| Tricare ⁽¹⁾ | 182% | 97% | 97% | 101% | 104% | 101% |
| VA | 215% | 96% | 98% | 100% | 105% | 101% |
| Medicaid | 174% | 99% | 134% | 87% | 68% | 113% |
| Workers' Compensation | 190% | 108% | 98% | 107% | 86% | N/A |
| Comm Allowed - Mean | 169% | 96% | 96% | 112% | 92% | 105% |
| Comm Allowed - Median | 181% | 94% | 97% | 113% | 88% | 107% |
| Comm Allowed - 80th Percentile | 176% | 98% | 89% | 110% | 92% | 111% |
| Billed - Mean | 142% | 90% | 96% | 113% | 107% | 95% |
| Billed - Median | 147% | 89% | 98% | 114% | 105% | 93% |
| Billed - 80th Percentile | 135% | 93% | 93% | 112% | 104% | 98% |
| All Payers ⁽²⁾ | 160% | 97% | 105% | 102% | 91% | 103% |

All values are relative to the average for the five comparison states (excluding AK) for each payer category

⁽¹⁾ For this summary, the Portland, OR and Seattle, WA Medicare and Tricare fee schedules were used.

⁽²⁾ The All Payers values are weighted by payer, using national health expenditure data from CMS. The weights are: Medicare - 28%, Tricare - 2%, VA - 2.4%, Medicaid - 20.8%, Workers' Compensation - 2.2%, and Commercial - 44.6%.

For Tables 2.1 through 2.3, summary values are not shown if fee schedule amounts were unavailable for more than half of the expected volume of procedures for combinations of state and payer or state and specialty. However, fee schedule amounts for procedure codes in cells marked as “N/A” are still used to determine the relative payment in other states/specialties where available.

Relative Reimbursement by Specialty across States

Table 2.2 below shows physician relative allowed charges by state and specialty, sorted based on the relative charge for Alaska. This is similar to Table 2.1 except that charges have been blended across payers to estimate the average relative reimbursement for each specialty within each state across all analyzed payer types. Alaska relative charges are once again about 50% higher than the comparison states, across all payers.

Table 2.2
Physician Reimbursement Levels by State and Specialty

| | AK | ID | ND | OR ⁽¹⁾ | WA ⁽¹⁾ | WY |
|---------------------------|------|------|------|-------------------|-------------------|------|
| Pediatrics | 143% | 95% | 110% | 109% | 91% | 90% |
| Family Practice | 148% | 96% | 109% | 104% | 93% | 92% |
| Internal Medicine | 150% | 96% | 109% | 104% | 93% | 93% |
| Lab | 151% | 93% | 114% | 88% | 84% | 108% |
| Ophthalmology | 152% | 98% | 98% | 109% | 97% | 94% |
| OBGYN | 157% | 94% | 100% | 102% | 94% | 106% |
| Chiropractic | 166% | 93% | 109% | 103% | 86% | 105% |
| Urology | 167% | 96% | 103% | 105% | 90% | 101% |
| Gastroenterology | 168% | 100% | 99% | 100% | 89% | 106% |
| Radiology | 170% | 102% | 95% | 90% | 84% | 122% |
| Neurology | 173% | 101% | 104% | 102% | 92% | 97% |
| Orthopedics | 177% | 96% | 101% | 101% | 90% | 107% |
| ENT | 179% | 95% | 101% | 106% | 91% | 101% |
| General Surgery | 179% | 94% | 98% | 106% | 90% | 109% |
| Cardiology | 183% | 103% | 96% | 99% | 88% | 114% |
| Cardiothoracic Surgery | N/A | N/A | N/A | 99% | 92% | N/A |
| Interventional Cardiology | N/A | N/A | N/A | N/A | N/A | N/A |
| DME | 121% | 93% | 105% | 95% | 100% | 94% |

All values are relative to the average for the five comparison states (excluding AK) for each payer category

- ⁽¹⁾ For this summary, the Portland, OR and Seattle, WA Medicare and Tricare fee schedules were used.
- ⁽²⁾ The totals by specialty are weighted by payer using national health expenditure data from CMS. The weights are: Medicare - 28%, Tricare - 2%, VA - 2.4%, Medicaid - 20.8%, Workers' Compensation - 2.2%, and Commercial - 44.6%.

Values are only reported in Table 2.2 if both commercial and Medicare results were available. Appendix A presents summaries similar to Table 2.2, but presented separately for each type of payer. Appendix A also contains detailed information for all categories, including those with N/A in Table 2.2. The procedure codes used for interventional cardiology have changed in 2011 and as a result, fee schedule amounts for many payers no longer exist for the most commonly used procedure codes historically.

Relative Reimbursement by Payer within States

Table 2.3 below shows the relative allowed amounts within each state, sorted by the relative payment within Alaska. This table is based upon aggregate data across all the same specialties included in Table 2.1. Instead of reading this table across rows, it should be read down each column. This table shows, for each state, the relative reimbursement for each payer as compared to other payers in that state. For example, Medicare fees are 69% of the overall average fees across all payers in Alaska. By comparison, Medicare fees are 82% of the average statewide reimbursement in Idaho. However, the 69% and 82% values cannot be compared to conclude that Medicare reimbursement in Idaho is higher than in Alaska, since the overall average across all payers varies by state (and, as shown earlier in this report, is higher in Alaska than in Idaho).

Table 2.3
Relative physician reimbursement within each state (2009)

| | AK | ID | ND | OR ⁽¹⁾ | WA ⁽¹⁾ | WY |
|---------------------------|------|------|------|-------------------|-------------------|------|
| Medicare ⁽¹⁾ | 69% | 82% | 80% | 79% | 95% | 82% |
| Medicaid | 83% | 78% | 100% | 63% | 55% | 85% |
| Tricare ⁽¹⁾ | 93% | 79% | 76% | 76% | 91% | 78% |
| VA | 108% | 82% | 80% | 79% | 95% | 82% |
| Comm Allowed - Mean | 123% | 119% | 113% | 127% | 123% | 119% |
| Workers' Compensation | 169% | 169% | 148% | 156% | 146% | N/A |
| All Payers ⁽²⁾ | 100% | 100% | 100% | 100% | 100% | 100% |

All values are relative to the All Payers value for each state

⁽¹⁾ For this summary, the Portland, OR and Seattle, WA Medicare and Tricare fee schedules were used.

⁽²⁾ The All Payers values are weighted by payer, using national health expenditure data from CMS. The weights are: Medicare - 28%, Tricare - 2%, VA - 2.4%, Medicaid - 20.8%, Workers' Compensation - 2.2%, and Commercial - 44.6%.

Changes in Relative Reimbursement over Time

It is important to note that reimbursement rates change over time. While allowed charges typically increase each year due to medical inflation, these changes are not uniform across states, payers or specialties (and often vary across procedure codes) so that relative reimbursement will also change among these categories.

As an example, consider Medicare's geographic reimbursement adjustment for physicians, which is composed of three components: work, practice and malpractice. In very broad terms, the work and practice components have roughly the same weight, with the malpractice component forming a much smaller portion of the total payment. Each of the three components has a base nationwide payment amount for each procedure code which is then adjusted using Geographic Practice Cost Index (GPCI) factors to reach the allowed charge for specific geographic areas. The GPCI factors vary for each of the three components by geographic location, with an average of approximately 1.00 nationwide (prior to the adjustments described below). There are approximately 100 areas nationwide, though many states, including Alaska, have only a single set of GPCI factors for the entire state.

CMS updates the GPCI factors annually, leading to changes in relative reimbursement across geographic areas over time. Changes resulting from CMS's annual updates tend to be fairly small from year to year. Larger changes occur as a result of legislative action that overrides the GPCI factors calculated by CMS. Some recent examples are listed below:

- The Patient Protection and Affordable Care Act (PPACA) of 2010 introduced a minimum value of 1.00 for the practice component of the GPCI in "Frontier States", which include North Dakota and Wyoming. This increased the Medicare reimbursement for those states relative to other states. The practice GPCI was also increased halfway toward 1.00 in all other areas where the value was below 1.00.
- A minimum value of 1.00 was introduced for the work component of the GPCI in 2004. This minimum was introduced as a temporary provision, but has been extended in recent years through legislative action. This provision increases reimbursement in lower cost areas, relative to other areas.
- Beginning in 2009, the work GPCI factor in Alaska was set to a minimum value of 1.50. By comparison, the Alaska work GPCI factor in 2008 was 1.017.

Table 2.4 shows a summary of the GPCI factors in the comparison states before and after the 1.00 work GPCI floor and the practice GPCI changes.

Table 2.4
Comparison of GPCI Factors Before and After PPACA Changes

| Locality | 2010 GPCI Factors | | | 2011 GPCI Factors | | | Change from 2010 to 2011 | | |
|-----------------------|-------------------|------|------|-------------------|------|------|--------------------------|------|-----|
| | Pre PPACA | | | Post PPACA | | | Work | PE | MP |
| | Work | PE | MP | Work | PE | MP | | | |
| GPCI | GPCI | GPCI | GPCI | GPCI | GPCI | GPCI | GPCI | GPCI | |
| Alaska ⁽¹⁾ | 1.50 | 1.09 | 0.65 | 1.50 | 1.09 | 0.65 | 0% | 0% | 0% |
| Idaho | 0.97 | 0.88 | 0.55 | 1.00 | 0.94 | 0.57 | 3% | 7% | 5% |
| North Dakota | 0.95 | 0.84 | 0.39 | 1.00 | 1.00 | 0.45 | 6% | 18% | 17% |
| Portland, OR | 1.00 | 1.02 | 0.47 | 1.00 | 1.02 | 0.54 | 0% | 0% | 15% |
| Rest of Oregon | 0.97 | 0.93 | 0.47 | 1.00 | 0.97 | 0.54 | 3% | 4% | 15% |
| Seattle, WA | 1.01 | 1.09 | 0.71 | 1.02 | 1.10 | 0.79 | 1% | 1% | 11% |
| Rest of Washington | 0.99 | 0.97 | 0.69 | 1.00 | 0.99 | 0.77 | 1% | 2% | 11% |
| Wyoming | 0.96 | 0.84 | 0.89 | 1.00 | 1.00 | 1.05 | 5% | 19% | 18% |

1) Alaska work GPCI reflects the 1.50 floor established in 2009. In 2008, Alaska had a work GPCI of 1.017.

The changes in GPCI factors have significantly altered the relative Medicare reimbursement rates among the states in this analysis. Very roughly, these provisions increased Medicare reimbursement by approximately 20 – 25% in Alaska, and by approximately 10% – 15% in North Dakota and Wyoming, while having no impact on reimbursement in Portland, Oregon. Therefore, if the analysis had been performed three years ago, we would have found that Medicare reimbursement in Alaska was closer to that in the comparison states.

Similar changes in relative reimbursement have also been seen in other payers. Medicaid, in particular, is prone to significant changes in relative reimbursement across states, since each state sets its own reimbursement rates. Table 2.5 shows the relative changes in aggregate Medicaid reimbursement for physicians from 2003 to 2008.¹ Increases in reimbursement have varied considerably across states, with essentially no changes in New York and Minnesota, but increases of roughly 60% in Oklahoma and Pennsylvania. Alaska, with an increase of only 3% over the 5 year period, had one of the lowest increases. Looking forward, with changes to Medicaid eligibility under PPACA and with many states seeking to cut budgetary expenditures, we expect there to be more changes in relative Medicaid reimbursement.

¹ Statehealthfacts.org. 14 June 2011. The Kaiser Family Foundation. August 2011. <http://statehealthfacts.org>.

Table 2.5
 Cumulative % Change in Medicaid Physician Fees
 2003-2008

| | |
|----------------------|------------|
| Minnesota | 0% |
| New York | 0% |
| Wisconsin | 1% |
| California | 2% |
| Alaska | 3% |
| Alabama | 4% |
| Arkansas | 5% |
| Florida | 5% |
| Hawaii | 5% |
| West Virginia | 5% |
| Mississippi | 6% |
| Michigan | 7% |
| Iowa | 7% |
| North Carolina | 8% |
| Arizona | 9% |
| Maine | 9% |
| Indiana | 10% |
| Delaware | 10% |
| New Hampshire | 11% |
| Rhode Island | 11% |
| Illinois | 11% |
| Oregon | 14% |
| United States | 15% |
| Ohio | 16% |
| New Jersey | 18% |
| Nebraska | 18% |
| Washington | 18% |
| Texas | 20% |
| Massachusetts | 21% |
| North Dakota | 22% |
| Utah | 23% |
| Nevada | 23% |
| Idaho | 25% |
| New Mexico | 25% |
| Connecticut | 28% |
| Georgia | 28% |
| Kentucky | 28% |
| South Carolina | 28% |
| Colorado | 29% |
| Virginia | 31% |
| Maryland | 31% |
| South Dakota | 32% |
| Vermont | 33% |
| Montana | 36% |
| District of Columbia | 36% |
| Louisiana | 41% |
| Kansas | 44% |
| Wyoming | 49% |
| Missouri | 58% |
| Oklahoma | 59% |
| Pennsylvania | 63% |
| Tennessee | NA |

Source: <http://statehealthfacts.org>

3. METHODOLOGY AND DETAILED RESULTS

This section describes the methodology used to develop the results in Section 2 and provides more detailed results where appropriate.

General Methodology

The list of the top 25 procedure codes is based upon data from the 2009 Milliman Specialty Database, which estimates the relative frequency of utilization for physician services by specialty and procedure code for a commercially insured population. The actual top 25 codes by volume varies by payer type (for example, Medicare would have significantly fewer maternity and childhood procedures).

However, we wanted to use the same distribution for each payer, and the commercial distribution is a reasonable basis to select the top 25 codes for other payers.

Since the comparison is being performed across multiple states, we used the nationwide aggregate frequency for each code. For each specialty, we created lists of the 25 procedure codes with the most utilization in that specialty and lists of the top 25 procedure codes with the highest expected expenditures in that specialty (using relative value units as a proxy, reflecting a combination of utilization and anticipated cost per service); note that many codes appear on both lists in each specialty and therefore, this leads to fewer than 50 unique procedure codes when the lists are combined. We limit these lists to only include codes that made up 1% or more of the total utilization for that specialty. Therefore, some specialties have fewer than 25 codes listed.

Table 3.1 summarizes the percentage of the total utilization and relative value units captured by the “top 25” codes in each specialty.

Table 3.1
Percentage of Total Utilization and RVUs Captured

| | % of Total Utils | % of Total RVUs |
|---------------------------|---------------------|--------------------|
| Cardiology | 72.3% | 64.1% |
| Cardiothoracic Surgery | 48.5% | 47.3% |
| Chiropractic | 95.6% | 93.7% |
| DME | 52.4% | 56.0% |
| ENT | 80.0% | 69.9% |
| Family Practice | 62.0% | 68.7% |
| Gastroenterology | 80.9% | 87.1% |
| General Surgery | 52.0% | 38.5% |
| Internal Medicine | 60.6% | 61.4% |
| Interventional Cardiology | 95.6% | 93.9% |
| Lab | 48.2% | 51.8% |
| Neurology | 73.3% | 72.6% |
| OBGYN | 63.5% | 65.9% |
| Ophthalmology | 88.8% | 82.1% |
| Orthopedics | 64.7% | 49.4% |
| Pediatrics | 69.3% | 73.9% |
| Radiology | 59.3% | 59.4% |
| Urology | 75.4% | 67.1% |

For each code, we summarized the following:

- The mean, median and 80th percentile of commercial allowed amounts in each state based upon data from the 2009 Thomson Reuters MarketScan™ database. The following is a summary of total allowed dollars for professional services included in the MarketScan™ data by state (in millions).

| | |
|----|--------|
| AK | \$95.1 |
| ID | 103.9 |
| ND | 42.4 |
| OR | 524.8 |
| WA | 727.2 |
| WY | 65.1 |

We have not adjusted these charges to estimate changes in reimbursement levels since 2009. To ensure sufficient credibility in the data, we did not use results for any code with fewer than 10 claims in the database.

Estimated commercial allowed charges by specialty use data from all specialties for each procedure code since the specialty data coding in the database could not support a separate analysis by specialty. For example, CPT 98941 (chiropractic manipulation) is the top code for chiropractors. However, in developing the allowed and billed charge metrics for this

procedure code, we used data for this code from all specialties (though we expect the vast majority of the volume to be from chiropractors). Often, payers do not vary their reimbursement by specialty and therefore, the inclusion of all specialties in the analysis is a reasonable approach.

The MarketScan database contains detailed claims data for commercially insured individuals. The data is submitted by large employer groups and health plans. As a compilation of many payers' data, our results reflect the average payment level for payers in the data, weighted by the volume of data. The payers included vary from market to market.

- Medicare allowed charges. In states where Medicare allowed charges vary by geographic area within the state, we included the Medicare allowed charges for each area.
- TRICARE allowed charges. In states where TRICARE allowed charges vary by geographic area within the state, we included the TRICARE allowed charges for each area. The analysis is based on the published TRICARE fee schedules. TRICARE increases payments in Alaska using Locality Based Waivers for some specialties and geographic areas.
- Medicaid allowed charges. We used publicly available Medicaid fee-for-service fee schedules. Many states have managed Medicaid programs. However, the managed care organizations typically pay providers at roughly similar levels to the FFS levels, although not always. In some cases, payment levels from managed Medicaid organizations may be higher than FFS levels.
- Workers' Compensation allowed charges, based upon publicly available fee schedules, though in the case of Alaska, there is a fee to obtain the fee schedule.
- VA allowed charges paid to external (non-VA) providers. For Alaska, we use the 2010 fee schedule. For all states other than Alaska, these charges are equal to Medicare and use the 2011 Medicare schedule. Note that the majority of VA's health care costs are incurred through salaries paid to staff and therefore, there is no explicit cost for those services. The fee schedule used here is applied to the smaller portion of VA services that are not provided by VA staff or through contracted care.
- The mean, median and 80th percentile of billed charges. Billed charge analyses were conducted using the 2009 Medicare 5% Sample, with no adjustment to reflect increases in billed charge levels since 2009. Like the commercial allowed charge database, we used data across all specialties for each procedure code and did not use results for any code with fewer than 10 claims in the Medicare 5% Sample. Although the billed charges are based on Medicare data, billed charges do not vary by payer and therefore this is also representative of charges billed to other payers including commercial and Medicaid.

The Wyoming Workers' Compensation fee schedule consists of conversion factors that are intended to be used with Ingenix Physician RVP RVUs. These RVUs, which are different than the Medicare RBRVS RVUs, are not publicly available and are calibrated to different conversion factors by service category. Since these values are not publicly available, we are unable to calculate fees for Wyoming Workers' Compensation.

Reimbursement for some procedure codes is impacted by modifiers. For each code, we used the most common associated modifier from the Medicare 5% Sample and MarketScan data. For the majority of codes this led to a blank, or global, modifier, which did not impact the fee schedule amount. However, for radiology services, the most common modifier was frequently the "26" modifier, indicating that only the professional component of the service was performed by the billing physician. Similarly, reimbursement for many DME codes is affected by a modifier indicating whether the equipment is new, used or rental. When comparing against reimbursement from the fee schedules, we have used the same modifier across all states and payers.

Many physician fee schedules vary fees according to the place of service, typically paying lower fees for services that occur in hospitals (referred to as "facility fees") and higher fees for services that occur in the doctor's own office ("non-facility fees"). The following fee schedules do not vary physician fees based on the place of service:

- Alaska Workers' Compensation
- All Medicaid schedules except for Washington
- Alaska VA

The fees reported in this analysis are based upon non-facility fees for all other schedules. As a result, reimbursement from the above schedules may be slightly understated since they effectively represent a blend of the lower facility fees with the non-facility fees.

Many fee schedules include at least some codes that are paid as a percentage of billed charges, paid at "reasonable charges", not covered by the payer, or bundled services (meaning that payment is included with payment for other services, such as surgical supplies). We have excluded any combinations of payer and procedure codes that fall under these categories from this analysis since they do not have an explicit fee schedule amount. There are relatively few such codes and therefore, their inclusion would not materially impact the results.

Development of Summary Results

In order to create a meaningful comparison among the states, results are shown as a percentage of the average across the comparison states; the average across states is calculated as an arithmetic mean, weighting each state equally. If information is not available for a specific combination of payer and state, the average is calculated using only the remaining payers or states. A simplified example for one specialty and payer is shown below.

Table 3.2
Relativity Calculation Example

| | <u>AK</u> | <u>ID</u> | <u>ND</u> | <u>OR</u> | <u>WA</u> | <u>WY</u> | <u>ID - WY</u> <u>Average</u> |
|---------------------|-----------|-----------|-----------|-----------|-----------|-----------|----------------------------------|
| Medicare Fee | \$110 | \$90 | \$90 | \$95 | \$90 | \$95 | \$92 |
| Relative Percentage | 120% | 98% | 98% | 103% | 98% | 103% | |

Using the methodology in Table 3.2, we develop a relative payment for each combination of HCPCS code, state and payer. Subtotals by state and payer are then developed by taking a weighted average of the ratios, where the relative weight for each code is based upon the relative utilization rate and relative value units from the Milliman Specialty database.

The All Payers total is based on a weighted average of the relative ratios for each payer in each state. Weighted averages across payers are based on the relative expenditures in the CMS 2009 National Health Expenditures.²

A similar process is used to develop relative payment levels across states for each specialty.

We have included the detailed summaries by specialty, state, and payer in Appendix A.

² For information about the CMS National Health Expenditures, see http://www.cms.gov/NationalHealthExpendData/25_NHE_Fact_Sheet.asp

4. LIMITATIONS AND CONSIDERATIONS

Any opinions expressed in this report are solely those of the authors.

Any reader of this report must possess a certain level of expertise in areas relevant to this analysis to appreciate the significance of the approaches and assumptions and the impact of these approaches and assumptions on the results. The reader should be advised by their own actuaries or other qualified professionals competent in the subject matter of this report, so as to properly interpret the material.

This report is not intended to benefit third parties. Regarding the contents of this report, Milliman makes no representations or warranties to third parties. Third parties are to place no reliance upon this report that would result in the creation of any duty or liability for Milliman or its employees to third parties, under any theory of law. Third parties receiving this report must rely on their own experts to draw conclusions about the report's contents.

As documented in the report, this analysis has relied extensively on historical data. The data were reviewed for reasonableness, but no independent audits were performed. Should errors or omissions be discovered in the source data, the results of our analysis would need to be modified. Future results will differ from the historic estimates in this report.

Guidelines issued by the American Academy of Actuaries require actuaries to include their professional qualifications in all actuarial communications. We are members of the American Academy of Actuaries and meet the qualification standards for performing the analyses in this report.

APPENDIX A
DETAILED FEE DATA BY STATE, PAYER, SPECIALTY AND PROCEDURE CODE

Appendix A-1
Summary of Relative Reimbursement
By State, Specialty, and Payer

| | Medicare | | | | | | Tricare | | | | | | VA | | | | | |
|---------------------------|----------|------|------|-------------------|-------------------|------|---------|------|------|-------------------|-------------------|------|------|------|------|------|------|------|
| | AK | ID | ND | OR ⁽¹⁾ | WA ⁽¹⁾ | WY | AK | ID | ND | OR ⁽¹⁾ | WA ⁽¹⁾ | WY | AK | ID | ND | OR | WA | WY |
| Pediatrics | 124% | 96% | 99% | 100% | 105% | 100% | 183% | 98% | 97% | 101% | 106% | 98% | 140% | 96% | 99% | 100% | 105% | 100% |
| Family Practice | 127% | 96% | 98% | 100% | 105% | 100% | 184% | 98% | 97% | 101% | 105% | 98% | 155% | 96% | 98% | 100% | 105% | 100% |
| Internal Medicine | 127% | 96% | 98% | 100% | 105% | 100% | 185% | 98% | 97% | 101% | 105% | 98% | 170% | 96% | 98% | 100% | 105% | 100% |
| Lab | 107% | 98% | 101% | 103% | 101% | 97% | 141% | 102% | 100% | 101% | 95% | 102% | 316% | 98% | 101% | 103% | 101% | 97% |
| Ophthalmology | 125% | 96% | 98% | 100% | 106% | 100% | 182% | 98% | 96% | 102% | 106% | 98% | 118% | 96% | 98% | 100% | 106% | 100% |
| OBGYN | 128% | 96% | 97% | 99% | 105% | 103% | 168% | 89% | 99% | 96% | 98% | 117% | 224% | 96% | 97% | 99% | 105% | 103% |
| Chiropractic | 131% | 97% | 99% | 100% | 105% | 100% | 189% | 98% | 97% | 101% | 105% | 98% | 210% | 97% | 99% | 100% | 105% | 100% |
| Urology | 123% | 96% | 98% | 100% | 106% | 100% | 181% | 98% | 96% | 102% | 106% | 98% | 250% | 96% | 98% | 100% | 106% | 100% |
| Gastroenterology | 120% | 96% | 98% | 100% | 106% | 101% | 180% | 98% | 96% | 102% | 107% | 98% | 242% | 96% | 98% | 100% | 106% | 101% |
| Radiology | 136% | 97% | 98% | 99% | 104% | 101% | 195% | 99% | 98% | 100% | 104% | 99% | 332% | 97% | 98% | 99% | 104% | 101% |
| Neurology | 127% | 97% | 99% | 100% | 104% | 100% | 188% | 98% | 97% | 101% | 105% | 98% | 250% | 97% | 99% | 100% | 104% | 100% |
| Orthopedics | 127% | 96% | 98% | 99% | 105% | 101% | 185% | 98% | 96% | 101% | 106% | 99% | 224% | 96% | 98% | 99% | 105% | 101% |
| ENT | 124% | 95% | 98% | 100% | 106% | 101% | 181% | 98% | 96% | 101% | 107% | 98% | 237% | 95% | 98% | 100% | 106% | 101% |
| General Surgery | 129% | 96% | 97% | 99% | 105% | 103% | 188% | 98% | 96% | 101% | 105% | 99% | 225% | 96% | 97% | 99% | 105% | 103% |
| Cardiology | 131% | 97% | 98% | 100% | 105% | 101% | 188% | 98% | 97% | 101% | 105% | 99% | 451% | 97% | 98% | 100% | 105% | 101% |
| Cardiothoracic Surgery | 131% | 96% | 96% | 98% | 105% | 104% | 190% | 98% | 96% | 100% | 105% | 101% | 246% | 96% | 96% | 98% | 105% | 104% |
| Interventional Cardiology | N/A | N/A | N/A | N/A | N/A | N/A | 189% | 98% | 96% | 100% | 105% | 100% | N/A | N/A | N/A | N/A | N/A | N/A |
| DME | 99% | 100% | 99% | 101% | 101% | 99% | 99% | 100% | 99% | 101% | 101% | 99% | 280% | 100% | 99% | 101% | 101% | 99% |

All values are relative to the average for the five comparison states (excluding AK) for each payer category
⁽¹⁾ For this summary, the Portland, OR and Seattle, WA Medicare and Tricare fee schedules were used.

**Appendix A-1
Summary of Relative Reimbursement
By State, Specialty, and Payer**

| | Medicaid | | | | | | Workers' Compensation | | | | | | Commercial (Mean Allowed Charge) | | | | | |
|---------------------------|----------|------|------|------|------|------|-----------------------|------|------|------|------|-----|----------------------------------|------|------|------|------|------|
| | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Pediatrics | 173% | 102% | 140% | 83% | 69% | 105% | 122% | 102% | 99% | 108% | 91% | N/A | 139% | 91% | 105% | 128% | 90% | 86% |
| Family Practice | 177% | 96% | 148% | 83% | 64% | 108% | 123% | 104% | 99% | 109% | 88% | N/A | 147% | 96% | 100% | 118% | 98% | 88% |
| Internal Medicine | 177% | 96% | 146% | 83% | 64% | 108% | 136% | 104% | 99% | 109% | 88% | N/A | 149% | 96% | 100% | 117% | 98% | 90% |
| Lab | 121% | 115% | 118% | 85% | 86% | 97% | 297% | N/A | 129% | N/A | 77% | N/A | 176% | 89% | 120% | 88% | 72% | 131% |
| Ophthalmology | 200% | 107% | 102% | 96% | 76% | 120% | 132% | 107% | 99% | 105% | 89% | N/A | 149% | 95% | 95% | 122% | 100% | 87% |
| OBGYN | 151% | 89% | 127% | 84% | 78% | 122% | 167% | 115% | 89% | 112% | 82% | N/A | 173% | 94% | 90% | 112% | 94% | 111% |
| Chiropractic | 194% | 105% | 135% | 88% | 70% | N/A | 162% | 83% | 108% | 111% | N/A | N/A | 172% | 85% | 105% | 113% | 89% | 108% |
| Urology | 173% | 93% | 127% | 103% | 64% | 113% | 215% | 111% | 92% | 110% | 84% | N/A | 183% | 97% | 95% | 109% | 92% | 108% |
| Gastroenterology | 172% | 96% | 133% | 84% | 68% | 113% | 173% | 112% | 91% | 113% | 84% | N/A | 191% | 104% | 84% | 108% | 87% | 117% |
| Radiology | 175% | 98% | 136% | 79% | 62% | 139% | 325% | 127% | 93% | 95% | 84% | N/A | 172% | 107% | 83% | 88% | 80% | 143% |
| Neurology | 191% | 117% | 122% | 82% | 65% | 117% | 221% | 106% | 99% | 106% | 89% | N/A | 186% | 97% | 100% | 113% | 95% | 96% |
| Orthopedics | 179% | 95% | 133% | 99% | 65% | 109% | 213% | 122% | 88% | 105% | 83% | N/A | 202% | 96% | 89% | 104% | 91% | 121% |
| ENT | 166% | 87% | 127% | 116% | 62% | 108% | 284% | 110% | 94% | 110% | 85% | N/A | 210% | 98% | 91% | 106% | 94% | 109% |
| General Surgery | 176% | 85% | 121% | 122% | 66% | 108% | 228% | 111% | 91% | 110% | 84% | N/A | 206% | 95% | 88% | 104% | 90% | 125% |
| Cardiology | N/A | 125% | 126% | 78% | 65% | N/A | 437% | 106% | 100% | 105% | 90% | N/A | 201% | 98% | 80% | 108% | 87% | 124% |
| Cardiothoracic Surgery | 183% | 96% | 144% | 84% | 66% | 111% | 336% | 115% | 91% | 113% | 80% | N/A | N/A | N/A | N/A | 106% | 94% | N/A |
| Interventional Cardiology | N/A | 91% | 119% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 474% | 86% | 104% | 97% | 84% | 131% |
| DME | 155% | 93% | N/A | 102% | 103% | 100% | 198% | N/A | 96% | N/A | 105% | N/A | 123% | 97% | 109% | 97% | 98% | 98% |

All values are relative to the average for the five comparison states (excluding AK) for each payer category
⁽¹⁾ For this summary, the Portland, OR and Seattle, WA Medicare and Tricare fee schedules were used.

Appendix A-2
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
All Specialties

Including Specialties Not Listed in Appendices A-3 - A-20

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|---------|----|----|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 10.78% | 9.83% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | | | | |
| Office/outpatient visit, est | 99214 | | 4.63% | 6.34% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | |
| Psytch, off, 45-50 min | 90806 | | 1.62% | 2.16% | 123.36 | 86.96 | 87.82 | 88.57 | 87.39 | 91.97 | 88.43 | 89.32 | 184.30 | 92.40 | 91.68 | 93.90 | 92.71 | 96.65 | 93.63 | 92.63 | | | | |
| Office/outpatient visit, new | 99203 | | 1.27% | 1.77% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | |
| Therapeutic exercises | 97110 | | 2.33% | 1.63% | 38.37 | 28.62 | 29.37 | 29.67 | 28.96 | 31.16 | 29.36 | 29.58 | 53.75 | 28.26 | 27.95 | 29.15 | 28.50 | 30.29 | 28.87 | 28.13 | | | | |
| Obstetrical care | 59400 | | 0.06% | 1.42% | 2,354.90 | 1,749.07 | 1,754.18 | 1,791.77 | 1,757.34 | 1,928.14 | 1,834.33 | 1,916.79 | 3,181.81 | 1,661.32 | 2,203.84 | 1,955.94 | 1,955.94 | 1,983.25 | 1,983.25 | 2,984.72 | | | | |
| Office consultation | 99244 | | 0.44% | 1.21% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | |
| Office/outpatient visit, est | 99215 | | 0.60% | 1.10% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | | | |
| Office/outpatient visit, est | 99212 | | 1.87% | 1.06% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | |
| Office/outpatient visit, new | 99204 | | 0.49% | 1.03% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | |
| Chiropractic manipulation | 98941 | | 1.99% | 1.01% | 46.20 | 33.52 | 34.08 | 34.43 | 33.79 | 36.02 | 34.29 | 34.68 | 65.97 | 33.75 | 33.43 | 34.51 | 33.93 | 35.70 | 34.34 | 33.78 | | | | |
| Eye exam & treatment | 92014 | | 0.64% | 0.99% | 144.69 | 110.75 | 114.00 | 115.48 | 112.25 | 122.39 | 114.50 | 116.04 | 197.82 | 106.57 | 105.04 | 110.57 | 107.61 | 115.73 | 109.53 | 106.28 | | | | |
| Manual therapy | 97140 | | 1.81% | 0.96% | 36.23 | 26.98 | 27.67 | 27.96 | 27.29 | 29.35 | 27.67 | 27.88 | 50.51 | 26.48 | 26.20 | 27.29 | 26.70 | 28.34 | 27.04 | 26.38 | | | | |
| Tissue exam by pathologist | 88305 | 26 | 0.71% | 0.76% | 49.95 | 35.61 | 36.17 | 36.44 | 35.86 | 37.82 | 36.18 | 36.37 | 72.48 | 36.54 | 36.29 | 37.24 | 36.71 | 38.30 | 37.02 | 36.47 | | | | |
| Office/outpatient visit, new | 99202 | | 0.67% | 0.63% | 89.38 | 67.88 | 69.71 | 70.61 | 68.74 | 74.76 | 70.13 | 71.13 | 123.19 | 65.86 | 64.92 | 68.16 | 66.44 | 71.28 | 67.62 | 65.81 | | | | |
| Immunization admin | 90471 | | 1.27% | 0.40% | 27.44 | 21.99 | 22.92 | 23.24 | 22.40 | 24.81 | 22.87 | 23.12 | 36.58 | 20.72 | 20.35 | 21.80 | 21.02 | 23.02 | 21.47 | 20.52 | | | | |
| Chiropractic manipulation | 98940 | | 0.99% | 0.36% | 33.24 | 24.28 | 24.79 | 25.02 | 24.51 | 26.15 | 24.81 | 24.99 | 47.15 | 24.28 | 24.06 | 24.90 | 24.44 | 25.76 | 24.72 | 24.23 | | | | |
| Lipid panel | 80061 | | 0.97% | 0.27% | 18.85 | 15.96 | 17.17 | 18.85 | 18.85 | 18.85 | 18.85 | 15.67 | 23.08 | 17.59 | 17.23 | 17.44 | 17.44 | 16.01 | 16.13 | 17.61 | | | | |
| Electric stimulation therapy | 97014 | | 1.30% | 0.27% | 16.07 | 12.08 | 12.39 | 12.53 | 12.22 | 13.22 | 12.44 | 12.59 | 24.96 | 13.44 | 13.24 | 13.93 | 13.56 | 14.59 | 13.81 | 13.42 | | | | |
| Percut allergy skin tests | 95004 | | 2.59% | 0.22% | 7.04 | 5.98 | 6.27 | 6.39 | 6.12 | 6.96 | 6.33 | 6.47 | 8.99 | 5.43 | 5.27 | 5.78 | 5.52 | 6.24 | 5.72 | 5.45 | | | | |
| Assay thyroid stim hormone | 84443 | | 0.61% | 0.22% | 23.64 | 22.14 | 23.64 | 23.64 | 23.64 | 23.56 | 23.56 | 23.09 | 28.94 | 22.05 | 21.60 | 21.86 | 21.86 | 20.08 | 20.22 | 22.08 | | | | |
| Chest x-ray | 71020 | 26 | 0.68% | 0.21% | 14.77 | 10.55 | 10.69 | 10.79 | 10.62 | 11.25 | 10.77 | 10.89 | 21.87 | 11.09 | 10.97 | 11.30 | 11.13 | 11.69 | 11.28 | 11.16 | | | | |
| Comprehen metabolic panel | 80053 | | 0.80% | 0.18% | 14.87 | 14.87 | 14.87 | 14.87 | 14.87 | 12.01 | 12.01 | 14.87 | 18.20 | 13.87 | 13.59 | 13.76 | 13.76 | 12.63 | 12.72 | 13.89 | | | | |
| Complete cbc w/auto diff wbc | 85025 | | 1.08% | 0.17% | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 13.40 | 10.21 | 10.00 | 10.12 | 10.12 | 9.30 | 9.36 | 10.22 | | | | |
| Mechanical traction therapy | 97012 | | 0.80% | 0.17% | 20.01 | 14.78 | 15.10 | 15.26 | 14.93 | 16.02 | 15.15 | 15.31 | 28.14 | 14.63 | 14.46 | 15.03 | 14.73 | 15.61 | 14.94 | 14.64 | | | | |
| Immunotherapy injections | 95117 | | 0.70% | 0.17% | 13.58 | 11.73 | 12.39 | 12.61 | 12.02 | 13.70 | 12.38 | 12.59 | 18.34 | 11.32 | 11.02 | 12.15 | 11.55 | 13.06 | 11.92 | 11.20 | | | | |
| Ultrasound therapy | 97035 | | 0.74% | 0.13% | 15.75 | 11.49 | 11.71 | 11.83 | 11.59 | 12.39 | 11.77 | 11.91 | 22.79 | 11.77 | 11.63 | 12.05 | 11.83 | 12.51 | 12.01 | 11.81 | | | | |
| Routine venipuncture | 36415 | | 2.15% | 0.10% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-2
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
All Specialties

Including Specialties Not Listed in Appendices A-3 - A-20

| Description | HCPCS | Modifier | | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|----------|----------|----------|----------|----------|----------|-------------------------|----------|----------|----------|---------|----------|----------|--------------------------------------|---------------|-------------|-----|--|--|--|
| | | | % of | % of | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 10.78% | 9.83% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A | | | |
| Office/outpatient visit, est | 99214 | | 4.63% | 6.34% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | | |
| Psytch, off, 45-50 min | 90806 | | 1.62% | 2.16% | 118.09 | 86.96 | 87.82 | 88.57 | 91.97 | 89.32 | 156.06 | 60.60 | 132.84 | N/A | 53.80 | 91.39 | 201.91 | 166.97 | 154.85 | 159.54 | 138.35 | N/A | | | |
| Office/outpatient visit, new | 99203 | | 1.27% | 1.77% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | | | |
| Therapeutic exercises | 97110 | | 2.33% | 1.63% | 73.67 | 28.62 | 29.37 | 29.67 | 31.16 | 29.58 | 47.79 | 26.50 | 14.44 | 21.98 | 17.56 | 29.71 | 97.31 | 39.59 | 53.89 | 53.81 | 48.70 | N/A | | | |
| Obstetrical care | 59400 | | 0.06% | 1.42% | 4,231.13 | 1,749.07 | 1,754.18 | 1,791.77 | 1,928.14 | 1,916.79 | 2,821.81 | 1,539.21 | 2,339.40 | 2,018.09 | 2,034.50 | N/A | 5,274.96 | 4,515.39 | 3,468.64 | 4,590.19 | 3,028.76 | N/A | | | |
| Office consultation | 99244 | | 0.44% | 1.21% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | | | |
| Office/outpatient visit, est | 99215 | | 0.60% | 1.10% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | | | |
| Office/outpatient visit, est | 99212 | | 1.87% | 1.06% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | | |
| Office/outpatient visit, new | 99204 | | 0.49% | 1.03% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | | | |
| Chiropractic manipulation | 98941 | | 1.99% | 1.01% | 59.87 | 33.52 | 34.08 | 34.43 | 36.02 | 34.68 | N/A | 32.53 | 48.16 | 26.71 | 21.12 | N/A | 84.00 | 47.31 | 64.42 | 66.74 | Not Covered | N/A | | | |
| Eye exam & treatment | 92014 | | 0.64% | 0.99% | 101.04 | 110.75 | 114.00 | 115.48 | 122.39 | 116.04 | 176.19 | 97.40 | 59.48 | 83.74 | 66.47 | 107.56 | 188.56 | 223.27 | 211.22 | 217.38 | 189.82 | N/A | | | |
| Manual therapy | 97140 | | 1.81% | 0.96% | 69.72 | 26.98 | 27.67 | 27.96 | 29.35 | 27.88 | 44.91 | 24.62 | N/A | 20.59 | 16.45 | 27.46 | 74.53 | 37.32 | 50.79 | 50.14 | 45.93 | N/A | | | |
| Tissue exam by pathologist | 88305 | 26 | 0.71% | 0.76% | 111.69 | 35.61 | 36.17 | 36.44 | 37.82 | 36.37 | 64.94 | 65.46 | 53.27 | 28.10 | 22.23 | N/A | 259.83 | TBD | N/A | 58.26 | 59.77 | N/A | | | |
| Office/outpatient visit, new | 99202 | | 0.67% | 0.63% | 121.20 | 67.88 | 69.71 | 70.61 | 74.76 | 71.13 | 109.84 | 59.02 | 93.90 | 51.75 | 39.31 | 69.70 | 171.90 | 136.85 | 129.45 | 142.89 | 116.21 | N/A | | | |
| Immunization admin | 90471 | | 1.27% | 0.40% | 10.39 | 21.99 | 22.92 | 23.24 | 24.81 | 23.12 | 32.51 | 19.07 | 13.90 | 16.41 | 13.12 | 10.00 | 35.87 | 30.42 | 42.12 | 43.22 | 38.18 | N/A | | | |
| Chiropractic manipulation | 98940 | | 0.99% | 0.36% | 48.29 | 24.28 | 24.79 | 25.02 | 26.15 | 24.99 | N/A | 23.45 | 34.62 | 19.20 | 15.34 | N/A | 65.33 | 34.27 | 46.46 | 47.67 | Not Covered | N/A | | | |
| Lipid panel | 80061 | | 0.97% | 0.27% | 43.45 | 15.96 | 17.17 | 18.85 | 18.85 | 15.67 | 19.19 | 15.85 | 17.48 | 14.20 | 14.58 | 14.00 | 121.13 | TBD | 42.93 | 80% of billed | 26.39 | N/A | | | |
| Electric stimulation therapy | 97014 | | 1.30% | 0.27% | 40.73 | 12.08 | 12.39 | 12.53 | 13.22 | 12.59 | 22.20 | N/A | N/A | 10.57 | 8.45 | N/A | 54.64 | 19.37 | 26.63 | 26.29 | 23.80 | N/A | | | |
| Percut allergy skin tests | 95004 | | 2.59% | 0.22% | 11.30 | 5.98 | 6.27 | 6.39 | 6.96 | 6.47 | 7.99 | 5.06 | 7.47 | 4.45 | 3.56 | 6.39 | 10.96 | 12.06 | 11.77 | 12.08 | 10.51 | N/A | | | |
| Assay thyroid stim hormone | 84443 | | 0.61% | 0.22% | 57.55 | 22.14 | 23.64 | 23.64 | 23.56 | 23.09 | 24.06 | 21.98 | 24.06 | 17.80 | 18.22 | 20.64 | 122.82 | TBD | 59.10 | 80% of billed | 32.98 | N/A | | | |
| Chest x-ray | 71020 | 26 | 0.68% | 0.21% | 31.08 | 10.55 | 10.69 | 10.79 | 11.25 | 10.89 | 19.45 | 10.85 | 14.71 | 8.62 | 6.89 | 7.88 | 71.76 | 27.24 | 19.82 | 20.18 | 17.71 | N/A | | | |
| Comprehen metabolic panel | 80053 | | 0.80% | 0.18% | 49.40 | 14.87 | 14.87 | 14.87 | 12.01 | 14.87 | 15.14 | 14.77 | 15.14 | 11.20 | 9.29 | 13.29 | 91.24 | TBD | 37.17 | 80% of billed | 16.81 | N/A | | | |
| Complete cbc w/auto diff wbc | 85025 | | 1.08% | 0.17% | 40.35 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 11.14 | 10.86 | 11.14 | 8.24 | 8.47 | 9.85 | 56.86 | TBD | 27.35 | 80% of billed | 15.32 | N/A | | | |
| Mechanical traction therapy | 97012 | | 0.80% | 0.17% | 48.41 | 14.78 | 15.10 | 15.26 | 16.02 | 15.31 | 25.01 | 13.67 | N/A | 11.41 | 9.11 | 15.04 | 55.51 | 20.44 | 27.87 | 27.52 | 24.90 | N/A | | | |
| Immunotherapy injections | 95117 | | 0.70% | 0.17% | 25.33 | 11.73 | 12.39 | 12.61 | 13.70 | 12.59 | 16.31 | 11.07 | 16.01 | 9.18 | 7.34 | 11.28 | 47.34 | 23.65 | 22.92 | 23.52 | 21.03 | N/A | | | |
| Ultrasound therapy | 97035 | | 0.74% | 0.13% | 31.84 | 11.49 | 11.71 | 11.83 | 12.39 | 11.91 | 20.26 | 10.96 | 12.03 | N/A | 7.34 | 12.04 | 58.27 | 15.90 | 21.68 | 21.40 | 19.37 | N/A | | | |
| Routine venipuncture | 36415 | | 2.15% | 0.10% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | | | |

(1) Medicare fees are from CY2011 schedule.

(2) TRICARE fees are from the current schedules effective 8/1/2010.

(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).

(4) Medicaid and workers' compensation fees are current as of 8/3/2011.

(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-2
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
All Specialties

Including Specialties Not Listed in Appendices A-3 - A-20

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 10.78% | 9.83% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office/outpatient visit, est | 99214 | | 4.63% | 6.34% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Psytch, off, 45-50 min | 90806 | | 1.62% | 2.16% | 122.82 | 81.55 | 119.45 | 100.13 | 95.83 | 95.53 | 125.00 | 76.50 | 104.87 | 94.00 | 96.09 | 95.00 | 148.00 | 95.00 | 139.83 | 125.00 | 115.31 | 120.00 |
| Office/outpatient visit, new | 99203 | | 1.27% | 1.77% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Therapeutic exercises | 97110 | | 2.33% | 1.63% | 115.96 | 54.40 | 66.31 | 75.29 | 54.26 | 81.03 | 90.00 | 50.58 | 44.16 | 70.00 | 56.22 | 80.00 | 163.80 | 82.17 | 88.32 | 112.18 | 76.22 | 120.00 |
| Obstetrical care | 59400 | | 0.06% | 1.42% | 4,704.80 | 2,457.25 | 2,500.69 | 3,183.41 | 2,601.20 | 3,061.87 | 5,000.00 | 2,454.92 | 2,661.24 | 3,203.00 | 2,474.56 | 3,352.00 | 5,000.00 | 2,600.00 | 2,661.24 | 3,612.13 | 2,867.61 | 3,390.00 |
| Office consultation | 99244 | | 0.44% | 1.21% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office/outpatient visit, est | 99215 | | 0.60% | 1.10% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Office/outpatient visit, est | 99212 | | 1.87% | 1.06% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Office/outpatient visit, new | 99204 | | 0.49% | 1.03% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Chiropractic manipulation | 98941 | | 1.99% | 1.01% | 66.49 | 37.90 | 48.24 | 50.45 | 38.89 | 45.93 | 70.00 | 38.00 | 52.00 | 47.94 | 38.00 | 45.00 | 75.00 | 39.68 | 53.21 | 60.00 | 44.68 | 55.00 |
| Eye exam & treatment | 92014 | | 0.64% | 0.99% | 162.63 | 108.90 | 121.59 | 155.09 | 120.55 | 100.09 | 169.00 | 110.00 | 120.57 | 160.53 | 113.00 | 99.00 | 198.00 | 134.65 | 161.90 | 186.02 | 148.00 | 118.54 |
| Manual therapy | 97140 | | 1.81% | 0.96% | 119.79 | 39.28 | 49.43 | 57.57 | 43.86 | 60.99 | 112.10 | 28.47 | 40.76 | 44.08 | 28.44 | 50.00 | 180.00 | 56.94 | 61.35 | 79.16 | 56.80 | 90.00 |
| Tissue exam by pathologist | 88305 | 26 | 0.71% | 0.76% | 226.49 | 72.40 | 65.94 | 77.08 | 64.43 | 127.60 | 250.00 | 61.60 | 58.31 | 68.38 | 57.17 | 113.00 | 260.00 | 78.75 | 64.13 | 74.52 | 73.76 | 194.00 |
| Office/outpatient visit, new | 99202 | | 0.67% | 0.63% | 149.21 | 91.12 | 86.37 | 110.70 | 93.63 | 87.29 | 155.00 | 93.40 | 99.63 | 114.79 | 90.39 | 88.00 | 172.00 | 103.33 | 99.63 | 123.60 | 108.17 | 97.00 |
| Immunization admin | 90471 | | 1.27% | 0.40% | 26.62 | 21.70 | 23.10 | 31.49 | 23.59 | 17.23 | 26.00 | 19.00 | 24.63 | 35.00 | 25.00 | 14.31 | 32.00 | 30.14 | 24.63 | 41.62 | 30.45 | 22.90 |
| Chiropractic manipulation | 98940 | | 0.99% | 0.36% | 53.90 | 30.39 | 37.49 | 39.00 | 31.33 | 39.10 | 55.00 | 28.27 | 38.49 | 34.68 | 29.50 | 40.00 | 60.00 | 35.00 | 38.49 | 49.50 | 34.68 | 45.00 |
| Lipid panel | 80061 | | 0.97% | 0.27% | 58.57 | 29.49 | 37.31 | 26.38 | 20.73 | 40.22 | 59.90 | 27.00 | 34.93 | 26.96 | 19.57 | 36.00 | 97.00 | 40.15 | 34.93 | 29.40 | 22.47 | 63.00 |
| Electric stimulation therapy | 97014 | | 1.30% | 0.27% | 43.78 | 14.91 | 17.73 | 19.75 | 15.85 | 23.47 | 47.00 | 14.53 | 20.00 | 18.87 | 14.63 | 25.00 | 50.00 | 15.00 | 20.95 | 20.07 | 15.54 | 29.00 |
| Percut allergy skin tests | 95004 | | 2.59% | 0.22% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Assay thyroid stim hormone | 84443 | | 0.61% | 0.22% | 53.09 | 30.61 | 49.18 | 32.56 | 25.51 | 46.78 | 45.00 | 31.21 | 48.09 | 32.86 | 24.44 | 41.52 | 91.00 | 31.88 | 48.09 | 35.09 | 28.07 | 68.00 |
| Chest x-ray | 71020 | 26 | 0.68% | 0.21% | 43.55 | 26.15 | 19.52 | 21.06 | 19.22 | 38.25 | 43.00 | 22.50 | 17.55 | 19.65 | 18.83 | 42.00 | 54.00 | 32.00 | 17.90 | 21.30 | 19.94 | 45.60 |
| Comprehen metabolic panel | 80053 | | 0.80% | 0.18% | 47.74 | 21.24 | 31.51 | 21.74 | 15.21 | 38.55 | 47.26 | 20.97 | 30.26 | 21.27 | 12.46 | 34.00 | 75.00 | 22.03 | 30.26 | 23.20 | 16.93 | 62.00 |
| Complete cbc w/auto diff wbc | 85025 | | 1.08% | 0.17% | 34.86 | 16.34 | 24.54 | 16.14 | 12.43 | 29.04 | 40.00 | 15.42 | 22.25 | 15.64 | 11.35 | 27.30 | 50.00 | 16.38 | 22.25 | 20.74 | 13.03 | 47.00 |
| Mechanical traction therapy | 97012 | | 0.80% | 0.17% | 43.83 | 16.61 | 20.19 | 21.17 | 18.11 | 21.94 | 50.00 | 15.00 | 22.64 | 20.00 | 16.26 | 21.61 | 55.00 | 18.61 | 22.64 | 25.00 | 20.00 | 28.80 |
| Immunotherapy injections | 95117 | | 0.70% | 0.17% | 33.49 | 20.87 | 20.27 | 26.20 | 22.86 | 23.06 | 35.00 | 20.64 | 19.81 | 26.86 | 22.14 | 21.00 | 36.00 | 21.53 | 19.81 | 31.72 | 24.04 | 29.00 |
| Ultrasound therapy | 97035 | | 0.74% | 0.13% | 43.54 | 14.27 | 17.48 | 18.59 | 13.73 | 27.93 | 47.50 | 12.83 | 18.12 | 17.33 | 12.80 | 26.00 | 55.00 | 15.00 | 18.12 | 21.05 | 12.80 | 35.00 |
| Routine venipuncture | 36415 | | 2.15% | 0.10% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-2
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
All Specialties

Including Specialties Not Listed in Appendices A-3 - A-20

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|---------|----------|----------|----------|----------|----------|---------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 10.78% | 9.83% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office/outpatient visit, est | 99214 | | 4.63% | 6.34% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Psytch, off, 45-50 min | 90806 | | 1.62% | 2.16% | 140.60 | 118.86 | 149.94 | 133.06 | 138.23 | 106.37 | 148.00 | 120.00 | 144.00 | 130.00 | 130.00 | 100.00 | 175.00 | 150.00 | 170.00 | 160.00 | 150.00 | 125.00 |
| Office/outpatient visit, new | 99203 | | 1.27% | 1.77% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Therapeutic exercises | 97110 | | 2.33% | 1.63% | 64.21 | 35.07 | 47.83 | 50.70 | 47.75 | 39.57 | 65.00 | 35.00 | 48.00 | 52.00 | 48.00 | 40.00 | 81.00 | 40.00 | 50.00 | 59.00 | 55.00 | 50.00 |
| Obstetrical care | 59400 | | 0.06% | 1.42% | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data |
| Office consultation | 99244 | | 0.44% | 1.21% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Office/outpatient visit, est | 99215 | | 0.60% | 1.10% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Office/outpatient visit, est | 99212 | | 1.87% | 1.06% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Office/outpatient visit, new | 99204 | | 0.49% | 1.03% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Chiropractic manipulation | 98941 | | 1.99% | 1.01% | 54.98 | 40.92 | 48.97 | 45.14 | 51.67 | 36.19 | 50.00 | 40.00 | 50.00 | 37.50 | 53.00 | 35.00 | 70.00 | 47.00 | 55.00 | 60.00 | 60.00 | 40.00 |
| Eye exam & treatment | 92014 | | 0.64% | 0.99% | 182.11 | 113.70 | 132.95 | 165.50 | 148.31 | 109.34 | 190.00 | 101.50 | 135.00 | 176.00 | 143.00 | 103.79 | 212.00 | 140.00 | 178.00 | 213.00 | 186.00 | 120.00 |
| Manual therapy | 97140 | | 1.81% | 0.96% | 61.95 | 35.68 | 47.24 | 49.82 | 45.33 | 38.27 | 64.00 | 35.51 | 46.25 | 50.00 | 45.00 | 40.00 | 70.00 | 44.00 | 55.00 | 57.75 | 50.00 | 50.00 |
| Tissue exam by pathologist | 88305 | 26 | 0.71% | 0.76% | 203.69 | 90.67 | 92.46 | 106.85 | 112.96 | 107.68 | 210.00 | 94.20 | 94.75 | 86.00 | 104.00 | 97.00 | 260.00 | 135.00 | 110.00 | 150.75 | 138.00 | 157.00 |
| Office/outpatient visit, new | 99202 | | 0.67% | 0.63% | 140.22 | 88.61 | 96.09 | 119.68 | 110.48 | 93.11 | 150.00 | 91.00 | 105.00 | 127.00 | 112.00 | 98.10 | 177.00 | 115.00 | 120.00 | 151.30 | 131.00 | 116.00 |
| Immunization admin | 90471 | | 1.27% | 0.40% | 27.07 | 27.47 | 31.90 | 34.76 | 32.20 | 23.54 | 25.00 | 30.00 | 32.00 | 38.00 | 32.00 | 22.50 | 36.00 | 36.25 | 38.00 | 46.50 | 42.00 | 28.15 |
| Chiropractic manipulation | 98940 | | 0.99% | 0.36% | 42.60 | 30.86 | 38.76 | 35.70 | 40.16 | 30.56 | 35.00 | 30.00 | 40.00 | 28.00 | 41.00 | 25.38 | 58.00 | 39.00 | 45.00 | 50.00 | 47.00 | 39.00 |
| Lipid panel | 80061 | | 0.97% | 0.27% | 69.85 | 45.11 | 59.69 | 45.18 | 49.63 | 67.63 | 81.00 | 39.20 | 56.00 | 40.00 | 40.00 | 71.00 | 93.00 | 57.10 | 70.00 | 54.90 | 68.22 | 86.00 |
| Electric stimulation therapy | 97014 | | 1.30% | 0.27% | 40.03 | 16.27 | 16.88 | 21.62 | 24.31 | 18.10 | 40.00 | 15.10 | 18.00 | 20.00 | 20.00 | 15.00 | 47.00 | 20.00 | 22.00 | 30.00 | 31.00 | 20.00 |
| Percut allergy skin tests | 95004 | | 2.59% | 0.22% | Not Cred | 7.35 | Not Cred | 9.82 | 10.50 | Not Cred | Not Cred | 8.00 | Not Cred | 9.20 | 10.00 | Not Cred | Not Cred | 8.25 | Not Cred | 13.00 | 12.00 | Not Cred |
| Assay thyroid stim hormone | 84443 | | 0.61% | 0.22% | 58.37 | 49.23 | 64.39 | 49.42 | 52.04 | 72.26 | 45.00 | 40.17 | 62.00 | 45.00 | 44.31 | 72.42 | 94.00 | 55.73 | 67.00 | 53.00 | 62.00 | 85.00 |
| Chest x-ray | 71020 | 26 | 0.68% | 0.21% | 49.09 | 37.03 | 30.04 | 32.45 | 33.55 | 28.99 | 43.00 | 32.50 | 26.00 | 34.00 | 33.00 | 32.00 | 56.00 | 49.28 | 36.00 | 38.00 | 37.20 | 43.00 |
| Comprehen metabolic panel | 80053 | | 0.80% | 0.18% | 45.03 | 38.41 | 61.10 | 35.30 | 38.95 | 48.15 | 42.85 | 39.29 | 61.00 | 32.63 | 39.29 | 53.00 | 65.00 | 42.26 | 65.00 | 44.31 | 51.00 | 56.00 |
| Complete cbc w/auto diff wbc | 85025 | | 1.08% | 0.17% | 33.93 | 29.96 | 42.83 | 26.51 | 32.26 | 37.16 | 27.51 | 30.00 | 40.00 | 24.00 | 30.00 | 37.00 | 46.00 | 39.10 | 49.00 | 32.50 | 40.03 | 56.00 |
| Mechanical traction therapy | 97012 | | 0.80% | 0.17% | 33.70 | 20.38 | 32.95 | 26.94 | 26.33 | 25.37 | 36.00 | 20.00 | 28.80 | 28.00 | 26.00 | 30.00 | 40.00 | 25.00 | 40.00 | 35.00 | 30.00 | 30.00 |
| Immunotherapy injections | 95117 | | 0.70% | 0.17% | No Data | 20.41 | 36.11 | 38.84 | 29.51 | 26.91 | No Data | 24.00 | 41.00 | 39.00 | 29.00 | 30.00 | No Data | 24.75 | 41.00 | 52.00 | 38.00 | 31.00 |
| Ultrasound therapy | 97035 | | 0.74% | 0.13% | 38.53 | 19.19 | 25.82 | 24.79 | 24.66 | 25.19 | 40.00 | 17.00 | 23.00 | 25.00 | 24.00 | 21.00 | 55.00 | 23.00 | 35.00 | 30.00 | 30.00 | 40.00 |
| Routine venipuncture | 36415 | | 2.15% | 0.10% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-3
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|--------|--------|--------|---------|---------|---------|--------|----------|------------------------|--------|--------|--------|--------|---------|---------|---------|-----|-----|-----|-----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | | |
| Heart image (3d), multiple | 78465 | | 2.76% | 11.89% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Tt w/o doppler, complete | 93307 | 26 | 5.73% | 8.40% | 64.24 | 46.26 | 47.01 | 47.44 | 46.61 | 49.47 | 47.19 | 47.62 | 94.98 | 48.57 | 48.15 | 49.69 | 48.85 | 51.32 | 49.37 | 48.50 | | | | | |
| Office/outpatient visit, est | 99214 | | 5.68% | 5.35% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | | |
| Doppler echo exam, heart | 93320 | 26 | 6.84% | 4.38% | 26.27 | 18.87 | 19.18 | 19.35 | 19.02 | 20.15 | 19.23 | 19.38 | 39.33 | 20.12 | 19.93 | 20.58 | 20.23 | 21.27 | 20.46 | 20.11 | | | | | |
| Cardiovascular stress test | 93015 | | 3.87% | 4.24% | 110.86 | 88.22 | 91.86 | 93.08 | 89.84 | 99.17 | 91.59 | 92.47 | 159.22 | 90.08 | 88.59 | 94.85 | 91.44 | 100.03 | 93.26 | 89.08 | | | | | |
| Office/outpatient visit, est | 99213 | | 6.25% | 3.91% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | | | | |
| Doppler color flow add-on | 93325 | 26 | 7.10% | 3.90% | 4.90 | 3.53 | 3.55 | 3.61 | 3.55 | 3.81 | 3.65 | 3.76 | 7.45 | 3.83 | 3.75 | 3.89 | 3.83 | 4.08 | 3.93 | 3.93 | | | | | |
| Insert intracoronary stent | 92980 | | 0.40% | 3.42% | 1,110.09 | 811.28 | 812.98 | 828.44 | 814.47 | 885.03 | 845.54 | 878.92 | 1,626.42 | 840.98 | 821.79 | 854.69 | 840.25 | 900.11 | 865.93 | 865.59 | | | | | |
| Office consultation | 99244 | | 1.80% | 3.37% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | | |
| Stress tte only | 93350 | 26 | 1.39% | 2.43% | 102.59 | 73.97 | 75.18 | 75.87 | 74.54 | 79.16 | 75.49 | 76.20 | 152.08 | 77.91 | 77.18 | 79.71 | 78.34 | 82.43 | 79.26 | 77.89 | | | | | |
| Tc99m sestamibi | A9500 | | 1.43% | 1.94% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | |
| Heart wall motion add-on | 78478 | | 2.72% | 1.71% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | |
| Office consultation | 99245 | | 0.67% | 1.54% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | | | | | |
| Heart function add-on | 78480 | | 2.67% | 1.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | |
| Electrocardiogram, complete | 93000 | | 5.33% | 1.28% | 23.57 | 18.66 | 19.33 | 19.62 | 18.97 | 20.97 | 19.43 | 19.74 | 34.09 | 19.18 | 18.79 | 20.10 | 19.41 | 21.28 | 19.89 | 19.15 | | | | | |
| Subsequent hospital care | 99232 | | 1.89% | 1.26% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | | | | | |
| Office consultation | 99243 | | 0.82% | 1.05% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | | | |
| Tc99m tetrofosmin | A9502 | | 0.75% | 1.02% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | |
| Electrocardiogram report | 93010 | | 7.62% | 0.67% | 11.85 | 8.53 | 8.65 | 8.74 | 8.59 | 9.14 | 8.73 | 8.85 | 17.44 | 8.90 | 8.79 | 9.08 | 8.93 | 9.42 | 9.08 | 8.98 | | | | | |
| Cardiovascular stress test | 93016 | | 1.24% | 0.31% | 31.32 | 22.53 | 22.92 | 23.11 | 22.71 | 24.07 | 22.96 | 23.12 | 46.44 | 23.74 | 23.54 | 24.29 | 23.88 | 25.09 | 24.14 | 23.72 | | | | | |
| Office/outpatient visit, est | 99211 | | 1.27% | 0.26% | 23.86 | 18.81 | 19.52 | 19.78 | 19.13 | 21.05 | 19.51 | 19.72 | 33.40 | 18.65 | 18.34 | 19.55 | 18.89 | 20.59 | 19.28 | 18.51 | | | | | |
| Cardiovascular stress test | 93018 | | 1.51% | 0.24% | 20.70 | 14.87 | 15.10 | 15.24 | 14.98 | 15.89 | 15.17 | 15.31 | 30.87 | 15.77 | 15.62 | 16.12 | 15.85 | 16.67 | 16.05 | 15.80 | | | | | |
| Prothrombin time | 85610 | | 1.56% | 0.09% | 5.53 | 5.53 | 5.53 | 5.53 | 5.53 | 5.53 | 5.53 | 4.47 | 6.76 | 5.15 | 5.05 | 5.11 | 5.11 | 4.69 | 4.73 | 5.16 | | | | | |
| Routine venipuncture | 36415 | | 1.00% | 0.03% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-3
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiology**

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|--------|--------|--------|--------|--------|----------|-------------------------|----------|--------|--------|-------|------------|----------|--------------------------------------|---------------|----------|-----|-----|--|--|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| Heart image (3d), multiple | 78465 | | 2.76% | 11.89% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$2,553.35 | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Tte w/o doppler, complete | 93307 | 26 | 5.73% | 8.40% | 141.17 | 46.26 | 47.01 | 47.44 | 49.47 | 47.62 | N/A | 60.66 | 65.49 | 37.56 | 29.79 | N/A | 292.91 | 93.26 | 86.72 | 88.98 | 78.03 | N/A | N/A | | |
| Office/outpatient visit, est | 99214 | | 5.68% | 5.35% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | N/A | | |
| Doppler echo exam, heart | 93320 | 26 | 6.84% | 4.38% | 74.47 | 18.87 | 19.18 | 19.35 | 20.15 | 19.38 | N/A | 29.76 | 26.58 | 15.58 | 12.45 | N/A | 179.38 | 38.05 | 35.31 | 36.23 | 31.54 | N/A | N/A | | |
| Cardiovascular stress test | 93015 | | 3.87% | 4.24% | 452.52 | 88.22 | 91.86 | 93.08 | 99.17 | 92.47 | 142.08 | 88.15 | 128.04 | 71.22 | 56.91 | N/A | 875.40 | 177.86 | 168.48 | 173.52 | 152.74 | N/A | N/A | | |
| Office/outpatient visit, est | 99213 | | 6.25% | 3.91% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | N/A | | |
| Doppler color flow add-on | 93325 | 26 | 7.10% | 3.90% | 59.75 | 3.53 | 3.55 | 3.61 | 3.81 | 3.76 | N/A | 35.64 | 4.75 | 3.06 | 2.45 | N/A | 127.14 | 7.12 | 6.81 | 6.99 | 6.09 | N/A | N/A | | |
| Insert intracoronary stent | 92980 | | 0.40% | 3.42% | 3,639.24 | 811.28 | 812.98 | 828.44 | 885.03 | 878.92 | 1,398.93 | 775.80 | 1,189.17 | 676.03 | 523.52 | N/A | 5,295.65 | 1,635.52 | 1,591.86 | 1,634.76 | 1,394.57 | N/A | N/A | | |
| Office consultation | 99244 | | 1.80% | 3.37% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | N/A | | |
| Stress tte only | 93350 | 26 | 1.39% | 2.43% | 283.49 | 73.97 | 75.18 | 75.87 | 79.16 | 76.20 | N/A | 94.65 | 104.89 | 60.37 | 48.02 | N/A | 522.23 | 149.12 | 138.75 | 142.37 | 124.52 | N/A | N/A | | |
| Tc99m sestamibi | A9500 | | 1.43% | 1.94% | 215.23 | N/A | N/A | N/A | N/A | N/A | 78.00 | 64.28 | N/A | 155.50 | 121.70 | N/A | BR | N/A | N/A | N/A | 121.70 | N/A | N/A | | |
| Heart wall motion add-on | 78478 | | 2.72% | 1.71% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 421.86 | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Office consultation | 99245 | | 0.67% | 1.54% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | N/A | 138.05 | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A | N/A | | |
| Heart function add-on | 78480 | | 2.67% | 1.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 403.35 | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Electrocardiogram, complete | 93000 | | 5.33% | 1.28% | 91.38 | 18.66 | 19.33 | 19.62 | 20.97 | 19.74 | 30.31 | 18.76 | 27.21 | 15.30 | 12.23 | N/A | 151.74 | 37.62 | 35.93 | 37.50 | 32.10 | N/A | N/A | | |
| Subsequent hospital care | 99232 | | 1.89% | 1.26% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A | N/A | | |
| Office consultation | 99243 | | 0.82% | 1.05% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | N/A | | |
| Tc99m tetrofosmin | A9502 | | 0.75% | 1.02% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 58.06 | N/A | 67.34 | 121.05 | N/A | BR | N/A | N/A | N/A | 121.05 | N/A | N/A | | |
| Electrocardiogram report | 93010 | | 7.62% | 0.67% | 42.05 | 8.53 | 8.65 | 8.74 | 9.14 | 8.85 | 15.50 | 8.15 | 12.80 | 6.96 | 5.56 | N/A | 60.70 | 17.20 | 16.10 | 16.53 | 14.39 | N/A | N/A | | |
| Cardiovascular stress test | 93016 | | 1.24% | 0.31% | 145.56 | 22.53 | 22.92 | 23.11 | 24.07 | 23.12 | 41.29 | 22.96 | 34.14 | 18.36 | 14.67 | N/A | 218.85 | 45.43 | 42.12 | 43.22 | 37.63 | N/A | N/A | | |
| Office/outpatient visit, est | 99211 | | 1.27% | 0.26% | 49.04 | 18.81 | 19.52 | 19.78 | 21.05 | 19.72 | 29.70 | 18.25 | 26.68 | N/A | 11.42 | N/A | 82.18 | 37.91 | 35.93 | 39.65 | 32.65 | N/A | N/A | | |
| Cardiovascular stress test | 93018 | | 1.51% | 0.24% | 159.36 | 14.87 | 15.10 | 15.24 | 15.89 | 15.31 | 27.46 | 14.86 | 22.41 | 12.24 | 9.78 | N/A | 218.85 | 29.98 | 27.87 | 29.24 | 24.90 | N/A | N/A | | |
| Prothrombin time | 85610 | | 1.56% | 0.09% | 26.68 | 5.53 | 5.53 | 5.53 | 5.53 | 4.47 | 5.62 | 5.49 | 5.62 | 4.16 | 4.27 | N/A | 44.87 | TBD | 13.83 | 80% of billed | 7.74 | N/A | N/A | | |
| Routine venipuncture | 36415 | | 1.00% | 0.03% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | N/A | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-3
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiology**

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|------------|----------|----------|----------|----------|------------|------------|----------|----------|----------|-----------------|----------|------------|------------|----------|------------|----------|------------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Heart image (3d), multiple | 78465 | | 2.76% | 11.89% | \$1,714.16 | \$843.48 | \$225.41 | \$923.35 | \$779.36 | \$1,008.56 | \$2,125.00 | \$935.27 | \$123.98 | \$951.30 | \$774.80 | \$928.00 | \$2,174.00 | \$1,002.99 | \$273.77 | \$1,106.32 | \$935.20 | \$1,467.00 |
| Tte w/o doppler, complete | 93307 | 26 | 5.73% | 8.40% | Not Cred | 87.46 | Not Cred | 154.82 | 82.71 | 165.85 | Not Cred | 80.00 | Not Cred | 104.34 | 69.49 | 173.00 | Not Cred | 102.53 | Not Cred | 183.65 | 74.52 | 179.58 |
| Office/outpatient visit, est | 99214 | | 5.68% | 5.35% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Doppler echo exam, heart | 93320 | 26 | 6.84% | 4.38% | 108.87 | 51.94 | 78.68 | 43.96 | 46.09 | 73.23 | 117.00 | 33.75 | 78.85 | 36.82 | 33.75 | 46.00 | 150.00 | 45.70 | 125.41 | 40.47 | 36.02 | 118.75 |
| Cardiovascular stress test | 93015 | | 3.87% | 4.24% | 540.42 | 186.52 | 188.13 | 202.02 | 165.00 | 296.26 | 589.00 | 160.24 | 157.38 | 194.56 | 153.47 | 319.00 | 639.00 | 165.52 | 157.38 | 223.49 | 184.92 | 319.00 |
| Office/outpatient visit, est | 99213 | | 6.25% | 3.91% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Doppler color flow add-on | 93325 | 26 | 7.10% | 3.90% | 50.99 | 47.90 | 19.79 | 19.95 | 11.19 | 52.88 | 38.00 | 6.88 | 6.40 | 7.24 | 6.82 | 9.00 | 105.00 | 165.41 | 44.64 | 8.10 | 7.29 | 140.00 |
| Insert intracoronary stent | 92980 | | 0.40% | 3.42% | 4,486.68 | 1,391.33 | 1,524.52 | 1,555.88 | 1,331.22 | 2,496.38 | 4,805.00 | 1,365.79 | 1,330.90 | 1,575.09 | 1,237.06 | 2,351.50 | 4,885.00 | 1,467.40 | 1,395.67 | 1,687.00 | 1,476.53 | 3,460.80 |
| Office consultation | 99244 | | 1.80% | 3.37% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Stress tte only | 93350 | 26 | 1.39% | 2.43% | Not Cred | 129.83 | 148.18 | 157.25 | 133.34 | 155.70 | Not Cred | 132.49 | 126.24 | 149.41 | 135.39 | 151.00 | Not Cred | 139.80 | 128.76 | 164.72 | 141.75 | 167.00 |
| Tc99m sestamibi | A9500 | | 1.43% | 1.94% | 198.80 | 119.09 | 145.83 | 132.73 | 132.82 | 128.02 | 190.00 | 114.33 | 115.29 | 121.70 | 121.70 | 113.00 | 190.00 | 136.00 | 217.78 | 144.00 | 134.51 | 128.11 |
| Heart wall motion add-on | 78478 | | 2.72% | 1.71% | 337.11 | 132.00 | 46.82 | 122.52 | 110.01 | 178.77 | 416.00 | 130.21 | 43.02 | 117.00 | 108.21 | 141.49 | 425.00 | 145.96 | 50.38 | 153.81 | 132.37 | 281.00 |
| Office consultation | 99245 | | 0.67% | 1.54% | 512.68 | 334.98 | 374.53 | 411.96 | 347.70 | 325.66 | 575.00 | 335.00 | 355.51 | 410.94 | 333.92 | 314.15 | 640.00 | 375.00 | 392.00 | 453.13 | 396.43 | 367.81 |
| Heart function add-on | 78480 | | 2.67% | 1.43% | 326.63 | 118.35 | 40.44 | 105.90 | 98.41 | 171.96 | 400.00 | 110.85 | 27.74 | 97.00 | 90.95 | 135.20 | 410.00 | 138.31 | 50.38 | 139.44 | 124.44 | 281.00 |
| Electrocardiogram, complete | 93000 | | 5.33% | 1.28% | 110.60 | 37.45 | 46.11 | 42.34 | 36.73 | 68.41 | 125.00 | 35.17 | 32.83 | 40.61 | 35.01 | 67.00 | 141.12 | 37.30 | 37.88 | 45.00 | 40.00 | 85.00 |
| Subsequent hospital care | 99232 | | 1.89% | 1.26% | 198.52 | 103.04 | 107.93 | 121.88 | 102.61 | 104.64 | 228.00 | 101.84 | 104.73 | 123.95 | 98.82 | 107.70 | 237.00 | 112.67 | 110.08 | 133.20 | 115.53 | 115.00 |
| Office consultation | 99243 | | 0.82% | 1.05% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Tc99m tetrofosmin | A9502 | | 0.75% | 1.02% | 158.30 | 126.21 | Not Cred | 131.81 | 123.59 | 111.51 | 118.33 | 117.00 | Not Cred | 121.05 | 115.29 | 120.70 | 231.61 | 145.26 | Not Cred | 160.00 | 137.50 | 127.20 |
| Electrocardiogram report | 93010 | | 7.62% | 0.67% | 48.58 | 19.21 | 16.24 | 24.19 | 17.90 | 33.02 | 52.00 | 14.47 | 14.15 | 19.58 | 15.26 | 36.30 | 56.00 | 18.05 | 14.43 | 30.60 | 18.00 | 39.00 |
| Cardiovascular stress test | 93016 | | 1.24% | 0.31% | 157.08 | 45.02 | 45.04 | 52.36 | 40.44 | 82.70 | 140.00 | 40.26 | 38.49 | 46.23 | 40.08 | 63.00 | 192.15 | 43.63 | 39.26 | 50.40 | 43.89 | 102.85 |
| Office/outpatient visit, est | 99211 | | 1.27% | 0.26% | 63.99 | 29.21 | 29.84 | 36.72 | 30.27 | 31.26 | 70.00 | 28.37 | 29.44 | 34.95 | 28.74 | 32.00 | 78.00 | 31.93 | 29.70 | 39.96 | 35.37 | 34.00 |
| Cardiovascular stress test | 93018 | | 1.51% | 0.24% | 164.25 | 34.38 | 33.19 | 48.64 | 27.46 | 73.65 | 151.00 | 26.62 | 25.47 | 30.82 | 26.35 | 69.00 | 232.00 | 28.00 | 26.10 | 37.26 | 28.71 | 122.00 |
| Prothrombin time | 85610 | | 1.56% | 0.09% | 29.59 | 8.86 | 13.68 | 8.62 | 6.78 | 15.43 | 35.00 | 7.61 | 11.25 | 7.69 | 5.74 | 15.00 | 40.00 | 7.97 | 11.48 | 8.24 | 6.89 | 23.75 |
| Routine venipuncture | 36415 | | 1.00% | 0.03% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-3
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiology

| Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | | |
|-------------------------------|-------|----------|-----------------|-----------------|------------|------------|----------|------------|------------|------------|------------|------------|----------|-----------------|------------|------------|------------|------------|----------|------------|------------|------------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Heart image (3d), multiple | 78465 | | 2.76% | 11.89% | \$1,884.19 | \$1,231.63 | \$610.48 | \$1,175.99 | \$1,129.43 | \$1,488.26 | \$2,174.00 | \$1,087.20 | \$490.07 | \$1,171.50 | \$1,087.20 | \$1,139.75 | \$2,174.00 | \$1,400.00 | \$918.00 | \$1,412.00 | \$1,258.00 | \$2,519.00 |
| Tte w/o doppler, complete | 93307 | 26 | 5.73% | 8.40% | Not Cred | 109.28 | Not Cred | 212.63 | 225.85 | 280.29 | Not Cred | 93.75 | Not Cred | 131.00 | 180.00 | 351.00 | Not Cred | 161.00 | Not Cred | 231.00 | 378.20 | 351.00 |
| Office/outpatient visit, est | 99214 | | 5.68% | 5.35% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Doppler echo exam, heart | 93320 | 26 | 6.84% | 4.38% | 182.08 | 61.68 | 53.62 | 68.94 | 86.09 | 98.26 | 117.00 | 58.00 | 52.00 | 54.00 | 56.00 | 85.00 | 117.00 | 80.17 | 89.00 | 95.75 | 128.00 | 170.00 |
| Cardiovascular stress test | 93015 | | 3.87% | 4.24% | 574.89 | 253.09 | 415.91 | 242.19 | 262.98 | 543.30 | 589.00 | 241.00 | 550.83 | 234.50 | 242.00 | 482.00 | 625.00 | 302.50 | 550.83 | 292.00 | 313.00 | 895.00 |
| Office/outpatient visit, est | 99213 | | 6.25% | 3.91% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 |
| Doppler color flow add-on | 93325 | 26 | 7.10% | 3.90% | 135.14 | 30.51 | 23.68 | 26.88 | 38.18 | 59.70 | 38.00 | 11.00 | 27.00 | 10.75 | 10.00 | 19.50 | 167.00 | 72.00 | 38.00 | 16.50 | 40.00 | 122.00 |
| Insert intracoronary stent | 92980 | | 0.40% | 3.42% | 4,800.84 | 1,905.47 | 2,774.34 | 2,055.52 | 2,230.35 | 3,218.71 | 4,885.00 | 1,913.00 | 2,559.00 | 1,935.00 | 2,021.50 | 3,720.50 | 4,885.00 | 2,043.00 | 3,228.00 | 2,304.00 | 2,817.00 | 5,162.00 |
| Office consultation | 99244 | | 1.80% | 3.37% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Stress tte only | 93350 | 26 | 1.39% | 2.43% | Not Cred | 167.39 | 222.66 | 224.61 | 203.39 | 187.28 | Not Cred | 172.72 | 243.00 | 194.00 | 191.00 | 181.38 | Not Cred | 195.00 | 243.00 | 275.00 | 205.00 | 192.00 |
| Tc99m sestamibi | A9500 | | 1.43% | 1.94% | 184.27 | 152.64 | 241.51 | 154.43 | 179.43 | 290.30 | 190.00 | 134.51 | 279.36 | 153.00 | 149.00 | 275.00 | 190.00 | 192.16 | 279.36 | 190.00 | 206.00 | 425.95 |
| Heart wall motion add-on | 78478 | | 2.72% | 1.71% | 399.10 | 181.55 | 105.71 | 182.07 | 182.65 | 326.99 | 425.00 | 191.00 | 62.00 | 183.71 | 187.00 | 350.00 | 425.00 | 223.00 | 114.00 | 259.00 | 210.00 | 515.36 |
| Office consultation | 99245 | | 0.67% | 1.54% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 450.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 |
| Heart function add-on | 78480 | | 2.67% | 1.43% | 378.74 | 167.36 | 91.88 | 170.25 | 179.57 | 315.21 | 410.00 | 174.00 | 62.00 | 158.83 | 186.00 | 423.50 | 410.00 | 223.00 | 135.00 | 238.00 | 216.00 | 515.36 |
| Electrocardiogram, complete | 93000 | | 5.33% | 1.28% | 105.88 | 51.56 | 64.80 | 54.14 | 56.58 | 96.95 | 125.00 | 50.00 | 66.00 | 56.00 | 52.80 | 90.00 | 128.00 | 75.00 | 78.00 | 62.00 | 72.00 | 175.00 |
| Subsequent hospital care | 99232 | | 1.89% | 1.26% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 |
| Office consultation | 99243 | | 0.82% | 1.05% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Tc99m tetrofosmin | A9502 | | 0.75% | 1.02% | Not Cred | 151.46 | Not Cred | 170.76 | 183.83 | 138.04 | Not Cred | 164.00 | Not Cred | 151.00 | 178.00 | 142.00 | Not Cred | 191.13 | Not Cred | 200.00 | 250.00 | 142.00 |
| Electrocardiogram report | 93010 | | 7.62% | 0.67% | 56.29 | 29.67 | 34.64 | 33.93 | 32.06 | 41.09 | 52.00 | 25.70 | 25.00 | 34.00 | 28.00 | 36.30 | 60.10 | 37.00 | 44.00 | 43.00 | 39.00 | 55.00 |
| Cardiovascular stress test | 93016 | | 1.24% | 0.31% | 172.90 | 51.82 | 70.05 | 75.67 | 67.33 | 95.84 | 199.00 | 43.00 | 64.00 | 61.00 | 58.00 | 98.00 | 199.00 | 63.00 | 66.00 | 100.00 | 75.00 | 121.00 |
| Office/outpatient visit, est | 99211 | | 1.27% | 0.26% | 61.45 | 31.51 | 36.11 | 43.78 | 44.31 | 33.61 | 75.00 | 31.93 | 37.00 | 45.00 | 41.00 | 35.00 | 80.00 | 40.00 | 37.00 | 51.00 | 50.00 | 45.00 |
| Cardiovascular stress test | 93018 | | 1.51% | 0.24% | 179.99 | 44.22 | 91.97 | 61.84 | 54.60 | 104.90 | 206.56 | 28.00 | 82.00 | 43.00 | 39.00 | 70.50 | 256.00 | 70.42 | 161.00 | 100.00 | 65.00 | 165.00 |
| Prothrombin time | 85610 | | 1.56% | 0.09% | 32.22 | 23.20 | 25.89 | 18.04 | 20.72 | 26.62 | 35.00 | 21.00 | 28.00 | 18.00 | 17.00 | 28.00 | 35.00 | 36.78 | 28.00 | 22.00 | 32.00 | 31.50 |
| Routine venipuncture | 36415 | | 1.00% | 0.03% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-4
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiothoracic Surgery

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|------------|------------|------------|-------------|------------|------------|------------|------------|------------------------|------------|------------|-------------|------------|------------|------------|------------|--|--|
| | | | % of | | AK | ID | ND | Portland OR | Rest Of OR | Seattle WA | Rest Of WA | WY | AK | ID | ND | Portland OR | Rest of OR | Seattle WA | Rest of WA | WY | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | |
| CABG, arterial, single | 33533 | | 4.98% | 16.39% | \$2,511.98 | \$1,834.00 | \$1,833.12 | \$1,870.13 | \$1,839.75 | \$2,002.77 | \$1,915.64 | \$1,998.59 | \$3,622.15 | \$1,864.48 | \$1,818.86 | \$1,889.41 | \$1,859.86 | \$1,992.99 | \$1,921.24 | \$1,928.84 | | |
| Replacement of aortic valve | 33405 | | 1.10% | 4.28% | 3,053.32 | 2,226.28 | 2,224.22 | 2,269.11 | 2,232.86 | 2,429.63 | 2,325.06 | 2,426.11 | 4,399.19 | 2,260.84 | 2,205.56 | 2,289.75 | 2,254.74 | 2,414.81 | 2,329.19 | 2,339.87 | | |
| CABG, arterial, two | 33534 | | 0.83% | 3.18% | 2,950.56 | 2,151.84 | 2,150.02 | 2,193.41 | 2,158.26 | 2,348.65 | 2,247.37 | 2,344.99 | 4,252.92 | 2,186.39 | 2,132.92 | 2,214.61 | 2,180.59 | 2,335.67 | 2,252.58 | 2,262.62 | | |
| Partial removal of lung | 32480 | | 0.59% | 1.80% | 1,946.13 | 1,424.06 | 1,425.49 | 1,453.72 | 1,429.25 | 1,555.97 | 1,486.66 | 1,548.82 | 2,790.30 | 1,438.31 | 1,403.80 | 1,458.81 | 1,435.43 | 1,538.11 | 1,481.80 | 1,485.75 | | |
| Repair of mitral valve | 33427 | | 0.46% | 1.66% | 3,281.19 | 2,388.20 | 2,384.24 | 2,432.53 | 2,394.59 | 2,604.43 | 2,494.09 | 2,603.63 | 4,733.06 | 2,428.30 | 2,368.79 | 2,457.72 | 2,421.07 | 2,591.65 | 2,501.30 | 2,514.74 | | |
| Endovenous laser, 1st vein | 36478 | | 0.36% | 1.59% | 1,670.49 | 1,375.69 | 1,438.15 | 1,461.86 | 1,404.08 | 1,574.18 | 1,441.66 | 1,465.02 | 2,297.57 | 1,344.42 | 1,315.87 | 1,425.74 | 1,366.93 | 1,517.12 | 1,402.28 | 1,332.68 | | |
| Partial removal of lung | 32500 | | 0.51% | 1.50% | 1,882.49 | 1,380.83 | 1,383.43 | 1,410.79 | 1,386.35 | 1,510.38 | 1,441.79 | 1,501.47 | 2,697.10 | 1,393.76 | 1,360.31 | 1,414.91 | 1,391.47 | 1,492.25 | 1,436.36 | 1,438.74 | | |
| Replacement of mitral valve | 33430 | | 0.32% | 1.50% | 3,731.52 | 2,716.49 | 2,712.12 | 2,767.08 | 2,723.82 | 2,962.74 | 2,837.03 | 2,961.64 | 5,363.86 | 2,750.54 | 2,683.04 | 2,783.28 | 2,742.10 | 2,934.92 | 2,833.13 | 2,849.09 | | |
| CABG, artery-vein, three | 33519 | | 1.65% | 1.45% | 732.94 | 528.74 | 526.01 | 536.79 | 529.44 | 574.38 | 551.97 | 577.29 | 1,058.51 | 537.97 | 524.70 | 542.52 | 535.58 | 571.59 | 553.56 | 558.82 | | |
| Ascending aortic graft | 33863 | | 0.24% | 1.36% | 4,216.10 | 3,056.85 | 3,047.47 | 3,109.34 | 3,063.35 | 3,327.81 | 3,191.51 | 3,333.82 | 6,079.29 | 3,105.69 | 3,029.58 | 3,138.37 | 3,094.52 | 3,307.83 | 3,197.38 | 3,220.20 | | |
| Office consultation | 99245 | | 2.19% | 1.34% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | | |
| CABG, artery-vein, two | 33518 | | 2.01% | 1.30% | 553.06 | 398.83 | 396.68 | 404.83 | 399.33 | 433.21 | 416.37 | 435.55 | 798.01 | 405.34 | 395.33 | 408.67 | 403.49 | 430.55 | 417.06 | 421.15 | | |
| Repair of mitral valve | 33426 | | 0.32% | 1.28% | 3,184.41 | 2,320.01 | 2,317.05 | 2,363.92 | 2,326.56 | 2,531.14 | 2,422.99 | 2,528.91 | 4,584.36 | 2,353.56 | 2,295.89 | 2,382.66 | 2,346.78 | 2,512.67 | 2,424.50 | 2,436.85 | | |
| Office consultation | 99244 | | 2.46% | 1.22% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | |
| Extremity study | 93970 | 26 | 2.73% | 1.03% | 46.21 | 33.12 | 33.35 | 33.78 | 33.27 | 35.51 | 34.03 | 34.78 | 67.27 | 34.07 | 33.61 | 34.60 | 34.12 | 35.93 | 34.73 | 34.53 | | |
| Extracranial study | 93880 | 26 | 1.93% | 0.88% | 40.73 | 29.17 | 29.50 | 29.81 | 29.34 | 31.19 | 29.85 | 30.31 | 59.84 | 30.37 | 30.03 | 30.92 | 30.46 | 32.01 | 30.90 | 30.58 | | |
| Office/outpatient visit, est | 99213 | | 5.06% | 0.84% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | |
| Inpatient consultation | 99255 | | 1.39% | 0.75% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 396.77 | 201.14 | 199.02 | 204.82 | 201.81 | 211.86 | 204.56 | 202.30 | | |
| Extremity study | 93971 | 26 | 2.99% | 0.72% | 30.49 | 21.83 | 22.02 | 22.29 | 21.95 | 23.38 | 22.40 | 22.83 | 44.86 | 22.76 | 22.46 | 23.14 | 22.80 | 24.01 | 23.19 | 23.01 | | |
| Office/outpatient visit, est | 99214 | | 2.54% | 0.64% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | |
| Office consultation | 99243 | | 1.80% | 0.61% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | |
| Inpatient consultation | 99254 | | 1.37% | 0.60% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 328.30 | 166.65 | 164.98 | 169.85 | 167.30 | 175.60 | 169.44 | 167.34 | | |
| Office/outpatient visit, est | 99212 | | 3.28% | 0.34% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | |
| Inpatient consultation | 99253 | | 1.02% | 0.31% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 226.70 | 115.09 | 113.83 | 117.22 | 115.47 | 121.34 | 117.11 | 115.83 | | |
| Office/outpatient visit, new | 99203 | | 1.08% | 0.27% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | |
| Subsequent hospital care | 99232 | | 1.54% | 0.27% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | | |
| Subsequent hospital care | 99231 | | 1.46% | 0.14% | 51.71 | 37.05 | 37.46 | 37.87 | 37.27 | 39.61 | 37.90 | 38.48 | 74.26 | 37.52 | 37.10 | 38.14 | 37.61 | 39.46 | 38.16 | 37.83 | | |
| Endoscopic vein harvest | 33508 | | 2.31% | 0.08% | 21.79 | 15.74 | 15.69 | 16.00 | 15.77 | 17.09 | 16.40 | 17.11 | 31.29 | 15.91 | 15.54 | 16.06 | 15.85 | 16.89 | 16.35 | 16.46 | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-4
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiothoracic Surgery**

| Description | HCPCS | Modifier | | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | | Workers' Compensation ⁽⁵⁾ | | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|------------|------------|------------|------------|------------|------------|-------------------------|------------|------------|-------------|-------|-------------|------------|--------------------------------------|------------|------------|-----|--|--|--|
| | | | % of | % of | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | | |
| CABG, arterial, single | 33533 | | 4.98% | 16.39% | \$4,736.81 | \$1,834.00 | \$1,833.12 | \$1,870.13 | \$2,002.77 | \$1,998.59 | \$3,216.32 | \$1,699.42 | \$2,631.76 | \$1,505.34 | \$1,161.07 | N/A | \$15,536.23 | \$4,734.66 | \$3,617.30 | \$4,623.98 | \$3,157.70 | N/A | | | |
| Replacement of aortic valve | 33405 | | 1.10% | 4.28% | 5,456.88 | 2,226.28 | 2,224.22 | 2,269.11 | 2,429.63 | 2,426.11 | 3,907.14 | 2,040.43 | 3,191.40 | 1,825.27 | 1,407.38 | N/A | 17,021.05 | 5,747.35 | 4,390.93 | 5,613.65 | 3,832.30 | N/A | | | |
| CABG, arterial, two | 33534 | | 0.83% | 3.18% | 5,099.52 | 2,151.84 | 2,150.02 | 2,193.41 | 2,348.65 | 2,344.99 | 3,777.36 | 1,965.15 | 3,086.30 | 1,765.18 | 1,361.14 | N/A | 17,383.20 | 5,555.18 | 4,244.13 | 5,425.36 | 3,703.91 | N/A | | | |
| Partial removal of lung | 32480 | | 0.59% | 1.80% | 3,721.88 | 1,424.06 | 1,425.49 | 1,453.72 | 1,555.97 | 1,548.82 | 2,478.16 | 1,300.29 | 2,031.03 | 1,159.82 | 895.65 | N/A | 5,890.16 | 3,676.35 | 2,804.02 | 3,583.68 | 2,451.56 | N/A | | | |
| Repair of mitral valve | 33427 | | 0.46% | 1.66% | 6,077.90 | 2,388.20 | 2,384.24 | 2,432.53 | 2,604.43 | 2,603.63 | 4,203.41 | 2,200.29 | 3,427.20 | 1,960.75 | 1,511.20 | N/A | BR | 6,165.36 | 4,711.78 | 6,022.64 | 4,109.55 | N/A | | | |
| Endovenous laser, 1st vein | 36478 | | 0.36% | 1.59% | 7,634.28 | 1,375.69 | 1,438.15 | 1,461.86 | 1,574.18 | 1,465.02 | 2,070.12 | 1,315.48 | 1,904.06 | 1,076.63 | Not Covered | N/A | N/A | 3,551.68 | 2,666.52 | 3,537.22 | 2,410.06 | N/A | | | |
| Partial removal of lung | 32500 | | 0.51% | 1.50% | 3,439.51 | 1,380.83 | 1,383.43 | 1,410.79 | 1,510.38 | 1,501.47 | 2,395.28 | 1,260.92 | 1,968.08 | 1,123.93 | 868.53 | N/A | 4,908.46 | 3,564.77 | 2,718.55 | 3,475.30 | 2,377.96 | N/A | | | |
| Replacement of mitral valve | 33430 | | 0.32% | 1.50% | 5,226.84 | 2,716.49 | 2,712.12 | 2,767.08 | 2,962.74 | 2,961.64 | 4,763.39 | 2,397.45 | 3,881.75 | 2,221.15 | 1,711.49 | N/A | 16,296.75 | 7,012.88 | 5,359.67 | 6,851.72 | 4,675.12 | N/A | | | |
| CABG, artery-vein, three | 33519 | | 1.65% | 1.45% | 992.94 | 528.74 | 526.01 | 536.79 | 574.38 | 577.29 | 939.71 | 462.81 | 759.17 | 434.55 | 334.12 | N/A | 3,911.23 | 1,364.99 | 1,044.31 | 1,381.32 | 908.68 | N/A | | | |
| Ascending aortic graft | 33863 | | 0.24% | 1.36% | 6,835.43 | 3,056.85 | 3,047.47 | 3,109.34 | 3,327.81 | 3,333.82 | 5,398.64 | 2,733.52 | 4,383.24 | 2,507.69 | 1,930.90 | N/A | 19,918.25 | 7,891.54 | 6,032.34 | 7,710.06 | 5,256.75 | N/A | | | |
| Office consultation | 99245 | | 2.19% | 1.34% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | N/A | 138.05 | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A | | | |
| CABG, artery-vein, two | 33518 | | 2.01% | 1.30% | 677.43 | 398.83 | 396.68 | 404.83 | 433.21 | 435.55 | 708.68 | 345.48 | 571.91 | 327.44 | 251.64 | N/A | 2,535.05 | 1,029.61 | 787.88 | 1,041.51 | 685.11 | N/A | | | |
| Repair of mitral valve | 33426 | | 0.32% | 1.28% | 5,159.56 | 2,320.01 | 2,317.05 | 2,363.92 | 2,531.14 | 2,528.91 | 4,071.18 | 2,091.94 | 3,321.57 | 1,900.38 | 1,464.96 | N/A | 16,514.03 | 5,989.34 | 4,576.75 | 5,850.98 | 3,992.78 | N/A | | | |
| Office consultation | 99244 | | 2.46% | 1.22% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | | | |
| Extremity study | 93970 | 26 | 2.73% | 1.03% | 93.08 | 33.12 | 33.35 | 33.78 | 35.51 | 34.78 | N/A | 47.34 | 46.51 | 26.71 | 20.90 | N/A | 276.02 | 66.76 | 63.18 | 64.83 | 55.89 | N/A | | | |
| Extracranial study | 93880 | 26 | 1.93% | 0.88% | 129.14 | 29.17 | 29.50 | 29.81 | 31.19 | 30.31 | N/A | 37.66 | 41.29 | 23.65 | 18.67 | N/A | 304.62 | 58.81 | 55.13 | 56.57 | 49.25 | N/A | | | |
| Office/outpatient visit, est | 99213 | | 5.06% | 0.84% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | | | |
| Inpatient consultation | 99255 | | 1.39% | 0.75% | 392.77 | N/A | N/A | N/A | N/A | N/A | 352.78 | N/A | N/A | N/A | 123.60 | N/A | 657.70 | 376.41 | N/A | 388.34 | 313.78 | N/A | | | |
| Extremity study | 93971 | 26 | 2.99% | 0.72% | 60.36 | 21.83 | 22.02 | 22.29 | 23.38 | 22.83 | N/A | 18.16 | 30.85 | 17.80 | 14.00 | N/A | 171.57 | 44.02 | 41.50 | 42.59 | 37.08 | N/A | | | |
| Office/outpatient visit, est | 99214 | | 2.54% | 0.64% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | | |
| Office consultation | 99243 | | 1.80% | 0.61% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | | | |
| Inpatient consultation | 99254 | | 1.37% | 0.60% | 343.92 | N/A | N/A | N/A | N/A | N/A | 291.91 | N/A | N/A | N/A | 102.26 | N/A | 523.16 | 311.86 | N/A | 321.34 | 260.10 | N/A | | | |
| Office/outpatient visit, est | 99212 | | 3.28% | 0.34% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | | |
| Inpatient consultation | 99253 | | 1.02% | 0.31% | 252.38 | N/A | N/A | N/A | N/A | N/A | 201.58 | N/A | N/A | N/A | 70.69 | N/A | 418.53 | 215.63 | N/A | 222.89 | 179.86 | N/A | | | |
| Office/outpatient visit, new | 99203 | | 1.08% | 0.27% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | | | |
| Subsequent hospital care | 99232 | | 1.54% | 0.27% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A | | | |
| Subsequent hospital care | 99231 | | 1.46% | 0.14% | 85.13 | 37.05 | 37.46 | 37.87 | 39.61 | 38.48 | 66.52 | 34.77 | 53.88 | 29.21 | 23.12 | N/A | 188.08 | 74.69 | 69.99 | 77.26 | 62.53 | N/A | | | |
| Endoscopic vein harvest | 33508 | | 2.31% | 0.08% | 43.26 | 15.74 | 15.69 | 16.00 | 17.09 | 17.11 | 27.83 | 14.38 | 22.41 | 12.80 | 9.78 | N/A | 3,549.08 | 40.63 | 30.97 | 40.94 | 27.12 | N/A | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-4
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Cardiothoracic Surgery

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|------------|----------|------------|------------|----------|----------|------------|----------|------------|-----------------|----------|----------|------------|----------|------------|------------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| CABG, arterial, single | 33533 | | 4.98% | 16.39% | Not Cred | \$6,174.64 | Not Cred | \$5,038.85 | \$4,678.82 | Not Cred | Not Cred | \$6,533.00 | Not Cred | \$5,487.00 | \$4,925.00 | Not Cred | Not Cred | \$6,712.00 | Not Cred | \$5,508.00 | \$5,723.00 | Not Cred |
| Replacement of aortic valve | 33405 | | 1.10% | 4.28% | Not Cred | 7,410.80 | Not Cred | 5,905.67 | 5,877.24 | Not Cred | Not Cred | 7,782.00 | Not Cred | 6,115.00 | 5,543.50 | Not Cred | Not Cred | 7,782.00 | Not Cred | 6,543.00 | 6,706.60 | Not Cred |
| CABG, arterial, two | 33534 | | 0.83% | 3.18% | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Partial removal of lung | 32480 | | 0.59% | 1.80% | Not Cred | Not Cred | Not Cred | Not Cred | 3,218.09 | No Data | Not Cred | Not Cred | Not Cred | Not Cred | 3,271.00 | No Data | Not Cred | Not Cred | Not Cred | Not Cred | 4,280.30 | No Data |
| Repair of mitral valve | 33427 | | 0.46% | 1.66% | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Endovenous laser, 1st vein | 36478 | | 0.36% | 1.59% | Not Cred | 4,044.55 | Not Cred | Not Cred | 3,993.27 | Not Cred | Not Cred | 3,850.00 | Not Cred | Not Cred | 4,000.00 | Not Cred | Not Cred | 4,250.00 | Not Cred | Not Cred | 5,209.00 | Not Cred |
| Partial removal of lung | 32500 | | 0.51% | 1.50% | Not Cred | Not Cred | Not Cred | Not Cred | 8,024.16 | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Replacement of mitral valve | 33430 | | 0.32% | 1.50% | No Data | Not Cred | Not Cred | Not Cred | 8,024.16 | No Data | No Data | Not Cred | Not Cred | Not Cred | 7,892.00 | No Data | No Data | Not Cred | Not Cred | Not Cred | 8,916.00 | No Data |
| CABG, artery-vein, three | 33519 | | 1.65% | 1.45% | No Data | Not Cred | Not Cred | Not Cred | 1,248.08 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 1,254.00 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 1,557.10 | Not Cred |
| Ascending aortic graft | 33863 | | 0.24% | 1.36% | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Office consultation | 99245 | | 2.19% | 1.34% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 450.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 |
| CABG, artery-vein, two | 33518 | | 2.01% | 1.30% | No Data | Not Cred | Not Cred | 1,026.99 | 890.04 | Not Cred | No Data | Not Cred | Not Cred | 1,018.50 | 935.00 | Not Cred | No Data | Not Cred | Not Cred | 1,155.00 | 1,159.00 | Not Cred |
| Repair of mitral valve | 33426 | | 0.32% | 1.28% | Not Cred | Not Cred | No Data | Not Cred | Not Cred | No Data | Not Cred | Not Cred | No Data | Not Cred | Not Cred | No Data | Not Cred | Not Cred | No Data | Not Cred | Not Cred | No Data |
| Office consultation | 99244 | | 2.46% | 1.22% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Extremity study | 93970 | 26 | 2.73% | 1.03% | 186.81 | 102.52 | 89.74 | 128.66 | 103.10 | 122.20 | 165.00 | 100.50 | 72.00 | 102.00 | 96.00 | 33.43 | 257.00 | 110.00 | 109.00 | 167.00 | 120.00 | 129.00 |
| Extracranial study | 93880 | 26 | 1.93% | 0.88% | 149.98 | 90.58 | 98.21 | 110.40 | 107.58 | 134.66 | 170.00 | 92.00 | 80.00 | 91.03 | 87.75 | 84.00 | 170.00 | 105.50 | 135.00 | 124.00 | 112.00 | 201.58 |
| Office/outpatient visit, est | 99213 | | 5.06% | 0.84% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 |
| Inpatient consultation | 99255 | | 1.39% | 0.75% | 477.62 | 355.21 | 398.36 | 443.39 | 400.14 | 402.83 | 477.00 | 350.00 | 404.00 | 446.00 | 420.00 | 414.00 | 628.55 | 438.47 | 404.00 | 523.00 | 476.00 | 500.00 |
| Extremity study | 93971 | 26 | 2.99% | 0.72% | 123.57 | 67.78 | 65.69 | 75.24 | 68.87 | 101.08 | 117.00 | 60.00 | 66.00 | 65.00 | 63.00 | 160.00 | 75.86 | 71.00 | 96.00 | 76.80 | 149.00 | |
| Office/outpatient visit, est | 99214 | | 2.54% | 0.64% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Office consultation | 99243 | | 1.80% | 0.61% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Inpatient consultation | 99254 | | 1.37% | 0.60% | 459.06 | 283.58 | 301.70 | 356.38 | 324.02 | 323.08 | 493.00 | 287.00 | 300.00 | 362.00 | 330.00 | 320.00 | 552.00 | 350.00 | 332.00 | 431.00 | 390.00 | 401.00 |
| Office/outpatient visit, est | 99212 | | 3.28% | 0.34% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Inpatient consultation | 99253 | | 1.02% | 0.31% | 345.49 | 202.10 | 225.00 | 255.97 | 234.89 | 245.19 | 383.00 | 204.00 | 212.00 | 261.00 | 234.85 | 259.65 | 407.70 | 247.00 | 270.00 | 299.00 | 270.00 | 280.00 |
| Office/outpatient visit, new | 99203 | | 1.08% | 0.27% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Subsequent hospital care | 99232 | | 1.54% | 0.27% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 |
| Subsequent hospital care | 99231 | | 1.46% | 0.14% | 140.10 | 74.65 | 79.05 | 88.72 | 94.01 | 88.60 | 152.00 | 75.00 | 78.00 | 87.00 | 84.00 | 88.00 | 180.00 | 89.00 | 98.00 | 108.00 | 102.00 | 109.00 |
| Endoscopic vein harvest | 33508 | | 2.31% | 0.08% | Not Cred | 56.25 | Not Cred | 97.14 | 45.52 | Not Cred | Not Cred | 55.00 | Not Cred | 47.00 | 41.00 | Not Cred | Not Cred | 58.00 | Not Cred | 47.00 | 55.00 | Not Cred |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-5
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Chiropractic

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Medicare ⁽¹⁾ | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | | | | |
|------------------------------|-------|----------|--------------------|--------------------|-------------------------|---------|---------|---------|---------|---------|---------|---------|---------|------------------------|---------|---------|----------|---------|---------|---------|----|----|---------|----|----|---------|----|----|
| | | | | | Portland | | | Rest Of | | | Seattle | | | Rest Of | | | Portland | | | Rest of | | | Seattle | | | Rest of | | |
| | | | | | AK | ID | ND | OR | OR | WA | WA | WY | AK | ID | ND | OR | OR | WA | WA | WY | AK | ID | ND | OR | OR | WA | WA | WY |
| Chiropractic manipulation | 98941 | | 26.08% | 32.73% | \$46.20 | \$33.52 | \$34.08 | \$34.43 | \$33.79 | \$36.02 | \$34.29 | \$34.68 | \$65.97 | \$33.75 | \$33.43 | \$34.51 | \$33.93 | \$35.70 | \$34.34 | \$33.78 | | | | | | | | |
| Chiropractic manipulation | 98940 | | 12.96% | 11.58% | 33.24 | 24.28 | 24.79 | 25.02 | 24.51 | 26.15 | 24.81 | 24.99 | 47.15 | 24.28 | 24.06 | 24.90 | 24.44 | 25.76 | 24.72 | 24.23 | | | | | | | | |
| Manual therapy | 97140 | | 6.49% | 6.20% | 36.23 | 26.98 | 27.67 | 27.96 | 27.29 | 29.35 | 27.67 | 27.88 | 50.51 | 26.48 | 26.20 | 27.29 | 26.70 | 28.34 | 27.04 | 26.38 | | | | | | | | |
| Chiropractic manipulation | 98942 | | 3.39% | 5.56% | 60.10 | 43.36 | 44.07 | 44.48 | 43.69 | 46.42 | 44.26 | 44.67 | 86.52 | 44.09 | 43.71 | 45.05 | 44.32 | 46.50 | 44.79 | 44.06 | | | | | | | | |
| Therapeutic exercises | 97110 | | 5.40% | 5.53% | 38.37 | 28.62 | 29.37 | 29.67 | 28.96 | 31.16 | 29.36 | 29.58 | 53.75 | 28.26 | 27.95 | 29.15 | 28.50 | 30.29 | 28.87 | 28.13 | | | | | | | | |
| Mechanical traction therapy | 97012 | | 8.86% | 4.76% | 20.01 | 14.78 | 15.10 | 15.26 | 14.93 | 16.02 | 15.15 | 15.31 | 28.14 | 14.63 | 14.46 | 15.03 | 14.73 | 15.61 | 14.94 | 14.64 | | | | | | | | |
| Electric stimulation therapy | 97014 | | 8.89% | 4.49% | 16.07 | 12.08 | 12.39 | 12.53 | 12.22 | 13.22 | 12.44 | 12.59 | 24.96 | 13.44 | 13.24 | 13.93 | 13.56 | 14.59 | 13.81 | 13.42 | | | | | | | | |
| Chiropractic manipulation | 98943 | | 4.31% | 3.55% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 44.59 | 23.14 | 22.86 | 23.74 | 23.28 | 24.68 | 23.64 | 23.22 | | | | | | | | |
| Office/outpatient visit, new | 99203 | | 0.98% | 3.35% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 1.45% | 3.29% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | | | | | | | |
| Neuromuscular reeducation | 97112 | | 3.02% | 3.23% | 39.85 | 29.90 | 30.73 | 31.05 | 30.27 | 32.65 | 30.70 | 30.94 | 55.44 | 29.30 | 28.98 | 30.28 | 29.57 | 31.49 | 29.97 | 29.15 | | | | | | | | |
| Therapeutic activities | 97530 | | 2.20% | 2.39% | 41.20 | 31.16 | 32.09 | 32.44 | 31.58 | 34.17 | 32.05 | 32.30 | 56.91 | 30.32 | 29.96 | 31.40 | 30.61 | 32.71 | 31.05 | 30.13 | | | | | | | | |
| Ultrasound therapy | 97035 | | 3.25% | 1.39% | 15.75 | 11.49 | 11.71 | 11.83 | 11.59 | 12.39 | 11.77 | 11.91 | 22.79 | 11.77 | 11.63 | 12.05 | 11.83 | 12.51 | 12.01 | 11.81 | | | | | | | | |
| Electrical stimulation | 97032 | | 2.32% | 1.38% | 22.61 | 17.02 | 17.48 | 17.68 | 17.23 | 18.63 | 17.51 | 17.69 | 30.94 | 16.36 | 16.16 | 16.89 | 16.50 | 17.61 | 16.76 | 16.34 | | | | | | | | |
| Office/outpatient visit, new | 99202 | | 0.57% | 1.30% | 89.38 | 67.88 | 69.71 | 70.61 | 68.74 | 74.76 | 70.13 | 71.13 | 123.19 | 65.86 | 64.92 | 68.16 | 66.44 | 71.28 | 67.62 | 65.81 | | | | | | | | |
| Office/outpatient visit, est | 99212 | | 0.90% | 1.25% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | | | | | |
| Massage therapy | 97124 | | 1.38% | 1.14% | 31.04 | 23.30 | 23.94 | 24.19 | 23.59 | 25.45 | 23.94 | 24.14 | 43.19 | 22.83 | 22.57 | 23.59 | 23.03 | 24.55 | 23.36 | 22.74 | | | | | | | | |
| Hot or cold packs therapy | 97010 | | 3.20% | 0.57% | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | 8.92 | 4.84 | 4.73 | 5.01 | 4.87 | 5.30 | 5.02 | 4.92 | | | | | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-5
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Chiropractic**

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|---------|---------|---------|---------|---------|-------------------------|---------|---------|---------|-------------|-------|--------------------------------------|---------|---------|---------|-------------|-----|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Chiropractic manipulation | 98941 | | 26.08% | 32.73% | \$59.87 | \$33.52 | \$34.08 | \$34.43 | \$36.02 | \$34.68 | \$59.85 | \$32.53 | \$48.16 | \$26.71 | \$21.12 | N/A | \$84.00 | \$47.31 | \$64.42 | \$66.74 | Not Covered | N/A |
| Chiropractic manipulation | 98940 | | 12.96% | 11.58% | 48.29 | 24.28 | 24.79 | 25.02 | 26.15 | 24.99 | 42.79 | 23.45 | 34.62 | 19.20 | 15.34 | N/A | 65.33 | 34.27 | 46.46 | 47.67 | Not Covered | N/A |
| Manual therapy | 97140 | | 6.49% | 6.20% | 69.72 | 26.98 | 27.67 | 27.96 | 29.35 | 27.88 | 44.91 | 24.62 | N/A | 20.59 | 16.45 | 27.46 | 74.53 | 37.32 | 50.79 | 50.14 | 45.93 | N/A |
| Chiropractic manipulation | 98942 | | 3.39% | 5.56% | 95.50 | 43.36 | 44.07 | 44.48 | 46.42 | 44.67 | 78.50 | 42.63 | 62.70 | 34.78 | 27.57 | N/A | 110.45 | 61.20 | 83.00 | 85.17 | Not Covered | N/A |
| Therapeutic exercises | 97110 | | 5.40% | 5.53% | 73.67 | 28.62 | 29.37 | 29.67 | 31.16 | 29.58 | 47.79 | 26.50 | 14.44 | 21.98 | 17.56 | 29.71 | 97.31 | 39.59 | 53.89 | 53.81 | 48.70 | N/A |
| Mechanical traction therapy | 97012 | | 8.86% | 4.76% | 48.41 | 14.78 | 15.10 | 15.26 | 16.02 | 15.31 | 25.01 | 13.67 | N/A | 11.41 | 9.11 | 15.04 | 55.51 | 20.44 | 27.87 | 27.52 | 24.90 | N/A |
| Electric stimulation therapy | 97014 | | 8.89% | 4.49% | 40.73 | 12.08 | 12.39 | 12.53 | 13.22 | 12.59 | 22.20 | N/A | N/A | 10.57 | 8.45 | N/A | 54.64 | 19.37 | 26.63 | 26.29 | 23.80 | N/A |
| Chiropractic manipulation | 98943 | | 4.31% | 3.55% | 62.79 | N/A | N/A | N/A | N/A | N/A | 39.64 | N/A | N/A | N/A | Not Covered | N/A | 56.00 | 32.02 | 43.98 | 45.13 | Not Covered | N/A |
| Office/outpatient visit, new | 99203 | | 0.98% | 3.35% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A |
| Office/outpatient visit, est | 99213 | | 1.45% | 3.29% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A |
| Neuromuscular reeducation | 97112 | | 3.02% | 3.23% | 75.67 | 29.90 | 30.73 | 31.05 | 32.65 | 30.94 | 49.59 | 27.25 | 14.44 | 22.81 | 18.23 | N/A | 95.24 | 41.36 | 56.37 | 55.65 | 50.91 | N/A |
| Therapeutic activities | 97530 | | 2.20% | 2.39% | 74.74 | 31.16 | 32.09 | 32.44 | 34.17 | 32.30 | 50.60 | 27.85 | 14.44 | 23.65 | 18.90 | N/A | 76.22 | 43.11 | 58.84 | 58.09 | 53.13 | N/A |
| Ultrasound therapy | 97035 | | 3.25% | 1.39% | 31.84 | 11.49 | 11.71 | 11.83 | 12.39 | 11.91 | 20.26 | 10.96 | 12.03 | N/A | 7.34 | 12.04 | 58.27 | 15.90 | 21.68 | 21.40 | 19.37 | N/A |
| Electrical stimulation | 97032 | | 2.32% | 1.38% | 42.72 | 17.02 | 17.48 | 17.68 | 18.63 | 17.69 | 27.52 | 15.26 | 12.03 | 12.80 | 10.23 | N/A | 59.29 | 23.54 | 32.21 | 31.80 | 28.78 | N/A |
| Office/outpatient visit, new | 99202 | | 0.57% | 1.30% | 121.20 | 67.88 | 69.71 | 70.61 | 74.76 | 71.13 | 109.84 | 59.02 | 93.90 | 51.75 | 39.31 | 69.70 | 171.90 | 136.85 | 129.45 | 142.89 | 116.21 | N/A |
| Office/outpatient visit, est | 99212 | | 0.90% | 1.25% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A |
| Massage therapy | 97124 | | 1.38% | 1.14% | 58.15 | 23.30 | 23.94 | 24.19 | 25.45 | 24.14 | 38.40 | N/A | N/A | 17.80 | 14.23 | N/A | 64.18 | 32.23 | 43.98 | 43.42 | 39.84 | N/A |
| Hot or cold packs therapy | 97010 | | 3.20% | 0.57% | 27.14 | Bundled | Bundled | Bundled | Bundled | Bundled | 7.93 | N/A | 6.03 | N/A | Bundled | N/A | 48.57 | 7.08 | N/A | 9.78 | Bundled | N/A |

(1) Medicare fees are from CY2011 schedule.

(2) TRICARE fees are from the current schedules effective 8/1/2010.

(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).

(4) Medicaid and workers' compensation fees are current as of 8/3/2011.

(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-5
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Chiropractic**

| | | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | |
|------------------------------|--------|-----------------------------------|-----------------|-----------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|-----------------|---------|---------|---------|---------|---------|---------|---------|---------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | |
| Description | HCP/CS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Chiropractic manipulation | 98941 | | 26.08% | 32.73% | \$66.49 | \$37.90 | \$48.24 | \$50.45 | \$38.89 | \$45.93 | \$70.00 | \$38.00 | \$52.00 | \$47.94 | \$38.00 | \$45.00 | \$75.00 | \$39.68 | \$53.21 | \$60.00 | \$44.68 | \$55.00 |
| Chiropractic manipulation | 98940 | | 12.96% | 11.58% | 53.90 | 30.39 | 37.49 | 39.00 | 31.33 | 39.10 | 55.00 | 28.27 | 38.49 | 34.68 | 29.50 | 40.00 | 60.00 | 35.00 | 38.49 | 49.50 | 34.68 | 45.00 |
| Manual therapy | 97140 | | 6.49% | 6.20% | 119.79 | 39.28 | 49.43 | 57.57 | 43.86 | 60.99 | 112.10 | 28.47 | 40.76 | 44.08 | 28.44 | 50.00 | 180.00 | 56.94 | 61.35 | 79.16 | 56.80 | 90.00 |
| Chiropractic manipulation | 98942 | | 3.39% | 5.56% | 75.77 | 46.95 | 55.64 | 61.98 | 46.82 | 50.20 | 80.00 | 45.07 | 56.25 | 56.25 | 49.50 | 50.00 | 85.00 | 51.56 | 69.00 | 75.00 | 54.75 | 50.17 |
| Therapeutic exercises | 97110 | | 5.40% | 5.53% | 115.96 | 54.40 | 66.31 | 75.29 | 54.26 | 81.03 | 90.00 | 50.58 | 44.16 | 70.00 | 56.22 | 80.00 | 163.80 | 82.17 | 88.32 | 112.18 | 76.22 | 120.00 |
| Mechanical traction therapy | 97012 | | 8.86% | 4.76% | 43.83 | 16.61 | 20.19 | 21.17 | 18.11 | 21.94 | 50.00 | 15.00 | 22.64 | 20.00 | 16.26 | 21.61 | 55.00 | 18.61 | 22.64 | 25.00 | 20.00 | 28.80 |
| Electric stimulation therapy | 97014 | | 8.89% | 4.49% | 43.78 | 14.91 | 17.73 | 19.75 | 15.85 | 23.47 | 47.00 | 14.53 | 20.00 | 18.87 | 14.63 | 25.00 | 50.00 | 15.00 | 20.95 | 20.07 | 15.54 | 29.00 |
| Chiropractic manipulation | 98943 | | 4.31% | 3.55% | 44.40 | 22.38 | 31.26 | 33.87 | 22.16 | 37.39 | 49.00 | 23.22 | 35.00 | 30.00 | 22.25 | 40.00 | 55.00 | 25.71 | 36.23 | 41.39 | 27.27 | 47.00 |
| Office/outpatient visit, new | 99203 | | 0.98% | 3.35% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Office/outpatient visit, est | 99213 | | 1.45% | 3.29% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Neuromuscular reeducation | 97112 | | 3.02% | 3.23% | 105.80 | 34.12 | 48.14 | 48.65 | 45.17 | 54.15 | 74.00 | 28.84 | 44.26 | 40.80 | 31.60 | 43.00 | 160.00 | 35.00 | 45.61 | 52.73 | 63.20 | 80.00 |
| Therapeutic activities | 97530 | | 2.20% | 2.39% | 115.09 | 45.26 | 109.02 | 78.92 | 62.43 | 47.93 | 96.00 | 31.87 | 92.84 | 58.00 | 62.56 | 43.00 | 180.00 | 60.00 | 185.68 | 120.00 | 96.00 | 55.00 |
| Ultrasound therapy | 97035 | | 3.25% | 1.39% | 43.54 | 14.27 | 17.48 | 18.59 | 13.73 | 27.93 | 47.50 | 12.83 | 18.12 | 17.33 | 12.80 | 26.00 | 55.00 | 15.00 | 18.12 | 21.05 | 12.80 | 35.00 |
| Electrical stimulation | 97032 | | 2.32% | 1.38% | 45.45 | 18.72 | 21.38 | 24.30 | 20.51 | 26.18 | 41.80 | 17.50 | 22.00 | 22.62 | 17.60 | 25.00 | 55.00 | 18.10 | 25.47 | 27.63 | 20.24 | 35.00 |
| Office/outpatient visit, new | 99202 | | 0.57% | 1.30% | 149.21 | 91.12 | 86.37 | 110.70 | 93.63 | 87.29 | 155.00 | 93.40 | 99.63 | 114.79 | 90.39 | 88.00 | 172.00 | 103.33 | 99.63 | 123.60 | 108.17 | 97.00 |
| Office/outpatient visit, est | 99212 | | 0.90% | 1.25% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Massage therapy | 97124 | | 1.38% | 1.14% | 103.50 | 64.13 | 29.78 | 49.36 | 63.51 | 40.90 | 96.00 | 50.56 | 35.00 | 35.00 | 59.54 | 30.00 | 160.00 | 114.00 | 35.10 | 74.00 | 81.40 | 45.00 |
| Hot or cold packs therapy | 97010 | | 3.20% | 0.57% | 27.10 | 8.14 | 9.48 | 9.59 | 9.04 | 16.42 | 32.00 | 4.98 | 6.21 | 8.50 | 5.51 | 15.00 | 40.00 | 10.93 | 12.00 | 10.08 | 12.90 | 21.50 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-5
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Chiropractic

| | | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|-------------------------------|-----------------|-----------------|----------|---------|----------|---------|---------|----------|----------|---------|----------|-----------------|---------|----------|----------|----------|----------|---------|---------|---------|----------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Chiropractic manipulation | 98941 | | 26.08% | 32.73% | \$54.98 | \$40.92 | \$48.97 | \$45.14 | \$51.67 | \$36.19 | \$50.00 | \$40.00 | \$50.00 | \$37.50 | \$53.00 | \$35.00 | \$70.00 | \$47.00 | \$55.00 | \$60.00 | \$60.00 | \$60.00 | \$40.00 |
| Chiropractic manipulation | 98940 | | 12.96% | 11.58% | 42.60 | 30.86 | 38.76 | 35.70 | 40.16 | 30.56 | 35.00 | 30.00 | 40.00 | 28.00 | 41.00 | 25.38 | 58.00 | 39.00 | 45.00 | 50.00 | 47.00 | 47.00 | 39.00 |
| Manual therapy | 97140 | | 6.49% | 6.20% | 61.95 | 35.68 | 47.24 | 49.82 | 45.33 | 38.27 | 64.00 | 35.51 | 46.25 | 50.00 | 45.00 | 40.00 | 70.00 | 44.00 | 55.00 | 57.75 | 50.00 | 50.00 | 50.00 |
| Chiropractic manipulation | 98942 | | 3.39% | 5.56% | 64.81 | 50.28 | 58.99 | 55.66 | 62.44 | 48.41 | 65.00 | 48.00 | 54.00 | 50.00 | 62.00 | 45.00 | 70.00 | 60.00 | 79.00 | 65.00 | 72.00 | 56.00 | 56.00 |
| Therapeutic exercises | 97110 | | 5.40% | 5.53% | 64.21 | 35.07 | 47.83 | 50.70 | 47.75 | 39.57 | 65.00 | 35.00 | 48.00 | 52.00 | 48.00 | 40.00 | 81.00 | 40.00 | 50.00 | 59.00 | 55.00 | 55.00 | 50.00 |
| Mechanical traction therapy | 97012 | | 8.86% | 4.76% | 33.70 | 20.38 | 32.95 | 26.94 | 26.33 | 25.37 | 36.00 | 20.00 | 28.80 | 28.00 | 26.00 | 30.00 | 40.00 | 25.00 | 40.00 | 35.00 | 30.00 | 30.00 | 30.00 |
| Electric stimulation therapy | 97014 | | 8.89% | 4.49% | 40.03 | 16.27 | 16.88 | 21.62 | 24.31 | 18.10 | 40.00 | 15.10 | 18.00 | 20.00 | 20.00 | 15.00 | 47.00 | 20.00 | 22.00 | 30.00 | 31.00 | 20.00 | 20.00 |
| Chiropractic manipulation | 98943 | | 4.31% | 3.55% | Not Cred | 25.04 | 30.52 | 25.25 | 35.69 | Not Cred | Not Cred | 25.00 | 30.00 | 20.00 | 38.00 | Not Cred | Not Cred | Not Cred | 35.00 | 45.00 | 47.00 | 41.00 | Not Cred |
| Office/outpatient visit, new | 99203 | | 0.98% | 3.35% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 | 175.00 |
| Office/outpatient visit, est | 99213 | | 1.45% | 3.29% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 | 106.70 |
| Neuromuscular reeducation | 97112 | | 3.02% | 3.23% | 71.63 | 36.38 | 43.64 | 48.83 | 47.00 | 41.48 | 89.00 | 35.00 | 48.00 | 45.00 | 49.00 | 40.00 | 89.00 | 40.00 | 50.50 | 63.00 | 52.02 | 50.00 | 50.00 |
| Therapeutic activities | 97530 | | 2.20% | 2.39% | 58.37 | 36.43 | 45.31 | 54.82 | 48.74 | 35.47 | 55.00 | 35.00 | 48.00 | 57.00 | 50.00 | 29.97 | 67.00 | 40.00 | 51.00 | 58.91 | 56.00 | 41.23 | 41.23 |
| Ultrasound therapy | 97035 | | 3.25% | 1.39% | 38.53 | 19.19 | 25.82 | 24.79 | 24.66 | 25.19 | 40.00 | 17.00 | 23.00 | 25.00 | 24.00 | 21.00 | 55.00 | 23.00 | 35.00 | 30.00 | 30.00 | 40.00 | 40.00 |
| Electrical stimulation | 97032 | | 2.32% | 1.38% | 38.89 | 25.68 | 28.05 | 29.19 | 26.62 | 25.98 | 35.00 | 26.00 | 28.00 | 31.00 | 25.50 | 15.11 | 50.00 | 30.00 | 29.00 | 36.00 | 30.00 | 54.57 | 54.57 |
| Office/outpatient visit, new | 99202 | | 0.57% | 1.30% | 140.22 | 88.61 | 96.09 | 119.68 | 110.48 | 93.11 | 150.00 | 91.00 | 105.00 | 127.00 | 112.00 | 98.10 | 177.00 | 115.00 | 120.00 | 151.30 | 131.00 | 116.00 | 116.00 |
| Office/outpatient visit, est | 99212 | | 0.90% | 1.25% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 | 74.00 |
| Massage therapy | 97124 | | 1.38% | 1.14% | 33.93 | 25.19 | 33.95 | 21.48 | 29.93 | 31.25 | 37.00 | 25.00 | 38.00 | 19.00 | 26.00 | 22.25 | 40.00 | 28.00 | 38.00 | 40.00 | 43.05 | 40.00 | 40.00 |
| Hot or cold packs therapy | 97010 | | 3.20% | 0.57% | 25.07 | 16.13 | Not Cred | 11.33 | 16.59 | 12.23 | 25.00 | 15.00 | Not Cred | 10.00 | 15.00 | 10.00 | 30.00 | 20.00 | Not Cred | 15.00 | 20.00 | 17.06 | 17.06 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-6
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
DME**

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | |
|-------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | Portland | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Cont airway pressure device | E0601 | RR | 7.34% | 7.80% | \$96.13 | \$101.00 | \$99.22 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$96.13 | \$101.00 | \$99.22 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 | \$101.00 |
| Oxygen concentrator | E1390 | RR | 4.00% | 7.64% | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 |
| Neg press wound therapy pump | E2402 | RR | 0.26% | 4.45% | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 |
| Pt insert ucb berkeley shell | L3000 | | 1.33% | 4.15% | 277.33 | 277.33 | 287.24 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 287.24 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 277.33 | 287.24 |
| Nasal application device | A7034 | NU | 3.28% | 3.85% | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 |
| Elec osteogen stim spinal | E0748 | | 0.08% | 3.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Pneumati walking boot prefab | L4360 | | 0.97% | 2.76% | 275.94 | 312.25 | 252.72 | 312.25 | 312.25 | 312.25 | 312.25 | 312.25 | 252.72 | 275.94 | 312.25 | 252.72 | 312.25 | 312.25 | 312.25 | 312.25 | 312.25 | 312.25 | 312.25 | 252.72 |
| Tens four lead | E0730 | RR | 0.61% | 2.52% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| CPAP full face mask | A7030 | NU | 1.14% | 2.14% | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 |
| RAD w/o backup non-inv intfc | E0470 | RR | 0.82% | 2.00% | 224.92 | 231.99 | 231.99 | 227.21 | 227.21 | 231.99 | 231.99 | 231.99 | 224.92 | 231.99 | 231.99 | 227.21 | 227.21 | 231.99 | 231.99 | 231.99 | 231.99 | 231.99 | 231.99 | 231.99 |
| Foot longitud/metatarsal sup | L3020 | | 0.92% | 1.81% | 175.17 | 175.17 | 181.42 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 181.42 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 175.17 | 181.42 |
| KO adj jint pos rigid support | L1832 | | 0.25% | 1.64% | 599.93 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 599.93 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 |
| Pos airway pressure tubing | A7037 | NU | 3.85% | 1.56% | 32.69 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 32.69 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 |
| Pneum compres w/cal pressure | E0652 | | 0.03% | 1.48% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Pos airway press headgear | A7035 | NU | 3.77% | 1.43% | 35.06 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.06 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 |
| Elec osteogen stim not spine | E0747 | | 0.03% | 1.28% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Osteogen ultrasound stimltor | E0760 | | 0.03% | 1.15% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Blood glucose/reagent strips | A4253 | NU | 2.72% | 1.13% | 37.87 | 36.40 | 36.38 | 38.75 | 38.75 | 36.49 | 36.49 | 38.76 | 37.87 | 36.40 | 36.38 | 38.75 | 38.75 | 36.49 | 36.49 | 36.49 | 36.49 | 36.49 | 36.49 | 38.76 |
| Humidifier heated used w PAP | E0562 | RR | 3.28% | 0.98% | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 |
| Wrist cock-up non-molded | L3908 | | 1.36% | 0.85% | 86.59 | 66.12 | 49.59 | 66.12 | 66.12 | 66.12 | 66.12 | 49.59 | 86.59 | 66.12 | 49.59 | 66.12 | 66.12 | 66.12 | 66.12 | 66.12 | 66.12 | 66.12 | 66.12 | 49.59 |
| Portable gaseous O2 | E0431 | RR | 2.02% | 0.64% | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 |
| Nebulizer with compression | E0570 | RR | 1.90% | 0.35% | 16.90 | 16.89 | 16.90 | 16.90 | 16.90 | 16.89 | 16.89 | 16.90 | 16.90 | 16.89 | 16.89 | 16.90 | 16.90 | 16.90 | 16.90 | 16.90 | 16.89 | 16.89 | 16.89 | 16.90 |
| Lancets per box | A4259 | | 1.81% | 0.24% | 12.66 | 11.41 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.66 | 11.41 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 | 12.65 |
| Filter, non disposable w pap | A7039 | NU | 1.55% | 0.22% | 11.23 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 11.23 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 |
| Pos airway pressure filter | A7038 | NU | 3.98% | 0.20% | 2.75 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 2.75 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 |
| Electrodes, pair | A4556 | | 1.36% | 0.18% | 10.58 | 10.83 | 12.74 | 12.43 | 12.43 | 10.83 | 10.83 | 12.74 | 10.58 | 10.83 | 12.74 | 12.43 | 12.43 | 10.83 | 10.83 | 10.83 | 10.83 | 10.83 | 10.83 | 12.74 |
| Infus insulin pump non needl | A4230 | | 1.63% | 0.13% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Surgical trays | A4550 | | 2.07% | 0.03% | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled |

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- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
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For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-6
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
DME**

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|-------------------|------------|----------|----------|----------|----------|----------|----------|-----------|-------------------------|-----|----------|-------------|---------|--------|--------------------------------------|----------|-------------|-----------|-----|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Cont airway pressure device | E0601 | RR | 7.34% | 7.80% | \$323.38 | \$101.00 | \$99.22 | \$101.00 | \$101.00 | \$101.00 | N/A | N/A | N/A | \$106.68 | \$101.10 | \$90.90 | 271.24 | Unknown | \$119.06 | 85% of MSRP | \$164.94 | N/A | |
| Oxygen concentrator | E1390 | RR | 4.00% | 7.64% | 664.17 | 173.31 | 173.31 | 173.31 | 173.31 | 173.31 | 200.40 | N/A | N/A | 185.73 | 173.17 | 155.98 | 556.30 | Unknown | 207.97 | 85% of MSRP | 173.31 | N/A | |
| Neg press wound therapy pump | E2402 | RR | 0.26% | 4.45% | 4,074.37 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | 1,551.85 | N/A | N/A | N/A | 1,639.22 | N/A | N/A | BR | Unknown | 1,862.22 | 85% of MSRP | 2,534.10 | N/A | |
| Ft insert ucw berkeley shell | L3000 | | 1.33% | 4.15% | 540.34 | 277.33 | 287.24 | 277.33 | 277.33 | 287.24 | 246.83 | 220.18 | N/A | 235.72 | 277.61 | 246.46 | 407.51 | Unknown | 344.69 | 85% of MSRP | 332.80 | N/A | |
| Nasal application device | A7034 | NU | 3.28% | 3.85% | 279.24 | 106.35 | 106.35 | 106.35 | 106.35 | 106.35 | 117.64 | 76.66 | N/A | 112.35 | 106.46 | 117.64 | BR | Unknown | 127.62 | 85% of MSRP | N/A | N/A | |
| Elec osteogen stim spinal | E0748 | | 0.08% | 3.43% | N/A | N/A | N/A | N/A | N/A | N/A | 3,826.27 | 3,342.55 | N/A | N/A | N/A | N/A | BR | Unknown | N/A | 85% of MSRP | N/A | N/A | |
| Pneumati walking boot prefab | L4360 | | 0.97% | 2.76% | 532.15 | 312.25 | 252.72 | 312.25 | 312.25 | 252.72 | 245.59 | 259.85 | N/A | 265.39 | 312.57 | N/A | 401.32 | Unknown | 303.26 | 85% of MSRP | 374.70 | N/A | |
| Tens four lead | E0730 | RR | 0.61% | 2.52% | 211.84 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 32.60 | N/A | N/A | 177.58 | Unknown | N/A | 85% of MSRP | N/A | N/A | |
| CPAP full face mask | A7030 | NU | 1.14% | 2.14% | 447.78 | 170.55 | 170.55 | 170.55 | 170.55 | 170.55 | 188.64 | 188.64 | N/A | 180.15 | 170.72 | 188.64 | BR | Unknown | 204.66 | 85% of MSRP | N/A | N/A | |
| RAD w/o backup non-inv intfc | E0470 | RR | 0.82% | 2.00% | 590.55 | 231.99 | 231.99 | 227.21 | 231.99 | 231.99 | 2,487.90 | N/A | N/A | 240.00 | 232.22 | N/A | BR | Unknown | 278.39 | 85% of MSRP | 378.83 | N/A | |
| Foot longitud/metatarsal sup | L3020 | | 0.92% | 1.81% | 532.15 | 175.17 | 181.42 | 175.17 | 175.17 | 181.42 | 155.91 | 139.06 | N/A | 148.89 | N/A | N/A | 401.32 | Unknown | 217.70 | 85% of MSRP | 210.20 | N/A | |
| KO adj jnt pos rigid support | L1832 | | 0.25% | 1.64% | 1,316.05 | 514.22 | 514.22 | 514.22 | 514.22 | 514.22 | 533.93 | 427.92 | N/A | 437.06 | N/A | N/A | 992.94 | Unknown | 617.06 | 85% of MSRP | 617.06 | N/A | |
| Pos airway pressure tubing | A7037 | NU | 3.85% | 1.56% | 85.83 | 37.08 | 37.08 | 37.08 | 37.08 | 37.08 | 36.16 | 39.12 | N/A | 39.17 | 37.12 | 41.02 | BR | Unknown | 44.50 | 85% of MSRP | N/A | N/A | |
| Pneum compres w/cal pressure | E0652 | | 0.03% | 1.48% | N/A | N/A | N/A | N/A | N/A | N/A | 6,172.73 | 4,311.06 | N/A | N/A | N/A | N/A | N/A | Unknown | N/A | 85% of MSRP | N/A | N/A | |
| Pos airway press headgear | A7035 | NU | 3.77% | 1.43% | 92.08 | 35.93 | 35.93 | 35.93 | 35.93 | 35.93 | 38.79 | 37.92 | N/A | 37.96 | 35.97 | 39.75 | BR | Unknown | 43.12 | 85% of MSRP | N/A | N/A | |
| Elec osteogen stim not spine | E0747 | | 0.03% | 1.28% | 8,870.56 | N/A | N/A | N/A | N/A | N/A | 3,826.27 | 3,364.35 | N/A | N/A | N/A | N/A | N/A | Unknown | N/A | 85% of MSRP | N/A | N/A | |
| Osteogen ultrasound stimtor | E0760 | | 0.03% | 1.15% | N/A | N/A | N/A | N/A | N/A | N/A | 3,148.10 | 2,778.50 | N/A | N/A | N/A | N/A | BR | Unknown | N/A | 85% of MSRP | N/A | N/A | |
| Blood glucose/reagent strips | A4253 | NU | 2.72% | 1.13% | 85.69 | 36.40 | 36.38 | 38.75 | 36.49 | 38.76 | 36.10 | 34.70 | N/A | 35.28 | N/A | 36.95 | 81.37 | Unknown | 43.66 | 85% of MSRP | N/A | N/A | |
| Humidifier heated used w PAP | E0562 | RR | 3.28% | 0.98% | 71.47 | 27.22 | 27.22 | 27.22 | 27.22 | 27.22 | N/A | N/A | N/A | 28.76 | N/A | 24.51 | BR | Unknown | 32.66 | 85% of MSRP | N/A | N/A | |
| Wrist cock-up non-molded | L3908 | | 1.36% | 0.85% | 109.50 | 66.12 | 49.59 | 66.12 | 66.12 | 49.59 | 77.07 | 55.02 | N/A | 56.20 | 66.19 | 47.28 | 82.74 | Unknown | 59.51 | 85% of MSRP | 79.34 | N/A | |
| Portable gaseous O2 | E0431 | RR | 2.02% | 0.64% | 113.59 | 28.74 | 28.74 | 28.74 | 28.74 | 28.74 | 32.08 | N/A | N/A | 30.64 | 28.77 | 25.87 | 95.40 | Unknown | 34.49 | 85% of MSRP | 28.74 | N/A | |
| Nebulizer with compression | E0570 | RR | 1.90% | 0.35% | 49.12 | 16.89 | 16.90 | 16.90 | 16.89 | 16.90 | N/A | N/A | N/A | 15.39 | N/A | 15.21 | 41.38 | Unknown | 20.28 | 85% of MSRP | By Report | N/A | |
| Lancets per box | A4259 | | 1.81% | 0.24% | 21.49 | 11.41 | 12.65 | 12.65 | 12.65 | 12.65 | 12.07 | 10.38 | N/A | N/A | N/A | 12.06 | 18.01 | Unknown | 15.18 | 85% of MSRP | Bundled | N/A | |
| Filter, non disposable w pap | A7039 | NU | 1.55% | 0.22% | 29.48 | 13.86 | 13.86 | 13.86 | 13.86 | 13.86 | 12.42 | 14.62 | N/A | 14.64 | 13.87 | 15.33 | BR | Unknown | 16.63 | 85% of MSRP | N/A | N/A | |
| Pos airway pressure filter | A7038 | NU | 3.98% | 0.20% | 7.22 | 4.88 | 4.88 | 4.88 | 4.88 | 4.88 | 3.04 | 5.39 | N/A | 5.15 | 4.88 | 4.39 | BR | Unknown | 5.86 | 85% of MSRP | N/A | N/A | |
| Electrodes, pair | A4556 | | 1.36% | 0.18% | 25.58 | 10.83 | 12.74 | 12.43 | 10.83 | 12.74 | 10.09 | 9.84 | N/A | N/A | Not Covered | 12.14 | 20.78 | Unknown | 15.29 | 85% of MSRP | Bundled | N/A | |
| Infus insulin pump non needl | A4230 | | 1.63% | 0.13% | N/A | N/A | N/A | N/A | N/A | N/A | By Report | N/A | N/A | N/A | N/A | 0.80 | BR | Unknown | N/A | 85% of MSRP | By Report | N/A | |
| Surgical trays | A4550 | | 2.07% | 0.03% | 97.22 | Bundled | Bundled | Bundled | Bundled | Bundled | 15.21 | 16.98 | N/A | 26.01 | N/A | 30.00 | 80.35 | Unknown | N/A | 85% of MSRP | Bundled | N/A | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-6
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
DME

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Cont airway pressure device | E0601 | RR | 7.34% | 7.80% | \$114.07 | \$92.27 | \$133.38 | \$103.86 | \$95.35 | \$119.23 | \$106.33 | \$85.93 | \$120.73 | \$104.33 | \$94.00 | \$122.88 | \$133.00 | \$100.10 | \$120.73 | \$122.25 | \$111.71 | \$122.88 |
| Oxygen concentrator | E1390 | RR | 4.00% | 7.64% | 286.74 | 195.86 | 215.55 | 174.67 | 182.73 | 204.58 | 346.34 | 175.79 | 219.21 | 158.21 | 154.07 | 215.00 | 350.00 | 261.50 | 219.21 | 200.00 | 245.15 | 219.21 |
| Neg press wound therapy pump | E2402 | RR | 0.26% | 4.45% | 1,755.94 | 1,477.99 | 1,811.05 | 1,135.70 | 1,217.70 | 1,117.10 | 2,057.50 | 1,504.20 | 2,444.00 | 112.00 | 119.00 | 134.00 | 3,495.00 | 2,910.00 | 3,120.00 | 2,912.00 | 2,790.00 | 2,814.00 |
| Ft insert ucb berkeley shell | L3000 | | 1.33% | 4.15% | 255.65 | 198.54 | 201.56 | 187.15 | 204.00 | 172.57 | 220.00 | 202.30 | 182.50 | 188.87 | 216.00 | 162.00 | 230.00 | 225.00 | 240.00 | 225.00 | 240.00 | 209.76 |
| Nasal application device | A7034 | NU | 3.28% | 3.85% | 135.48 | 107.83 | 121.13 | 101.28 | 99.13 | 120.13 | 119.00 | 108.59 | 129.40 | 106.46 | 99.99 | 129.40 | 198.00 | 118.00 | 129.40 | 117.35 | 111.76 | 129.40 |
| Elec osteogen stim spinal | E0748 | | 0.08% | 3.43% | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred |
| Pneumati walking boot prefab | L4360 | | 0.97% | 2.76% | 266.49 | 242.98 | 189.98 | 262.14 | 228.16 | 183.48 | 275.00 | 245.00 | 220.00 | 285.00 | 253.03 | 175.00 | 295.39 | 315.00 | 265.01 | 312.57 | 281.31 | 258.05 |
| Tens four lead | E0730 | RR | 0.61% | 2.52% | 44.30 | 40.87 | 41.44 | 51.86 | 74.43 | 42.07 | 28.95 | 34.00 | 41.70 | 45.00 | 81.25 | 33.99 | 47.65 | 42.30 | 42.30 | 45.00 | 106.25 | 52.99 |
| CPAP full face mask | A7030 | NU | 1.14% | 2.14% | 219.71 | 175.32 | 196.36 | 173.21 | 169.90 | 182.23 | 200.00 | 174.13 | 207.50 | 179.21 | 176.78 | 207.50 | 265.63 | 195.15 | 207.50 | 188.20 | 198.00 | 207.50 |
| RAD w/o backup non-inv intfc | E0470 | RR | 0.82% | 2.00% | 204.53 | 192.74 | 282.22 | 226.58 | 220.52 | 247.71 | 223.22 | 201.03 | 282.26 | 204.70 | 234.66 | 282.26 | 279.50 | 209.70 | 282.26 | 266.94 | 253.55 | 282.26 |
| Foot longitud/metatarsal sup | L3020 | | 0.92% | 1.81% | 197.81 | 160.63 | 162.37 | 160.18 | 153.11 | 150.55 | 200.00 | 174.50 | 165.00 | 167.00 | 152.84 | 140.13 | 225.00 | 187.50 | 190.25 | 180.00 | 167.00 | 190.25 |
| KO adj jnt pos rigid support | L1832 | | 0.25% | 1.64% | 522.25 | 362.94 | Not Cred | 479.08 | 379.65 | 226.69 | 525.00 | 420.78 | Not Cred | 496.89 | 416.69 | 182.00 | 857.90 | 514.73 | Not Cred | 514.73 | 463.26 | 360.00 |
| Pos airway pressure tubing | A7037 | NU | 3.85% | 1.56% | 45.39 | 38.92 | 38.14 | 35.70 | 34.92 | 41.71 | 48.00 | 35.26 | 45.12 | 37.12 | 38.45 | 45.12 | 52.00 | 37.86 | 45.12 | 40.90 | 41.02 | 45.12 |
| Pneum compres w/cal pressure | E0652 | | 0.03% | 1.48% | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data |
| Pos airway press headgear | A7035 | NU | 3.77% | 1.43% | 47.45 | 37.26 | 42.15 | 37.11 | 35.65 | 41.43 | 45.00 | 36.69 | 43.73 | 38.00 | 37.37 | 43.73 | 60.00 | 39.50 | 43.73 | 41.50 | 39.75 | 43.73 |
| Elec osteogen stim not spine | E0747 | | 0.03% | 1.28% | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred |
| Osteogen ultrasound stimtor | E0760 | | 0.03% | 1.15% | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data |
| Blood glucose/reagent strips | A4253 | NU | 2.72% | 1.13% | 198.54 | 157.73 | 113.22 | 191.27 | 214.49 | 166.49 | 108.00 | 126.24 | 69.25 | 156.00 | 174.43 | 139.64 | 246.52 | 217.95 | 166.98 | 270.00 | 328.80 | 180.52 |
| Humidifier heated used w PAP | E0562 | RR | 3.28% | 0.98% | 33.30 | 29.19 | 32.78 | 28.07 | 27.89 | 32.34 | 35.00 | 23.16 | 33.12 | 29.45 | 28.00 | 33.12 | 40.00 | 31.34 | 33.12 | 30.11 | 30.00 | 33.12 |
| Wrist cock-up non-molded | L3908 | | 1.36% | 0.85% | 48.00 | 44.20 | 46.30 | 39.64 | 42.46 | 37.47 | 44.00 | 45.36 | 52.01 | 31.49 | 47.28 | 40.50 | 62.00 | 65.00 | 52.01 | 65.00 | 59.57 | 50.32 |
| Portable gaseous O2 | E0431 | RR | 2.02% | 0.64% | 67.40 | 34.29 | 34.63 | 36.68 | 52.83 | 36.79 | 75.00 | 28.77 | 34.97 | 25.89 | 38.53 | 34.97 | 100.00 | 43.66 | 34.97 | 35.10 | 88.50 | 34.97 |
| Nebulizer with compression | E0570 | RR | 1.90% | 0.35% | 33.25 | 17.71 | 17.98 | 20.84 | 20.48 | 20.33 | 40.00 | 14.37 | 17.72 | 17.01 | 12.08 | 17.72 | 49.50 | 22.50 | 17.72 | 23.50 | 18.75 | 17.72 |
| Lancets per box | A4259 | | 1.81% | 0.24% | Not Cred | 42.65 | 13.01 | 29.17 | 30.11 | 38.49 | Not Cred | 20.44 | 11.50 | 22.78 | 21.82 | 21.82 | Not Cred | 42.10 | 16.00 | 36.84 | 45.56 | 60.64 |
| Filter, non disposable w pap | A7039 | NU | 1.55% | 0.22% | 18.36 | 13.88 | 14.34 | 15.10 | 13.75 | 15.42 | 20.00 | 12.97 | 16.86 | 14.56 | 13.87 | 16.86 | 24.00 | 14.14 | 16.86 | 17.10 | 15.33 | 16.86 |
| Pos airway pressure filter | A7038 | NU | 3.98% | 0.20% | 6.79 | 5.32 | 6.79 | 5.42 | 5.50 | 5.79 | 6.00 | 4.77 | 5.93 | 5.00 | 5.07 | 5.93 | 10.00 | 5.21 | 5.93 | 5.99 | 6.57 | 5.93 |
| Electrodes, pair | A4556 | | 1.36% | 0.18% | 61.37 | 51.85 | 152.21 | 68.90 | 51.86 | 66.02 | 30.00 | 18.00 | 45.00 | 40.00 | 39.04 | 12.00 | 51.15 | 40.00 | 382.08 | 89.60 | 61.39 | 58.24 |
| Infus insulin pump non needl | A4230 | | 1.63% | 0.13% | 241.90 | 238.66 | 243.32 | 264.18 | 239.55 | 272.95 | 125.20 | 167.20 | 116.00 | 168.96 | 116.00 | 185.16 | 399.04 | 396.00 | 464.00 | 390.00 | 390.00 | 432.00 |
| Surgical trays | A4550 | | 2.07% | 0.03% | 86.92 | 77.75 | Not Cred | 43.73 | 31.59 | 45.44 | 80.00 | 46.00 | Not Cred | 30.72 | 33.60 | 45.00 | 125.25 | 100.00 | Not Cred | 49.60 | 33.60 | 75.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-6
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
DME

| | | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | |
|-------------------------------|-------|-------------------------------|-----------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Cont airway pressure device | E0601 | RR | 7.34% | 7.80% | \$180.50 | \$175.50 | \$134.84 | \$168.53 | \$180.68 | \$213.27 | \$140.00 | \$122.25 | \$135.00 | \$150.00 | \$167.56 | \$250.00 | \$195.00 | \$220.00 | \$140.00 | \$203.85 | \$220.00 | \$256.24 |
| Oxygen concentrator | E1390 | RR | 4.00% | 7.64% | 391.02 | 409.29 | 306.23 | 449.10 | 474.16 | 409.59 | 375.00 | 410.00 | 300.00 | 453.24 | 453.24 | 400.00 | 395.00 | 453.24 | 332.80 | 550.00 | 550.00 | 410.00 |
| Neg press wound therapy pump | E2402 | RR | 0.26% | 4.45% | 3,870.00 | 3,828.09 | Not Cred | 3,871.37 | 3,835.07 | Not Cred | 3,870.00 | 3,870.00 | Not Cred | 3,870.00 | 3,870.00 | Not Cred | 3,870.00 | 3,870.00 | Not Cred | 3,870.00 | 3,870.00 | Not Cred |
| Ft insert ucw berkeley shell | L3000 | | 1.33% | 4.15% | No Data | No Data | No Data | Not Cred | 251.00 | Not Cred | No Data | No Data | No Data | Not Cred | 200.00 | Not Cred | No Data | No Data | No Data | Not Cred | 390.00 | Not Cred |
| Nasal application device | A7034 | NU | 3.28% | 3.85% | 164.27 | 161.69 | 137.83 | 172.76 | 175.44 | 164.95 | 125.00 | 147.05 | 132.00 | 169.04 | 140.59 | 140.00 | 162.50 | 188.00 | 147.05 | 176.50 | 200.00 | 147.05 |
| Elec osteogen stim spinal | E0748 | | 0.08% | 3.43% | No Data | Not Cred | Not Cred | 5,122.50 | Not Cred | Not Cred | No Data | Not Cred | Not Cred | 5,122.50 | Not Cred | Not Cred | No Data | Not Cred | Not Cred | 5,250.00 | Not Cred | Not Cred |
| Pneumati walking boot prefab | L4360 | | 0.97% | 2.76% | Not Cred | 293.99 | Not Cred | 298.12 | 297.70 | Not Cred | Not Cred | 292.50 | Not Cred | 312.57 | 297.00 | Not Cred | Not Cred | 385.00 | Not Cred | 359.77 | 366.00 | Not Cred |
| Tens four lead | E0730 | RR | 0.61% | 2.52% | Not Cred | 43.28 | Not Cred | 36.27 | 49.56 | Not Cred | Not Cred | 38.91 | Not Cred | 34.13 | 40.58 | Not Cred | Not Cred | 40.00 | Not Cred | 35.84 | 42.30 | Not Cred |
| CPAP full face mask | A7030 | NU | 1.14% | 2.14% | 204.81 | 294.30 | 220.68 | 269.19 | 294.01 | 270.43 | 200.00 | 260.00 | 210.00 | 228.34 | 280.54 | 235.35 | 200.00 | 271.00 | 240.28 | 282.96 | 284.70 | 314.00 |
| RAD w/o backup non-inv intfc | E0470 | RR | 0.82% | 2.00% | 380.15 | 377.71 | 325.63 | 358.00 | 416.79 | 391.09 | 279.50 | 378.59 | 310.00 | 378.59 | 408.49 | 334.21 | 574.00 | 378.59 | 390.00 | 384.90 | 439.00 | 440.00 |
| Foot longitud/metatarsal sup | L3020 | | 0.92% | 1.81% | 213.78 | No Data | Not Cred | Not Cred | 210.30 | Not Cred | 200.18 | No Data | Not Cred | Not Cred | 200.00 | Not Cred | 288.00 | No Data | Not Cred | Not Cred | 236.72 | Not Cred |
| KO adj jint pos rigid support | L1832 | | 0.25% | 1.64% | Not Cred | Not Cred | Not Cred | 570.02 | 518.54 | Not Cred | Not Cred | Not Cred | Not Cred | 550.00 | 550.00 | Not Cred | Not Cred | Not Cred | Not Cred | 690.00 | 590.00 | Not Cred |
| Pos airway pressure tubing | A7037 | NU | 3.85% | 1.56% | 52.90 | 51.74 | 46.92 | 53.54 | 56.87 | 60.55 | 48.00 | 49.00 | 48.78 | 52.55 | 56.75 | 65.32 | 55.98 | 52.55 | 52.19 | 55.00 | 60.00 | 65.32 |
| Pneum compres w/cal pressure | E0652 | | 0.03% | 1.48% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Pos airway press headgear | A7035 | NU | 3.77% | 1.43% | 63.91 | 58.28 | 49.08 | 57.90 | 62.88 | 59.13 | 60.00 | 50.00 | 49.69 | 49.38 | 53.57 | 53.45 | 76.45 | 51.00 | 50.00 | 60.00 | 60.00 | 55.00 |
| Elec osteogen stim not spine | E0747 | | 0.03% | 1.28% | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data |
| Osteogen ultrasound stimtor | E0760 | | 0.03% | 1.15% | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data | Not Cred | No Data |
| Blood glucose/reagent strips | A4253 | NU | 2.72% | 1.13% | 60.31 | 50.78 | 60.34 | 52.51 | 54.44 | 56.52 | 57.99 | 53.49 | 57.99 | 53.50 | 55.50 | 57.05 | 75.76 | 60.23 | 66.94 | 60.00 | 61.25 | 62.94 |
| Humidifier heated used w PAP | E0562 | RR | 3.28% | 0.98% | 40.35 | 57.20 | 38.73 | 55.07 | 65.28 | 41.33 | 40.00 | 60.00 | 35.50 | 40.00 | 50.00 | 41.22 | 40.00 | 60.00 | 45.00 | 50.00 | 65.00 | 42.66 |
| Wrist cock-up non-molded | L3908 | | 1.36% | 0.85% | 49.25 | 52.68 | 52.09 | 53.02 | 55.30 | 40.27 | 48.50 | 63.03 | 52.00 | 65.00 | 65.00 | 45.00 | 65.00 | 72.48 | 63.50 | 75.64 | 71.00 | 50.00 |
| Portable gaseous O2 | E0431 | RR | 2.02% | 0.64% | 90.64 | 78.74 | 49.88 | 108.63 | 122.14 | 66.74 | 75.00 | 57.00 | 48.00 | 114.74 | 114.74 | 51.25 | 100.00 | 114.74 | 51.00 | 114.74 | 160.00 | 64.00 |
| Nebulizer with compression | E0570 | RR | 1.90% | 0.35% | 42.84 | 49.21 | 40.05 | 63.38 | 61.33 | 54.18 | 49.50 | 30.00 | 40.00 | 65.95 | 65.95 | 55.70 | 49.50 | 65.95 | 45.00 | 65.95 | 92.00 | 55.70 |
| Lancets per box | A4259 | | 1.81% | 0.24% | 16.55 | 17.54 | 19.27 | 17.52 | 17.10 | 18.25 | 16.40 | 17.50 | 15.95 | 16.50 | 16.40 | 18.00 | 18.00 | 20.00 | 18.00 | 20.00 | 19.03 | 20.00 |
| Filter, non disposable w pap | A7039 | NU | 1.55% | 0.22% | 21.20 | 25.66 | 17.57 | 24.87 | 25.60 | 21.73 | 20.00 | 31.66 | 18.00 | 24.20 | 24.20 | 21.37 | 24.20 | 31.66 | 19.50 | 31.66 | 34.28 | 21.37 |
| Pos airway pressure filter | A7038 | NU | 3.98% | 0.20% | 8.62 | 6.82 | 5.40 | 7.74 | 8.58 | 6.84 | 6.00 | 7.59 | 6.00 | 7.59 | 8.21 | 6.53 | 9.20 | 7.59 | 7.00 | 8.00 | 8.31 | 6.74 |
| Electrodes, pair | A4556 | | 1.36% | 0.18% | No Data | Not Cred | No Data | 12.18 | 15.16 | Not Cred | No Data | Not Cred | No Data | 14.00 | 14.00 | Not Cred | No Data | Not Cred | No Data | 16.00 | 28.00 | Not Cred |
| Infus insulin pump non needl | A4230 | | 1.63% | 0.13% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Surgical trays | A4550 | | 2.07% | 0.03% | 74.64 | 87.16 | Not Cred | 39.51 | 45.86 | 33.92 | 61.00 | 56.00 | Not Cred | 38.00 | 37.00 | 22.27 | 129.00 | 105.00 | Not Cred | 50.00 | 60.00 | 61.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-7
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
ENT

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|---------|---------|---------|---------|---------|---------|---------|---------|------------------------|---------|---------|---------|---------|---------|---------|---------|---------|----|----|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 12.44% | 9.11% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | | | | |
| Office consultation | 99243 | | 4.29% | 6.37% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | | |
| Office/outpatient visit, est | 99214 | | 3.80% | 4.18% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | |
| Resect inferior turbinate | 30140 | | 0.72% | 3.98% | 516.50 | 410.39 | 425.52 | 432.00 | 417.36 | 462.15 | 427.69 | 434.67 | 689.77 | 386.63 | 379.43 | 405.24 | 391.53 | 428.13 | 400.55 | 385.27 | | | | |
| Antigen therapy services | 95165 | | 1.89% | 3.79% | 14.41 | 11.84 | 12.39 | 12.58 | 12.09 | 13.54 | 12.40 | 12.59 | 19.05 | 11.10 | 10.85 | 11.75 | 11.27 | 12.51 | 11.58 | 11.03 | | | | |
| Office consultation | 99244 | | 1.71% | 3.73% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | |
| Nasal endoscopy, dx | 31231 | | 1.77% | 3.70% | 220.84 | 179.72 | 187.70 | 190.55 | 183.31 | 204.35 | 187.65 | 190.14 | 291.87 | 168.11 | 164.91 | 177.69 | 170.80 | 188.30 | 174.74 | 166.45 | | | | |
| Repair of nasal septum | 30520 | | 0.56% | 3.65% | 755.89 | 582.79 | 598.93 | 607.91 | 590.55 | 647.84 | 605.50 | 617.24 | 1,026.21 | 556.58 | 546.67 | 577.37 | 561.44 | 607.33 | 574.07 | 558.58 | | | | |
| Create eardrum opening | 69436 | | 1.51% | 3.41% | 203.14 | 155.37 | 159.27 | 161.66 | 157.28 | 172.10 | 161.29 | 164.57 | 279.57 | 150.53 | 147.87 | 155.79 | 151.71 | 163.71 | 155.10 | 151.31 | | | | |
| Office/outpatient visit, new | 99203 | | 3.05% | 3.40% | 129.99 | 98.07 | 100.55 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | |
| Nasal/sinus endoscopy, surg | 31237 | | 0.71% | 2.88% | 391.02 | 307.92 | 318.43 | 323.27 | 312.82 | 345.45 | 320.62 | 326.17 | 528.74 | 293.70 | 288.28 | 306.97 | 297.10 | 323.94 | 303.92 | 293.27 | | | | |
| Removal of ethmoid sinus | 31255 | | 0.44% | 2.45% | 530.52 | 388.77 | 393.40 | 399.07 | 391.46 | 422.13 | 401.59 | 411.31 | 749.46 | 386.41 | 380.12 | 394.22 | 387.37 | 411.60 | 395.65 | 392.02 | | | | |
| Diagnostic laryngoscopy | 31575 | | 1.64% | 2.17% | 139.21 | 109.23 | 112.95 | 114.60 | 110.95 | 122.28 | 113.58 | 115.39 | 188.90 | 104.55 | 102.70 | 109.20 | 105.75 | 115.08 | 108.07 | 104.30 | | | | |
| Comprehensive hearing test | 92557 | | 3.11% | 2.02% | 52.02 | 38.91 | 39.87 | 40.33 | 39.36 | 42.49 | 40.03 | 40.48 | 75.26 | 39.90 | 39.41 | 41.23 | 40.25 | 42.96 | 40.85 | 39.76 | | | | |
| Remove tonsils and adenoids | 42820 | | 0.58% | 1.93% | 373.66 | 280.56 | 286.08 | 290.27 | 283.38 | 308.12 | 290.58 | 296.87 | 519.27 | 274.26 | 269.62 | 282.09 | 275.78 | 295.56 | 281.78 | 276.72 | | | | |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.87% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | |
| Office/outpatient visit, est | 99212 | | 3.76% | 1.71% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | |
| Endoscopy, maxillary sinus | 31267 | | 0.35% | 1.51% | 419.84 | 308.16 | 311.99 | 316.49 | 310.36 | 334.86 | 318.38 | 326.03 | 592.63 | 306.05 | 301.05 | 312.41 | 306.88 | 326.27 | 313.45 | 310.39 | | | | |
| Sinus endoscopy, surgical | 31276 | | 0.20% | 1.41% | 670.04 | 490.39 | 495.93 | 503.13 | 493.68 | 532.25 | 506.61 | 519.13 | 947.73 | 488.06 | 480.05 | 497.67 | 489.16 | 519.62 | 499.70 | 495.45 | | | | |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.40% | 1.24% | 77.01 | 55.08 | 55.81 | 56.34 | 55.44 | 58.75 | 56.20 | 56.83 | 112.69 | 57.08 | 56.55 | 58.16 | 57.31 | 60.07 | 58.00 | 57.27 | | | | |
| Tympanometry | 92567 | | 4.14% | 1.10% | 19.32 | 14.68 | 15.10 | 15.28 | 14.87 | 16.15 | 15.14 | 15.31 | 28.21 | 15.22 | 15.00 | 15.80 | 15.37 | 16.54 | 15.65 | 15.18 | | | | |
| Immunotherapy injections | 95117 | | 5.46% | 1.08% | 13.58 | 11.73 | 12.39 | 12.61 | 12.02 | 13.70 | 12.38 | 12.59 | 18.34 | 11.32 | 11.02 | 12.15 | 11.55 | 13.06 | 11.92 | 11.20 | | | | |
| Removal of tonsils | 42826 | | 0.35% | 1.00% | 321.31 | 243.04 | 248.34 | 252.02 | 245.70 | 267.84 | 251.96 | 257.30 | 444.36 | 236.46 | 232.40 | 243.81 | 237.99 | 255.74 | 243.22 | 238.22 | | | | |
| Id allergy test, drug/bug | 95024 | | 8.12% | 0.68% | 8.15 | 6.94 | 7.29 | 7.43 | 7.10 | 8.07 | 7.34 | 7.49 | 10.68 | 6.48 | 6.29 | 6.91 | 6.59 | 7.44 | 6.82 | 6.47 | | | | |
| Percut allergy skin tests | 95004 | | 9.06% | 0.63% | 7.04 | 5.98 | 6.27 | 6.39 | 6.12 | 6.96 | 6.33 | 6.47 | 8.99 | 5.43 | 5.27 | 5.78 | 5.52 | 6.24 | 5.72 | 5.45 | | | | |
| Immunotherapy, one injection | 95115 | | 2.67% | 0.42% | 10.98 | 9.49 | 10.01 | 10.19 | 9.72 | 11.09 | 10.03 | 10.21 | 14.97 | 9.24 | 8.99 | 9.91 | 9.42 | 10.67 | 9.73 | 9.16 | | | | |
| Id allergy titrate-airborne | 95027 | | 4.89% | 0.32% | 5.18 | 4.38 | 4.57 | 4.67 | 4.47 | 5.09 | 4.64 | 4.77 | 7.29 | 4.39 | 4.25 | 4.66 | 4.45 | 5.03 | 4.63 | 4.43 | | | | |
| Id allergy test-delayed type | 95028 | | 1.27% | 0.17% | 13.58 | 11.73 | 12.39 | 12.61 | 12.02 | 13.70 | 12.38 | 12.59 | 17.21 | 10.62 | 10.34 | 11.40 | 10.84 | 12.26 | 11.18 | 10.52 | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-7
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
ENT**

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|---------|---------|---------|---------|---------|-------------------------|---------|---------|---------|---------|---------|--------------------------------------|----------|----------|----------|-------------|-----|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 12.44% | 9.11% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A |
| Office consultation | 99243 | | 4.29% | 6.37% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A |
| Office/outpatient visit, est | 99214 | | 3.80% | 4.18% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A |
| Resect inferior turbinate | 30140 | | 0.72% | 3.98% | 813.00 | 410.39 | 425.52 | 432.00 | 462.15 | 434.67 | 614.01 | 345.08 | 548.97 | 685.37 | 244.09 | N/A | 4,265.17 | 1,059.52 | 790.97 | 1,014.19 | 712.78 | N/A |
| Antigen therapy services | 95165 | | 1.89% | 3.79% | 111.12 | 11.84 | 12.39 | 12.58 | 13.54 | 12.59 | 17.44 | 10.06 | 15.47 | 8.90 | 7.11 | N/A | BR | 23.88 | 22.92 | 23.52 | 20.48 | N/A |
| Office consultation | 99244 | | 1.71% | 3.73% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A |
| Nasal endoscopy, dx | 31231 | | 1.77% | 3.70% | 314.39 | 179.72 | 187.70 | 190.55 | 204.35 | 190.14 | 260.31 | 155.10 | 238.47 | 133.81 | 106.70 | N/A | 1,126.45 | 463.99 | 346.24 | 459.35 | 313.22 | N/A |
| Repair of nasal septum | 30520 | | 0.56% | 3.65% | 1,172.02 | 582.79 | 598.93 | 607.91 | 647.84 | 617.24 | 912.37 | 483.99 | 791.18 | 720.58 | 348.79 | N/A | 3,892.85 | 1,504.61 | 1,122.35 | 1,437.43 | 1,005.53 | N/A |
| Create eardrum opening | 69436 | | 1.51% | 3.41% | 405.81 | 155.37 | 159.27 | 161.66 | 172.10 | 164.57 | 248.79 | 139.95 | 213.93 | 510.71 | 94.26 | N/A | 1,478.07 | 401.11 | 299.17 | 396.30 | 267.85 | N/A |
| Office/outpatient visit, new | 99203 | | 3.05% | 3.40% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A |
| Nasal/sinus endoscopy, surg | 31237 | | 0.71% | 2.88% | 623.70 | 307.92 | 318.43 | 323.27 | 345.45 | 326.17 | 470.63 | 273.61 | 417.20 | 605.89 | 185.18 | N/A | 4,055.20 | 794.97 | 593.39 | 786.87 | 533.48 | N/A |
| Removal of ethmoid sinus | 31255 | | 0.44% | 2.45% | 1,109.33 | 388.77 | 393.40 | 399.07 | 422.13 | 411.31 | 666.59 | 360.43 | 550.04 | 840.77 | 239.19 | N/A | 7,284.34 | 1,003.68 | 747.00 | 989.11 | 662.97 | N/A |
| Diagnostic laryngoscopy | 31575 | | 1.64% | 2.17% | 199.25 | 109.23 | 112.95 | 114.60 | 122.28 | 115.39 | 168.76 | 98.71 | 148.85 | 82.90 | 65.80 | N/A | 701.76 | 282.01 | 209.98 | 278.39 | 189.26 | N/A |
| Comprehensive hearing test | 92557 | | 3.11% | 2.02% | 69.41 | 38.91 | 39.87 | 40.33 | 42.49 | 40.48 | 66.92 | 39.03 | 57.08 | 31.16 | 24.68 | N/A | 195.25 | 78.45 | 73.71 | 75.64 | 66.41 | N/A |
| Remove tonsils and adenoids | 42820 | | 0.58% | 1.93% | 828.10 | 280.56 | 286.08 | 290.27 | 308.12 | 296.87 | 461.41 | 248.11 | 389.99 | 697.62 | 170.73 | N/A | 1,712.78 | 724.32 | 539.50 | 690.63 | Not Covered | N/A |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.87% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A |
| Office/outpatient visit, est | 99212 | | 3.76% | 1.71% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A |
| Endoscopy, maxillary sinus | 31267 | | 0.35% | 1.51% | 871.23 | 308.16 | 311.99 | 316.49 | 334.86 | 326.03 | 526.64 | 285.04 | 435.34 | 801.16 | 189.62 | N/A | 6,308.08 | 795.57 | 592.15 | 783.59 | 525.73 | N/A |
| Sinus endoscopy, surgical | 31276 | | 0.20% | 1.41% | 1,405.23 | 490.39 | 495.93 | 503.13 | 532.25 | 519.13 | 842.08 | 454.30 | 694.62 | 801.16 | 302.11 | N/A | 6,308.08 | 1,266.05 | 942.73 | 1,248.67 | 836.19 | N/A |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.40% | 1.24% | 151.16 | 55.08 | 55.81 | 56.34 | 58.75 | 56.83 | 100.19 | 58.94 | 77.83 | 44.23 | 35.12 | N/A | 292.10 | 142.21 | 103.44 | 105.33 | 92.42 | N/A |
| Tympanometry | 92567 | | 4.14% | 1.10% | 31.52 | 14.68 | 15.10 | 15.28 | 16.15 | 15.31 | 25.07 | 14.89 | 21.87 | 11.96 | 9.56 | N/A | 76.57 | 29.59 | 27.87 | 28.60 | 24.90 | N/A |
| Immunotherapy injections | 95117 | | 5.46% | 1.08% | 25.33 | 11.73 | 12.39 | 12.61 | 13.70 | 12.59 | 16.31 | 11.07 | 16.01 | 9.18 | 7.34 | 11.28 | 47.34 | 23.65 | 22.92 | 23.52 | 21.03 | N/A |
| Removal of tonsils | 42826 | | 0.35% | 1.00% | 722.35 | 243.04 | 248.34 | 252.02 | 267.84 | 257.30 | 395.11 | 214.44 | 336.11 | 720.58 | 147.61 | N/A | 1,742.32 | 627.45 | 467.65 | 598.07 | 417.26 | N/A |
| Id allergy test, drug/bug | 95024 | | 8.12% | 0.68% | 16.42 | 6.94 | 7.29 | 7.43 | 8.07 | 7.49 | 9.49 | 6.09 | 9.07 | 5.29 | 4.22 | N/A | 18.60 | 14.00 | 13.63 | 13.98 | 12.17 | N/A |
| Percut allergy skin tests | 95004 | | 9.06% | 0.63% | 11.30 | 5.98 | 6.27 | 6.39 | 6.96 | 6.47 | 7.99 | 5.06 | 7.47 | 4.45 | 3.56 | 6.39 | 10.96 | 12.06 | 11.77 | 12.08 | 10.51 | N/A |
| Immunotherapy, one injection | 95115 | | 2.67% | 0.42% | 19.39 | 9.49 | 10.01 | 10.19 | 11.09 | 10.21 | 13.30 | 9.03 | 12.80 | 7.51 | 6.00 | N/A | 31.57 | 19.12 | 18.58 | 19.07 | 16.60 | N/A |
| Id allergy titrate-airborne | 95027 | | 4.89% | 0.32% | 16.42 | 4.38 | 4.57 | 4.67 | 5.09 | 4.77 | 6.49 | 4.72 | 6.40 | 3.62 | 2.89 | N/A | 18.60 | 8.83 | 8.67 | 8.90 | 7.75 | N/A |
| Id allergy test-delayed type | 95028 | | 1.27% | 0.17% | 24.61 | 11.73 | 12.39 | 12.61 | 13.70 | 12.59 | 15.31 | 9.48 | 14.94 | 8.62 | 6.89 | N/A | 31.75 | 23.65 | 22.92 | 24.15 | 21.03 | N/A |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-7
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
ENT

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | | Median | | | | | | | 80th Percentile | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 12.44% | 9.11% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office consultation | 99243 | | 4.29% | 6.37% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Office/outpatient visit, est | 99214 | | 3.80% | 4.18% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Resect inferior turbinate | 30140 | | 0.72% | 3.98% | 1,718.18 | 493.61 | 359.29 | 478.44 | 491.05 | 613.65 | 1,400.00 | 381.64 | 302.02 | 371.96 | 422.72 | 369.73 | 2,820.00 | 574.37 | 328.95 | 686.44 | 587.15 | 977.25 |
| Antigen therapy services | 95165 | | 1.89% | 3.79% | 322.19 | 266.64 | 180.97 | 313.55 | 255.89 | 253.78 | 287.16 | 230.00 | 90.00 | 210.50 | 145.80 | 228.00 | 448.00 | 393.20 | 288.00 | 494.10 | 435.30 | 340.00 |
| Office consultation | 99244 | | 1.71% | 3.73% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Nasal endoscopy, dx | 31231 | | 1.77% | 3.70% | 366.43 | 303.13 | 262.99 | 302.52 | 278.87 | 233.55 | 280.00 | 317.40 | 265.50 | 311.44 | 254.72 | 206.05 | 523.00 | 333.24 | 289.58 | 334.49 | 336.85 | 279.00 |
| Repair of nasal septum | 30520 | | 0.56% | 3.65% | 2,498.92 | 1,000.94 | 857.60 | 921.65 | 829.53 | 1,528.71 | 3,200.00 | 1,048.90 | 850.85 | 968.22 | 775.72 | 1,663.24 | 3,400.00 | 1,151.90 | 850.85 | 1,090.56 | 1,052.57 | 2,250.00 |
| Create eardrum opening | 69436 | | 1.51% | 3.41% | 1,017.85 | 389.23 | 208.77 | 237.40 | 274.03 | 456.68 | 1,150.00 | 283.41 | 236.63 | 226.95 | 222.49 | 426.55 | 1,300.00 | 485.50 | 242.60 | 302.40 | 372.30 | 670.00 |
| Office/outpatient visit, new | 99203 | | 3.05% | 3.40% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Nasal/sinus endoscopy, surg | 31237 | | 0.71% | 2.88% | 2,101.06 | 565.17 | Not Cred | 535.56 | 509.58 | 589.82 | 2,520.00 | 588.42 | Not Cred | 562.02 | 462.20 | 536.00 | 2,620.00 | 680.07 | Not Cred | 601.62 | 668.16 | 562.80 |
| Removal of ethmoid sinus | 31255 | | 0.44% | 2.45% | 3,323.02 | 653.10 | Not Cred | 604.32 | 545.13 | 1,180.69 | 3,423.42 | 404.53 | Not Cred | 545.72 | 487.41 | 880.00 | 4,899.00 | 802.88 | Not Cred | 802.40 | 679.42 | 2,000.00 |
| Diagnostic laryngoscopy | 31575 | | 1.64% | 2.17% | 343.79 | 200.60 | 188.57 | 205.45 | 186.82 | 261.11 | 357.00 | 209.61 | 165.87 | 196.59 | 184.52 | 302.00 | 410.00 | 213.93 | 182.69 | 218.28 | 223.20 | 305.84 |
| Comprehensive hearing test | 92557 | | 3.11% | 2.02% | 126.30 | 72.98 | 74.76 | 81.95 | 77.19 | 85.29 | 99.00 | 73.00 | 70.76 | 83.75 | 77.75 | 95.00 | 229.44 | 80.77 | 70.76 | 95.00 | 85.52 | 105.00 |
| Remove tonsils and adenoids | 42820 | | 0.58% | 1.93% | 1,188.99 | 616.78 | 456.46 | 501.11 | 468.47 | 788.17 | 1,462.00 | 553.82 | 424.01 | 501.83 | 407.70 | 880.00 | 1,486.00 | 665.84 | 424.01 | 531.30 | 536.97 | 1,051.00 |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.87% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Office/outpatient visit, est | 99212 | | 3.76% | 1.71% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Endoscopy, maxillary sinus | 31267 | | 0.35% | 1.51% | 2,288.95 | 401.27 | Not Cred | 424.36 | 371.12 | 920.27 | 1,288.60 | 319.67 | Not Cred | 315.40 | 340.17 | 754.00 | 3,100.00 | 485.50 | Not Cred | 610.40 | 453.60 | 1,508.00 |
| Sinus endoscopy, surgical | 31276 | | 0.20% | 1.41% | 3,373.70 | 671.02 | Not Cred | 804.31 | 766.96 | 1,071.15 | 3,220.00 | 509.58 | Not Cred | 868.00 | 668.68 | 782.73 | 4,250.00 | 844.06 | Not Cred | 1,012.52 | 1,165.51 | 1,798.00 |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.40% | 1.24% | 203.07 | 130.98 | 103.45 | 104.92 | 96.85 | 179.15 | 221.00 | 117.73 | 91.14 | 102.84 | 97.50 | 199.70 | 221.00 | 145.37 | 106.34 | 109.35 | 103.12 | 225.00 |
| Tympanometry | 92567 | | 4.14% | 1.10% | 54.58 | 28.30 | 30.44 | 33.32 | 31.03 | 28.76 | 45.00 | 27.28 | 27.74 | 32.83 | 31.70 | 22.00 | 75.00 | 31.70 | 28.29 | 39.33 | 35.11 | 41.00 |
| Immunotherapy injections | 95117 | | 5.46% | 1.08% | 33.49 | 20.87 | 20.27 | 26.20 | 22.86 | 23.06 | 35.00 | 20.64 | 19.81 | 26.86 | 22.14 | 21.00 | 36.00 | 21.53 | 19.81 | 31.72 | 24.04 | 29.00 |
| Removal of tonsils | 42826 | | 0.35% | 1.00% | 1,430.24 | 515.90 | 408.77 | 461.57 | 428.68 | 802.68 | 1,622.48 | 478.09 | 366.83 | 434.16 | 386.67 | 760.00 | 1,665.00 | 546.05 | 397.29 | 490.70 | 499.84 | 1,073.00 |
| Id allergy test, drug/bug | 95024 | | 8.12% | 0.68% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Percut allergy skin tests | 95004 | | 9.06% | 0.63% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Immunotherapy, one injection | 95115 | | 2.67% | 0.42% | 26.32 | 15.17 | 17.16 | 20.88 | 18.84 | 17.48 | 25.00 | 16.53 | 16.42 | 20.46 | 18.48 | 16.00 | 30.00 | 17.23 | 16.42 | 25.01 | 20.50 | 21.00 |
| Id allergy titrate-airborne | 95027 | | 4.89% | 0.32% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Id allergy test-delayed type | 95028 | | 1.27% | 0.17% | Not Cred | Not Cred | Not Cred | 23.55 | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | 18.20 | Not Cred | Not Cred | Not Cred | Not Cred | 20.93 | Not Cred | Not Cred | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-7
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
ENT

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 12.44% | 9.11% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office consultation | 99243 | | 4.29% | 6.37% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Office/outpatient visit, est | 99214 | | 3.80% | 4.18% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Resect inferior turbinate | 30140 | | 0.72% | 3.98% | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data |
| Antigen therapy services | 95165 | | 1.89% | 3.79% | Not Cred | 11.40 | 25.12 | 24.50 | 17.45 | 9.22 | Not Cred | 11.27 | 20.00 | 20.00 | 18.00 | 8.00 | Not Cred | 12.24 | 24.00 | 39.60 | 21.00 | 13.00 |
| Office consultation | 99244 | | 1.71% | 3.73% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Nasal endoscopy, dx | 31231 | | 1.77% | 3.70% | 433.39 | 341.92 | 232.57 | 381.73 | 360.22 | 284.84 | 240.00 | 350.00 | 179.78 | 351.00 | 350.00 | 301.00 | 854.00 | 504.00 | 322.00 | 486.00 | 401.20 | 301.00 |
| Repair of nasal septum | 30520 | | 0.56% | 3.65% | Not Cred | Not Cred | Not Cred | Not Cred | 1,117.32 | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | 983.25 | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | 1,504.00 |
| Create eardrum opening | 69436 | | 1.51% | 3.41% | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data |
| Office/outpatient visit, new | 99203 | | 3.05% | 3.40% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Nasal/sinus endoscopy, surg | 31237 | | 0.71% | 2.88% | Not Cred | 660.45 | Not Cred | 691.00 | 844.09 | Not Cred | Not Cred | 820.00 | Not Cred | 697.00 | 817.50 | Not Cred | Not Cred | 929.00 | Not Cred | 873.00 | 1,028.00 | Not Cred |
| Removal of ethmoid sinus | 31255 | | 0.44% | 2.45% | No Data | Not Cred | No Data | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred |
| Diagnostic laryngoscopy | 31575 | | 1.64% | 2.17% | 450.01 | 216.22 | 221.39 | 267.14 | 249.37 | 288.44 | 374.00 | 256.00 | 233.00 | 257.00 | 247.00 | 310.00 | 688.54 | 310.00 | 316.00 | 314.00 | 289.85 | 376.00 |
| Comprehensive hearing test | 92557 | | 3.11% | 2.02% | 133.94 | 73.68 | 92.68 | 103.67 | 101.18 | 99.64 | 95.00 | 78.00 | 89.00 | 108.00 | 98.25 | 107.08 | 245.00 | 91.00 | 106.00 | 124.00 | 111.00 | 119.00 |
| Remove tonsils and adenoids | 42820 | | 0.58% | 1.93% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.87% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Office/outpatient visit, est | 99212 | | 3.76% | 1.71% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Endoscopy, maxillary sinus | 31267 | | 0.35% | 1.51% | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred |
| Sinus endoscopy, surgical | 31276 | | 0.20% | 1.41% | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.40% | 1.24% | 198.44 | 183.31 | 143.45 | 149.90 | 174.32 | 157.76 | 221.00 | 165.00 | 159.00 | 148.00 | 175.00 | 192.00 | 221.00 | 250.00 | 163.00 | 185.00 | 194.40 | 219.53 |
| Tympanometry | 92567 | | 4.14% | 1.10% | 71.66 | 28.06 | 39.49 | 42.91 | 43.14 | 40.68 | 78.00 | 27.00 | 39.00 | 45.00 | 43.50 | 39.61 | 120.00 | 35.00 | 48.50 | 50.00 | 48.00 | 50.00 |
| Immunotherapy injections | 95117 | | 5.46% | 1.08% | No Data | 20.41 | 36.11 | 38.84 | 29.51 | 26.91 | No Data | 24.00 | 41.00 | 39.00 | 29.00 | 30.00 | No Data | 24.75 | 41.00 | 52.00 | 38.00 | 31.00 |
| Removal of tonsils | 42826 | | 0.35% | 1.00% | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred |
| Id allergy test, drug/bug | 95024 | | 8.12% | 0.68% | Not Cred | 9.47 | Not Cred | 15.61 | 12.29 | Not Cred | Not Cred | 9.50 | Not Cred | 16.00 | 12.00 | Not Cred | Not Cred | 11.00 | Not Cred | 16.00 | 13.00 | Not Cred |
| Percut allergy skin tests | 95004 | | 9.06% | 0.63% | Not Cred | 7.35 | Not Cred | 9.82 | 10.50 | Not Cred | Not Cred | 8.00 | Not Cred | 9.20 | 10.00 | Not Cred | Not Cred | 8.25 | Not Cred | 13.00 | 12.00 | Not Cred |
| Immunotherapy, one injection | 95115 | | 2.67% | 0.42% | Not Cred | 12.98 | 23.74 | 21.12 | 23.36 | 22.80 | Not Cred | 9.82 | 25.00 | 21.00 | 24.00 | Not Cred | 19.50 | 25.00 | 31.00 | 27.00 | 24.00 | |
| Id allergy titrate-airborne | 95027 | | 4.89% | 0.32% | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data |
| Id allergy test-delayed type | 95028 | | 1.27% | 0.17% | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | Not Cred | No Data |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-8
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Family Practice / General Practice

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|-------------------------|------------|---------|---------|---------|---------|---------|---------|----------|---------|----------|------------------------|---------|---------|---------|---------|---------|---------|----|--|----|--|----------|--|---------|--|---------|--|---------|--|
| | | | % of | | AK | | ID | | ND | | Portland | | Rest Of | | Seattle | | Rest Of | | AK | | ID | | ND | | Portland | | Rest of | | Seattle | | Rest of | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 26.75% | 30.41% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | | | | | | | | | | | | |
| Office/outpatient visit, est | 99214 | | 11.04% | 18.84% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | | | | | | | | | |
| Office/outpatient visit, new | 99203 | | 2.51% | 4.35% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | | | | | | | | | |
| Prev visit, est, age 40-64 | 99396 | | 1.42% | 2.60% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 190.02 | 100.55 | 99.23 | 103.78 | 101.35 | 108.24 | 103.01 | 100.48 | | | | | | | | | | | | |
| Office/outpatient visit, est | 99215 | | 0.88% | 2.02% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | | | | | | | | | | | |
| Office/outpatient visit, new | 99204 | | 0.76% | 2.01% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | | | | | | | | | |
| Office/outpatient visit, est | 99212 | | 2.84% | 2.00% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | | | | | | | | | |
| Office/outpatient visit, new | 99202 | | 1.49% | 1.76% | 89.38 | 67.88 | 69.71 | 70.61 | 68.74 | 74.76 | 70.13 | 71.13 | 123.19 | 65.86 | 64.92 | 68.16 | 66.44 | 71.28 | 67.62 | 65.81 | | | | | | | | | | | | |
| Prev visit, est, age 18-39 | 99395 | | 0.86% | 1.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 173.14 | 91.99 | 90.78 | 95.08 | 92.78 | 99.22 | 94.30 | 91.85 | | | | | | | | | | | | |
| Immunization admin | 90471 | | 2.54% | 1.00% | 27.44 | 21.99 | 22.92 | 23.24 | 22.40 | 24.81 | 22.87 | 23.12 | 36.58 | 20.72 | 20.35 | 21.80 | 21.02 | 23.02 | 21.47 | 20.52 | | | | | | | | | | | | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.65% | 0.70% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | | | |
| Strep a assay w/optic | 87880 | | 1.26% | 0.39% | 16.88 | 16.40 | 16.88 | 16.88 | 16.88 | 16.88 | 16.88 | 16.88 | 20.66 | 15.74 | 15.42 | 15.61 | 15.61 | 14.33 | 14.44 | 15.76 | | | | | | | | | | | | |
| Lipid panel | 80061 | | 1.08% | 0.37% | 18.85 | 15.96 | 17.17 | 18.85 | 18.85 | 18.85 | 18.85 | 15.67 | 23.08 | 17.59 | 17.23 | 17.44 | 17.44 | 16.01 | 16.13 | 17.61 | | | | | | | | | | | | |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.33% | 0.33% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | | | |
| Complete cbc w/auto diff wbc | 85025 | | 1.28% | 0.26% | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 13.40 | 10.21 | 10.00 | 10.12 | 10.12 | 9.30 | 9.36 | 10.22 | | | | | | | | | | | | |
| Routine venipuncture | 36415 | | 4.34% | 0.25% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | | | | | | | | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-8
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Family Practice / General Practice

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|---------------------------------|-------|----------|-------------------|------------|----------|---------|---------|---------|---------|---------|----------|-------------------------|---------|---------|-------------|---------|----------|--------------------------------------|----------|---------------|-------------|-----|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 26.75% | 30.41% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A | |
| Office/outpatient visit, est | 99214 | | 11.04% | 18.84% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | |
| Office/outpatient visit, new | 99203 | | 2.51% | 4.35% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | |
| Prev visit, est, age 40-64 | 99396 | | 1.42% | 2.60% | 277.45 | N/A | N/A | N/A | N/A | N/A | N/A | 116.63 | 143.51 | 78.73 | Not Covered | N/A | 298.33 | 203.03 | 191.39 | 211.95 | Not Covered | N/A | |
| Office/outpatient visit, est | 99215 | | 0.88% | 2.02% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | |
| Office/outpatient visit, new | 99204 | | 0.76% | 2.01% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | |
| Office/outpatient visit, est | 99212 | | 2.84% | 2.00% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | |
| Office/outpatient visit, new | 99202 | | 1.49% | 1.76% | 121.20 | 67.88 | 69.71 | 70.61 | 74.76 | 71.13 | 109.84 | 59.02 | 93.90 | 51.75 | 39.31 | 69.70 | 171.90 | 136.85 | 129.45 | 142.89 | 116.21 | N/A | |
| Prev visit, est, age 18-39 | 99395 | | 0.86% | 1.43% | 251.38 | N/A | N/A | N/A | N/A | N/A | 154.25 | 116.63 | 131.24 | 72.05 | 85.48 | N/A | 273.05 | 186.08 | 175.29 | 193.49 | Not Covered | N/A | |
| Immunization admin | 90471 | | 2.54% | 1.00% | 10.39 | 21.99 | 22.92 | 23.24 | 24.81 | 23.12 | 32.51 | 19.07 | 13.90 | 16.41 | 13.12 | 10.00 | 35.87 | 30.42 | 42.12 | 43.22 | 38.18 | N/A | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.65% | 0.70% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Strep a assay w/optic | 87880 | | 1.26% | 0.39% | 50.15 | 16.40 | 16.88 | 16.88 | 16.88 | 16.88 | 17.18 | 16.28 | 17.18 | 12.71 | 13.06 | N/A | 89.05 | TBD | 42.20 | 80% of billed | 23.63 | N/A | |
| Lipid panel | 80061 | | 1.08% | 0.37% | 43.45 | 15.96 | 17.17 | 18.85 | 18.85 | 15.67 | 19.19 | 15.85 | 17.48 | 14.20 | 14.58 | 14.00 | 121.13 | TBD | 42.93 | 80% of billed | 26.39 | N/A | |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.33% | 0.33% | 14.46 | N/A | N/A | N/A | N/A | N/A | 15.56 | 13.22 | 11.34 | 11.36 | N/A | N/A | 18.61 | N/A | N/A | 80% of billed | 22.10 | N/A | |
| Complete cbc w/auto diff wbc | 85025 | | 1.28% | 0.26% | 40.35 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 11.14 | 10.86 | 11.14 | 8.24 | 8.47 | 9.85 | 56.86 | TBD | 27.35 | 80% of billed | 15.32 | N/A | |
| Routine venipuncture | 36415 | | 4.34% | 0.25% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-8
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Family Practice / General Practice

| | | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|-----------------------------------|-----------------|-----------------|----------|---------|----------|----------|---------|---------|----------|---------|----------|-----------------|---------|---------|----------|----------|----------|----------|----------|---------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | |
| Description | HPCPS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 26.75% | 30.41% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office/outpatient visit, est | 99214 | | 11.04% | 18.84% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Office/outpatient visit, new | 99203 | | 2.51% | 4.35% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Prev visit, est, age 40-64 | 99396 | | 1.42% | 2.60% | 256.37 | 150.07 | 133.83 | 185.24 | 155.63 | 153.26 | 267.00 | 146.50 | 138.69 | 183.40 | 147.00 | 148.12 | 295.00 | 162.07 | 138.69 | 199.26 | 177.98 | 181.00 |
| Office/outpatient visit, est | 99215 | | 0.88% | 2.02% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Office/outpatient visit, new | 99204 | | 0.76% | 2.01% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Office/outpatient visit, est | 99212 | | 2.84% | 2.00% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Office/outpatient visit, new | 99202 | | 1.49% | 1.76% | 149.21 | 91.12 | 86.37 | 110.70 | 93.63 | 87.29 | 155.00 | 93.40 | 99.63 | 114.79 | 90.39 | 88.00 | 172.00 | 103.33 | 99.63 | 123.60 | 108.17 | 97.00 |
| Prev visit, est, age 18-39 | 99395 | | 0.86% | 1.43% | 238.21 | 135.53 | 114.86 | 167.65 | 140.03 | 142.36 | 250.27 | 133.33 | 123.00 | 166.85 | 132.84 | 140.00 | 275.00 | 147.51 | 126.81 | 181.09 | 159.87 | 173.00 |
| Immunization admin | 90471 | | 2.54% | 1.00% | 26.62 | 21.70 | 23.10 | 31.49 | 23.59 | 17.23 | 26.00 | 19.00 | 24.63 | 35.00 | 25.00 | 14.31 | 32.00 | 30.14 | 24.63 | 41.62 | 30.45 | 22.90 |
| Ther/proph/diag inj, sc/im | 90772 | | 1.65% | 0.70% | 35.61 | 21.89 | Not Cred | 34.28 | 22.42 | 21.86 | 35.00 | 20.00 | Not Cred | 35.00 | 20.04 | 19.50 | 50.00 | 28.00 | Not Cred | 43.00 | 30.52 | 31.50 |
| Strep a assay w/optic | 87880 | | 1.26% | 0.39% | 44.87 | 23.63 | 33.38 | 22.42 | 18.79 | 26.55 | 49.00 | 23.12 | 34.34 | 23.46 | 17.52 | 27.00 | 64.00 | 24.85 | 34.34 | 24.13 | 20.11 | 35.00 |
| Lipid panel | 80061 | | 1.08% | 0.37% | 58.57 | 29.49 | 37.31 | 26.38 | 20.73 | 40.22 | 59.90 | 27.00 | 34.93 | 26.96 | 19.57 | 36.00 | 97.00 | 40.15 | 34.93 | 29.40 | 22.47 | 63.00 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.33% | 0.33% | 20.88 | 13.71 | 14.06 | 15.34 | 13.55 | 15.07 | 20.00 | 13.88 | 12.29 | 14.21 | 14.21 | 13.94 | 28.00 | 16.00 | 15.00 | 16.53 | 15.58 | 19.74 |
| Complete cbc w/auto diff wbc | 85025 | | 1.28% | 0.26% | 34.86 | 16.34 | 24.54 | 16.14 | 12.43 | 29.04 | 40.00 | 15.42 | 22.25 | 15.64 | 11.35 | 27.30 | 50.00 | 16.38 | 22.25 | 20.74 | 13.03 | 47.00 |
| Routine venipuncture | 36415 | | 4.34% | 0.25% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-8
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Family Practice / General Practice

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 26.75% | 30.41% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office/outpatient visit, est | 99214 | | 11.04% | 18.84% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Office/outpatient visit, new | 99203 | | 2.51% | 4.35% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Prev visit, est, age 40-64 | 99396 | | 1.42% | 2.60% | Not Cred | 125.33 | 75.68 | 149.15 | 144.92 | Not Cred | Not Cred | 158.50 | 60.00 | 177.03 | 159.50 | Not Cred | Not Cred | 179.00 | 116.00 | 221.00 | 200.00 | Not Cred |
| Office/outpatient visit, est | 99215 | | 0.88% | 2.02% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Office/outpatient visit, new | 99204 | | 0.76% | 2.01% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Office/outpatient visit, est | 99212 | | 2.84% | 2.00% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Office/outpatient visit, new | 99202 | | 1.49% | 1.76% | 140.22 | 88.61 | 96.09 | 119.68 | 110.48 | 93.11 | 150.00 | 91.00 | 105.00 | 127.00 | 112.00 | 98.10 | 177.00 | 115.00 | 120.00 | 151.30 | 131.00 | 116.00 |
| Prev visit, est, age 18-39 | 99395 | | 0.86% | 1.43% | No Data | Not Cred | Not Cred | Not Cred | 127.07 | No Data | No Data | Not Cred | Not Cred | Not Cred | 151.00 | No Data | No Data | Not Cred | Not Cred | Not Cred | 177.50 | No Data |
| Immunization admin | 90471 | | 2.54% | 1.00% | 27.07 | 27.47 | 31.90 | 34.76 | 32.20 | 23.54 | 25.00 | 30.00 | 32.00 | 38.00 | 32.00 | 22.50 | 36.00 | 36.25 | 38.00 | 46.50 | 42.00 | 28.15 |
| Ther/proph/diag inj, sc/im | 90772 | | 1.65% | 0.70% | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred |
| Strep a assay w/optic | 87880 | | 1.26% | 0.39% | Not Cred | 32.88 | 41.83 | 29.23 | 37.17 | 30.74 | Not Cred | 30.00 | 46.50 | 29.00 | 35.30 | 29.10 | Not Cred | 45.00 | 50.00 | 36.00 | 51.00 | 35.00 |
| Lipid panel | 80061 | | 1.08% | 0.37% | 69.85 | 45.11 | 59.69 | 45.18 | 49.63 | 67.63 | 81.00 | 39.20 | 56.00 | 40.00 | 40.00 | 71.00 | 93.00 | 57.10 | 70.00 | 54.90 | 68.22 | 86.00 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.33% | 0.33% | 16.04 | 15.50 | 14.66 | 16.15 | 16.31 | 14.83 | 13.22 | 13.50 | 13.55 | 13.25 | 13.22 | 13.21 | 23.05 | 20.00 | 16.00 | 20.00 | 20.00 | 18.00 |
| Complete cbc w/auto diff wbc | 85025 | | 1.28% | 0.26% | 33.93 | 29.96 | 42.83 | 26.51 | 32.26 | 37.16 | 27.51 | 30.00 | 40.00 | 24.00 | 30.00 | 37.00 | 46.00 | 39.10 | 49.00 | 32.50 | 40.03 | 56.00 |
| Routine venipuncture | 36415 | | 4.34% | 0.25% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-9
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Gastroenterology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----------|---------|----|----|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Diagnostic colonoscopy | 45378 | | 8.93% | 13.39% | \$474.49 | \$372.97 | \$384.86 | \$391.03 | \$378.63 | \$418.56 | \$388.96 | \$396.87 | \$651.17 | \$361.46 | \$354.33 | \$377.35 | \$365.35 | \$398.80 | \$374.37 | \$362.06 | | | | |
| Colonoscopy and biopsy | 45380 | | 6.40% | 11.42% | 567.77 | 446.13 | 460.50 | 467.77 | 452.94 | 500.44 | 465.02 | 474.14 | 779.70 | 432.68 | 424.30 | 451.78 | 437.40 | 477.25 | 448.01 | 433.09 | | | | |
| Upper GI endoscopy, biopsy | 43239 | | 8.27% | 9.84% | 410.41 | 325.79 | 337.39 | 342.69 | 331.20 | 366.96 | 339.82 | 345.94 | 561.18 | 314.91 | 308.79 | 330.00 | 318.80 | 349.01 | 326.50 | 314.31 | | | | |
| Office consultation | 99244 | | 6.09% | 7.62% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | |
| Infliximab injection | J1745 | | 0.45% | 7.56% | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | |
| Lesion removal colonoscopy | 45385 | | 3.51% | 7.41% | 643.54 | 502.88 | 518.22 | 526.39 | 510.21 | 562.78 | 523.91 | 534.50 | 886.41 | 489.00 | 479.56 | 509.61 | 493.97 | 537.98 | 505.95 | 490.18 | | | | |
| Office/outpatient visit, est | 99213 | | 14.13% | 5.94% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | | | |
| Office/outpatient visit, est | 99214 | | 8.46% | 5.34% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | |
| Office consultation | 99243 | | 4.76% | 4.07% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | | |
| Lesion remove colonoscopy | 45384 | | 1.03% | 1.91% | 565.27 | 441.39 | 454.63 | 461.86 | 447.75 | 493.89 | 459.93 | 469.48 | 777.29 | 428.33 | 419.98 | 446.16 | 432.57 | 471.06 | 443.20 | 429.71 | | | | |
| Uppr gi endoscopy, diagnosis | 43235 | | 1.77% | 1.82% | 352.94 | 280.95 | 291.10 | 295.73 | 285.68 | 316.91 | 293.24 | 298.63 | 482.16 | 271.40 | 266.04 | 284.62 | 274.82 | 301.22 | 281.55 | 270.85 | | | | |
| Office consultation | 99245 | | 1.13% | 1.74% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | | | | |
| Subsequent hospital care | 99232 | | 3.20% | 1.43% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | | | | |
| Gi tract capsule endoscopy | 91110 | | 0.23% | 1.21% | 1,052.62 | 872.54 | 916.92 | 930.46 | 892.14 | 998.79 | 911.64 | 920.38 | 1,416.62 | 834.65 | 819.07 | 888.64 | 850.59 | 943.23 | 869.43 | 820.74 | | | | |
| Office/outpatient visit, new | 99204 | | 1.16% | 1.13% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | |
| Inpatient consultation | 99254 | | 0.94% | 1.03% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 328.30 | 166.65 | 164.98 | 169.85 | 167.30 | 175.60 | 169.44 | 167.34 | | | | |
| Office/outpatient visit, est | 99215 | | 1.18% | 1.00% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | | | |
| Office/outpatient visit, new | 99203 | | 1.24% | 0.79% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | |
| Office/outpatient visit, est | 99212 | | 3.01% | 0.78% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | |
| Subsequent hospital care | 99233 | | 1.08% | 0.69% | 134.62 | 96.24 | 97.32 | 98.33 | 96.80 | 102.73 | 98.37 | 99.76 | 193.87 | 97.78 | 96.79 | 99.41 | 98.06 | 102.72 | 99.36 | 98.43 | | | | |
| Office consultation | 99242 | | 1.02% | 0.63% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 168.99 | 89.63 | 88.24 | 92.42 | 90.25 | 96.72 | 92.04 | 90.05 | | | | |
| Subsequent hospital care | 99231 | | 1.38% | 0.34% | 51.71 | 37.05 | 37.46 | 37.87 | 37.27 | 39.61 | 37.90 | 38.48 | 74.26 | 37.52 | 37.10 | 38.14 | 37.61 | 39.46 | 38.16 | 37.83 | | | | |
| Routine venipuncture | 36415 | | 1.54% | 0.03% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-9
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Gastroenterology

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁵⁾ | | | | | |
|------------------------------|-------|----------|-------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|-------------------------|----------|-------------|--------|------------|----------|--------------------------------------|---------------|----------|-----|--|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Diagnostic colonoscopy | 45378 | | 8.93% | 13.39% | \$978.47 | \$372.97 | \$384.86 | \$391.03 | \$418.56 | \$396.87 | \$579.70 | \$338.69 | \$512.69 | \$304.18 | \$227.86 | N/A | \$1,494.59 | \$962.91 | \$721.60 | \$956.36 | \$646.92 | N/A | | |
| Colonoscopy and biopsy | 45380 | | 6.40% | 11.42% | 1,158.34 | 446.13 | 460.50 | 467.77 | 500.44 | 474.14 | 694.47 | 404.77 | 614.06 | 304.18 | 272.76 | N/A | 1,644.05 | 1,151.78 | 862.20 | 1,143.04 | 773.65 | N/A | | |
| Upper GI endoscopy, biopsy | 43239 | | 8.27% | 9.84% | 883.20 | 325.79 | 337.39 | 342.69 | 366.96 | 345.94 | 500.27 | 297.06 | 446.54 | 295.56 | 198.96 | N/A | 1,393.86 | 841.10 | 629.31 | 834.36 | 566.13 | N/A | | |
| Office consultation | 99244 | | 6.09% | 7.62% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | | |
| Infliximab injection | J1745 | | 0.45% | 7.56% | 194.44 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 58.07 | 55.21 | 58.66 | 60.04 | N/A | N/A | 182.89 | N/A | N/A | N/A | 71.05 | N/A | | |
| Lesion removal colonoscopy | 45385 | | 3.51% | 7.41% | 1,368.74 | 502.88 | 518.22 | 526.39 | 562.78 | 534.50 | 788.85 | 455.78 | 694.08 | 304.18 | 307.89 | N/A | 2,117.33 | 1,298.31 | 971.84 | 1,287.97 | 871.05 | N/A | | |
| Office/outpatient visit, est | 99213 | | 14.13% | 5.94% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | | |
| Office/outpatient visit, est | 99214 | | 8.46% | 5.34% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | |
| Office consultation | 99243 | | 4.76% | 4.07% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | | |
| Lesion remove colonoscopy | 45384 | | 1.03% | 1.91% | 1,434.91 | 441.39 | 454.63 | 461.86 | 493.89 | 469.48 | 692.14 | 398.09 | 607.66 | 304.18 | 269.65 | N/A | 2,117.33 | 1,139.54 | 853.53 | 1,130.76 | 764.80 | N/A | | |
| Uppr gi endoscopy, diagnosis | 43235 | | 1.77% | 1.82% | 820.83 | 280.95 | 291.10 | 295.73 | 316.91 | 298.63 | 429.12 | 258.10 | 385.19 | 273.94 | 171.62 | N/A | 1,202.55 | 725.35 | 543.21 | 719.73 | 488.65 | N/A | | |
| Office consultation | 99245 | | 1.13% | 1.74% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | N/A | 138.05 | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A | | |
| Subsequent hospital care | 99232 | | 3.20% | 1.43% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A | | |
| Gi tract capsule endoscopy | 91110 | | 0.23% | 1.21% | 3,568.86 | 872.54 | 916.92 | 930.46 | 998.79 | 920.38 | 1,262.80 | 816.68 | 1,184.90 | 663.79 | Not Covered | N/A | 672.29 | 1,759.13 | 1,677.34 | 1,727.56 | 1,525.72 | N/A | | |
| Office/outpatient visit, new | 99204 | | 1.16% | 1.13% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | | |
| Inpatient consultation | 99254 | | 0.94% | 1.03% | 343.92 | N/A | N/A | N/A | N/A | N/A | 291.91 | N/A | N/A | N/A | 102.26 | N/A | 523.16 | 311.86 | N/A | 321.34 | 260.10 | N/A | | |
| Office/outpatient visit, est | 99215 | | 1.18% | 1.00% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | | |
| Office/outpatient visit, new | 99203 | | 1.24% | 0.79% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | | |
| Office/outpatient visit, est | 99212 | | 3.01% | 0.78% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | |
| Subsequent hospital care | 99233 | | 1.08% | 0.69% | 199.87 | 96.24 | 97.32 | 98.33 | 102.73 | 99.76 | 172.68 | 89.47 | 139.78 | 75.95 | 60.02 | N/A | 378.31 | 194.02 | 181.48 | 201.01 | 162.15 | N/A | | |
| Office consultation | 99242 | | 1.02% | 0.63% | 180.37 | N/A | N/A | N/A | N/A | N/A | 150.26 | N/A | 58.13 | N/A | 55.80 | N/A | 285.87 | 168.33 | N/A | 176.39 | 142.78 | N/A | | |
| Subsequent hospital care | 99231 | | 1.38% | 0.34% | 85.13 | 37.05 | 37.46 | 37.87 | 39.61 | 38.48 | 66.52 | 34.77 | 53.88 | 29.21 | 23.12 | N/A | 188.08 | 74.69 | 69.99 | 77.26 | 62.53 | N/A | | |
| Routine venipuncture | 36415 | | 1.54% | 0.03% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | | |

(1) Medicare fees are from CY2011 schedule.

(2) TRICARE fees are from the current schedules effective 8/1/2010.

(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).

(4) Medicaid and workers' compensation fees are current as of 8/3/2011.

(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-9
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Gastroenterology

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|------------|----------|----------|----------|----------|----------|------------|----------|----------|----------|-----------------|----------|------------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Diagnostic colonoscopy | 45378 | | 8.93% | 13.39% | \$1,199.45 | \$618.32 | \$399.59 | \$587.87 | \$448.27 | \$772.43 | \$1,239.00 | \$634.57 | \$326.64 | \$628.06 | \$386.59 | \$855.00 | \$1,450.00 | \$758.50 | \$414.90 | \$738.72 | \$564.34 | \$944.00 |
| Colonoscopy and biopsy | 45380 | | 6.40% | 11.42% | 1,342.63 | 715.03 | 456.53 | 649.83 | 491.12 | 873.92 | 1,462.00 | 722.08 | 393.44 | 581.00 | 441.72 | 1,056.00 | 1,707.00 | 867.21 | 450.26 | 847.70 | 632.75 | 1,129.00 |
| Upper GI endoscopy, biopsy | 43239 | | 8.27% | 9.84% | 1,000.84 | 489.72 | 314.37 | 417.77 | 329.60 | 544.69 | 966.00 | 481.04 | 259.84 | 346.24 | 279.05 | 540.75 | 1,359.14 | 617.02 | 329.00 | 600.32 | 463.98 | 772.61 |
| Office consultation | 99244 | | 6.09% | 7.62% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Infliximab injection | J1745 | | 0.45% | 7.56% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Lesion removal colonoscopy | 45385 | | 3.51% | 7.41% | 1,641.31 | 826.20 | 564.41 | 782.10 | 617.91 | 1,101.61 | 1,780.00 | 850.00 | 467.03 | 836.00 | 576.21 | 1,341.00 | 1,950.00 | 990.00 | 607.46 | 939.08 | 738.12 | 1,449.00 |
| Office/outpatient visit, est | 99213 | | 14.13% | 5.94% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Office/outpatient visit, est | 99214 | | 8.46% | 5.34% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Office consultation | 99243 | | 4.76% | 4.07% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Lesion remove colonoscopy | 45384 | | 1.03% | 1.91% | 1,433.53 | 642.73 | 428.40 | 554.76 | 481.90 | 1,098.46 | 1,800.00 | 653.00 | 408.72 | 505.08 | 408.53 | 1,240.00 | 1,976.00 | 746.00 | 683.28 | 760.96 | 635.34 | 1,303.64 |
| Uppr gi endoscopy, diagnosis | 43235 | | 1.77% | 1.82% | 893.86 | 433.23 | 288.78 | 369.84 | 287.69 | 486.60 | 944.00 | 422.69 | 219.65 | 300.19 | 241.90 | 528.00 | 1,133.00 | 606.69 | 248.67 | 518.58 | 406.35 | 704.00 |
| Office consultation | 99245 | | 1.13% | 1.74% | 512.68 | 334.98 | 374.53 | 411.96 | 347.70 | 325.66 | 575.00 | 335.00 | 355.51 | 410.94 | 333.92 | 314.15 | 640.00 | 375.00 | 392.00 | 453.13 | 396.43 | 367.81 |
| Subsequent hospital care | 99232 | | 3.20% | 1.43% | 198.52 | 103.04 | 107.93 | 121.88 | 102.61 | 104.64 | 228.00 | 101.84 | 104.73 | 123.95 | 98.82 | 107.70 | 237.00 | 112.67 | 110.08 | 133.20 | 115.53 | 115.00 |
| Gi tract capsule endoscopy | 91110 | | 0.23% | 1.21% | Not Cred | 1,314.67 | Not Cred | 1,785.81 | 1,578.13 | No Data | Not Cred | 1,319.81 | Not Cred | 1,700.00 | 1,562.40 | No Data | Not Cred | 1,323.18 | Not Cred | 2,006.03 | 1,929.27 | No Data |
| Office/outpatient visit, new | 99204 | | 1.16% | 1.13% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Inpatient consultation | 99254 | | 0.94% | 1.03% | 432.27 | 240.20 | 262.96 | 299.70 | 246.73 | 232.74 | 485.00 | 228.50 | 259.84 | 303.34 | 236.02 | 218.82 | 514.00 | 275.27 | 267.04 | 334.50 | 275.21 | 273.11 |
| Office/outpatient visit, est | 99215 | | 1.18% | 1.00% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Office/outpatient visit, new | 99203 | | 1.24% | 0.79% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Office/outpatient visit, est | 99212 | | 3.01% | 0.78% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Subsequent hospital care | 99233 | | 1.08% | 0.69% | 264.74 | 153.13 | 163.08 | 171.63 | 143.35 | 151.49 | 300.00 | 145.81 | 150.02 | 174.89 | 135.85 | 146.05 | 340.00 | 163.44 | 183.30 | 189.57 | 160.32 | 185.00 |
| Office consultation | 99242 | | 1.02% | 0.63% | 247.89 | 138.71 | 144.75 | 166.52 | 142.00 | 143.69 | 260.00 | 134.13 | 142.66 | 165.82 | 135.71 | 147.00 | 275.00 | 148.39 | 145.51 | 183.96 | 162.11 | 161.50 |
| Subsequent hospital care | 99231 | | 1.38% | 0.34% | 136.98 | 60.16 | 65.27 | 72.19 | 61.74 | 72.72 | 164.00 | 56.49 | 58.31 | 69.01 | 57.42 | 69.00 | 177.00 | 64.43 | 69.00 | 77.52 | 66.81 | 100.00 |
| Routine venipuncture | 36415 | | 1.54% | 0.03% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-9
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Gastroenterology

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|------------|----------|----------|----------|----------|----------|------------|----------|----------|----------|-----------------|------------|------------|------------|------------|------------|----------|------------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Diagnostic colonoscopy | 45378 | | 8.93% | 13.39% | \$1,309.21 | \$684.93 | \$612.11 | \$803.51 | \$717.23 | \$897.04 | \$1,380.00 | \$635.00 | \$553.50 | \$810.40 | \$730.00 | \$1,016.00 | \$1,500.00 | \$1,046.85 | \$1,020.00 | \$1,000.00 | \$883.00 | \$1,075.00 |
| Colonoscopy and biopsy | 45380 | | 6.40% | 11.42% | 1,514.97 | 804.05 | 708.29 | 1,044.36 | 817.84 | 1,084.19 | 1,589.28 | 821.00 | 710.00 | 1,103.00 | 919.80 | 1,129.00 | 1,910.00 | 1,200.00 | 1,153.00 | 1,289.00 | 1,063.35 | 1,185.00 |
| Upper GI endoscopy, biopsy | 43239 | | 8.27% | 9.84% | 1,077.66 | 565.74 | 526.56 | 699.13 | 564.26 | 821.36 | 1,200.00 | 550.00 | 367.00 | 734.40 | 600.00 | 877.00 | 1,400.00 | 835.00 | 1,002.00 | 892.69 | 699.00 | 906.00 |
| Office consultation | 99244 | | 6.09% | 7.62% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Infliximab injection | J1745 | | 0.45% | 7.56% | No Data | 88.48 | 131.40 | 94.54 | 94.28 | 118.23 | No Data | 83.00 | 131.40 | 90.00 | 91.40 | 103.00 | No Data | 85.00 | 131.40 | 96.00 | 114.16 | 136.00 |
| Lesion removal colonoscopy | 45385 | | 3.51% | 7.41% | 1,857.79 | 923.07 | 832.60 | 1,188.03 | 971.32 | 1,301.45 | 2,047.55 | 885.00 | 660.00 | 1,185.00 | 1,034.20 | 1,449.00 | 2,310.00 | 1,400.00 | 1,291.00 | 1,454.00 | 1,203.00 | 1,574.00 |
| Office/outpatient visit, est | 99213 | | 14.13% | 5.94% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 |
| Office/outpatient visit, est | 99214 | | 8.46% | 5.34% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Office consultation | 99243 | | 4.76% | 4.07% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Lesion remove colonoscopy | 45384 | | 1.03% | 1.91% | Not Cred | 813.31 | Not Cred | 990.06 | 781.15 | 850.97 | Not Cred | 746.00 | Not Cred | 1,140.00 | 786.00 | 1,147.00 | Not Cred | 1,225.00 | Not Cred | 1,284.00 | 998.00 | 1,147.00 |
| Uppr gi endoscopy, diagnosis | 43235 | | 1.77% | 1.82% | 1,135.09 | 544.23 | 577.66 | 667.20 | 523.21 | 655.08 | 1,121.98 | 548.20 | 525.00 | 660.00 | 576.40 | 740.00 | 1,279.00 | 869.80 | 933.00 | 813.00 | 668.00 | 776.00 |
| Office consultation | 99245 | | 1.13% | 1.74% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 450.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 |
| Subsequent hospital care | 99232 | | 3.20% | 1.43% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 |
| Gi tract capsule endoscopy | 91110 | | 0.23% | 1.21% | Not Cred | Not Cred | Not Cred | 2,225.90 | 2,005.65 | Not Cred | Not Cred | Not Cred | Not Cred | 2,216.75 | 2,028.00 | Not Cred | Not Cred | Not Cred | Not Cred | 2,552.00 | 2,471.00 | Not Cred |
| Office/outpatient visit, new | 99204 | | 1.16% | 1.13% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Inpatient consultation | 99254 | | 0.94% | 1.03% | 459.06 | 283.58 | 301.70 | 356.38 | 324.02 | 323.08 | 493.00 | 287.00 | 300.00 | 362.00 | 330.00 | 320.00 | 552.00 | 350.00 | 332.00 | 431.00 | 390.00 | 401.00 |
| Office/outpatient visit, est | 99215 | | 1.18% | 1.00% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Office/outpatient visit, new | 99203 | | 1.24% | 0.79% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Office/outpatient visit, est | 99212 | | 3.01% | 0.78% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Subsequent hospital care | 99233 | | 1.08% | 0.69% | 297.97 | 172.78 | 186.49 | 209.46 | 195.52 | 189.21 | 338.00 | 172.00 | 188.00 | 212.00 | 198.80 | 188.00 | 361.00 | 201.00 | 195.00 | 249.00 | 227.00 | 236.00 |
| Office consultation | 99242 | | 1.02% | 0.63% | 234.71 | 147.02 | 141.55 | 191.84 | 170.88 | 142.85 | 260.00 | 149.00 | 160.00 | 199.00 | 175.00 | 150.00 | 287.83 | 175.00 | 180.00 | 234.42 | 201.00 | 187.00 |
| Subsequent hospital care | 99231 | | 1.38% | 0.34% | 140.10 | 74.65 | 79.05 | 88.72 | 94.01 | 88.60 | 152.00 | 75.00 | 78.00 | 87.00 | 84.00 | 88.00 | 180.00 | 89.00 | 98.00 | 108.00 | 102.00 | 109.00 |
| Routine venipuncture | 36415 | | 1.54% | 0.03% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-10
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
General Surgery

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Medicare ⁽¹⁾ | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | | | | |
|------------------------------|-------|----------|--------------------|--------------------|-------------------------|----------|----------|----------|----------|----------|----------|----------|------------|------------------------|----------|----------|----------|----------|----------|----------|----|----|---------|--|--|---------|--|--|
| | | | | | Portland | | | Rest Of | | | Seattle | | | Rest Of | | | Portland | | | Rest of | | | Seattle | | | Rest of | | |
| | | | | | AK | ID | ND | OR | OR | WA | WA | WA | WY | AK | ID | ND | OR | OR | WA | WA | WA | WY | | | | | | |
| Laparoscopic cholecystectomy | 47562 | | 2.14% | 5.81% | \$924.42 | \$681.33 | \$685.42 | \$698.08 | \$684.99 | \$745.66 | \$709.90 | \$735.89 | \$1,297.66 | \$671.73 | \$656.78 | \$683.24 | \$671.47 | \$719.12 | \$691.43 | \$690.26 | | | | | | | | |
| Office consultation | 99243 | | 6.24% | 3.85% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | | | | | | |
| Laparo cholecystectomy/graph | 47563 | | 1.25% | 3.45% | 938.67 | 690.16 | 693.60 | 706.49 | 693.61 | 754.59 | 719.10 | 745.91 | 1,322.02 | 682.91 | 667.62 | 694.02 | 682.38 | 730.42 | 702.84 | 702.39 | | | | | | | | |
| Office consultation | 99244 | | 3.79% | 3.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 9.53% | 2.89% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | | | | | | | |
| Laparoscopy, appendectomy | 44970 | | 0.97% | 2.43% | 741.29 | 546.15 | 549.48 | 559.57 | 549.10 | 597.54 | 568.92 | 589.57 | 1,041.17 | 538.80 | 526.88 | 548.03 | 538.61 | 576.70 | 554.53 | 553.55 | | | | | | | | |
| Lap gastric bypass/roux-en-y | 43644 | | 0.47% | 2.25% | 2,180.33 | 1,590.45 | 1,593.75 | 1,623.54 | 1,596.59 | 1,732.81 | 1,656.25 | 1,720.34 | 3,089.52 | 1,583.85 | 1,548.40 | 1,605.15 | 1,580.90 | 1,687.89 | 1,628.53 | 1,632.56 | | | | | | | | |
| Prp i/hern init reduc >5 yr | 49505 | | 0.96% | 2.14% | 639.24 | 472.84 | 476.42 | 485.13 | 475.66 | 518.23 | 492.67 | 510.20 | 896.18 | 465.69 | 455.40 | 474.39 | 465.81 | 499.40 | 479.51 | 477.83 | | | | | | | | |
| Office/outpatient visit, est | 99214 | | 4.21% | 1.92% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | | | | | |
| Diagnostic colonoscopy | 45378 | | 1.23% | 1.31% | 474.49 | 372.97 | 384.86 | 391.03 | 378.63 | 418.56 | 388.96 | 396.87 | 651.17 | 361.46 | 354.33 | 377.35 | 365.35 | 398.80 | 374.37 | 362.06 | | | | | | | | |
| Office consultation | 99245 | | 1.13% | 1.26% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | | | | | | | | |
| Office consultation | 99242 | | 2.67% | 1.20% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 168.99 | 89.63 | 88.24 | 92.42 | 90.25 | 96.72 | 92.04 | 90.05 | | | | | | | | |
| Office/outpatient visit, est | 99212 | | 6.09% | 1.15% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | | | | | |
| Removal of breast lesion | 19120 | | 0.62% | 1.11% | 574.85 | 437.54 | 445.30 | 453.29 | 441.89 | 485.47 | 456.74 | 470.74 | 788.98 | 421.94 | 412.62 | 434.21 | 423.75 | 458.53 | 435.97 | 429.45 | | | | | | | | |
| Office/outpatient visit, new | 99203 | | 2.13% | 0.98% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | | | | | |
| Office/outpatient visit, new | 99204 | | 1.08% | 0.76% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | | | | | |
| Subsequent hospital care | 99232 | | 2.15% | 0.69% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | | | | | | | | |
| Office/outpatient visit, est | 99215 | | 1.01% | 0.62% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | | | | | | | |
| Us exam, breast(s) | 76645 | 26 | 1.28% | 0.53% | 36.56 | 26.17 | 26.44 | 26.73 | 26.32 | 27.99 | 26.80 | 27.25 | 53.49 | 27.11 | 26.80 | 27.58 | 27.18 | 28.57 | 27.60 | 27.34 | | | | | | | | |
| Office/outpatient visit, new | 99202 | | 1.23% | 0.39% | 89.38 | 67.88 | 69.71 | 70.61 | 68.74 | 74.76 | 70.13 | 71.13 | 123.19 | 65.86 | 64.92 | 68.16 | 66.44 | 71.28 | 67.62 | 65.81 | | | | | | | | |
| Subsequent hospital care | 99231 | | 1.85% | 0.33% | 51.71 | 37.05 | 37.46 | 37.87 | 37.27 | 39.61 | 37.90 | 38.48 | 74.26 | 37.52 | 37.10 | 38.14 | 37.61 | 39.46 | 38.16 | 37.83 | | | | | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-10
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
General Surgery

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁵⁾ | | | | | |
|------------------------------|-------|----------|-------------------|------------|------------|----------|----------|----------|----------|----------|------------|----------|-------------------------|------------|----------|--------|------------|------------|--------------------------------------|------------|-------------|-----|--|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Laparoscopic cholecystectomy | 47562 | | 2.14% | 5.81% | \$1,663.71 | \$681.33 | \$685.42 | \$698.08 | \$745.66 | \$735.89 | \$1,152.54 | \$588.97 | \$950.16 | \$1,501.12 | \$418.15 | N/A | \$5,566.71 | \$1,758.94 | \$1,333.57 | \$1,704.82 | \$1,172.10 | N/A | | |
| Office consultation | 99243 | | 6.24% | 3.85% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | | |
| Laparo cholecystectomy/graph | 47563 | | 1.25% | 3.45% | 1,777.83 | 690.16 | 693.60 | 706.49 | 754.59 | 745.91 | 1,173.92 | 606.26 | 966.17 | 1,501.12 | 425.04 | N/A | 5,937.81 | 1,781.75 | 1,351.53 | 1,728.55 | 1,186.49 | N/A | | |
| Office consultation | 99244 | | 3.79% | 3.43% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | | |
| Office/outpatient visit, est | 99213 | | 9.53% | 2.89% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | | |
| Laparoscopy, appendectomy | 44970 | | 0.97% | 2.43% | 1,334.12 | 546.15 | 549.48 | 559.57 | 597.54 | 589.57 | 925.09 | 473.29 | 762.37 | 432.32 | 335.45 | N/A | 3,642.15 | 1,409.97 | 1,068.47 | 1,367.02 | Not Covered | N/A | | |
| Lap gastric bypass/roux-en-y | 43644 | | 0.47% | 2.25% | 5,977.30 | 1,590.45 | 1,593.75 | 1,623.54 | 1,732.81 | 1,720.34 | 2,743.41 | 1,396.58 | 2,240.17 | 1,271.65 | 1,732.81 | N/A | N/A | 4,105.95 | 3,116.20 | 3,983.98 | Not Covered | N/A | | |
| Prp i/hern init reduc >5 yr | 49505 | | 0.96% | 2.14% | 1,233.97 | 472.84 | 476.42 | 485.13 | 518.23 | 510.20 | 796.46 | 411.06 | 658.87 | 888.93 | 290.10 | N/A | 2,695.20 | 1,220.71 | 924.76 | 1,182.69 | 813.50 | N/A | | |
| Office/outpatient visit, est | 99214 | | 4.21% | 1.92% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | |
| Diagnostic colonoscopy | 45378 | | 1.23% | 1.31% | 978.47 | 372.97 | 384.86 | 391.03 | 418.56 | 396.87 | 579.70 | 338.69 | 512.69 | 304.18 | 227.86 | N/A | 1,494.59 | 962.91 | 721.60 | 956.36 | 646.92 | N/A | | |
| Office consultation | 99245 | | 1.13% | 1.26% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | N/A | 138.05 | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A | | |
| Office consultation | 99242 | | 2.67% | 1.20% | 180.37 | N/A | N/A | N/A | N/A | N/A | 150.26 | N/A | 58.13 | N/A | 55.80 | N/A | 285.87 | 168.33 | N/A | 176.39 | 142.78 | N/A | | |
| Office/outpatient visit, est | 99212 | | 6.09% | 1.15% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | |
| Removal of breast lesion | 19120 | | 0.62% | 1.11% | 1,079.86 | 437.54 | 445.30 | 453.29 | 485.47 | 470.74 | 701.65 | 370.15 | 596.99 | 692.50 | 264.54 | N/A | 2,734.90 | 1,461.80 | 854.15 | 1,093.30 | 757.05 | N/A | | |
| Office/outpatient visit, new | 99203 | | 2.13% | 0.98% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | | |
| Office/outpatient visit, new | 99204 | | 1.08% | 0.76% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | | |
| Subsequent hospital care | 99232 | | 2.15% | 0.69% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A | | |
| Office/outpatient visit, est | 99215 | | 1.01% | 0.62% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | | |
| Us exam, breast(s) | 76645 | 26 | 1.28% | 0.53% | 71.79 | 26.17 | 26.44 | 26.73 | 27.99 | 27.25 | 47.57 | 33.23 | 37.02 | 21.14 | 16.67 | N/A | 149.39 | 67.57 | 49.55 | 50.46 | 44.27 | N/A | | |
| Office/outpatient visit, new | 99202 | | 1.23% | 0.39% | 121.20 | 67.88 | 69.71 | 70.61 | 74.76 | 71.13 | 109.84 | 59.02 | 93.90 | 51.75 | 39.31 | 69.70 | 171.90 | 136.85 | 129.45 | 142.89 | 116.21 | N/A | | |
| Subsequent hospital care | 99231 | | 1.85% | 0.33% | 85.13 | 37.05 | 37.46 | 37.87 | 39.61 | 38.48 | 66.52 | 34.77 | 53.88 | 29.21 | 23.12 | N/A | 188.08 | 74.69 | 69.99 | 77.26 | 62.53 | N/A | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-10
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
General Surgery

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|--------------------|--------------------|-----------------------------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-----------------|------------|------------|------------|------------|------------|
| | | | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | |
| | | | | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Laparoscopic cholecystectomy | 47562 | | 2.14% | 5.81% | \$4,012.25 | \$1,433.64 | \$1,057.07 | \$1,253.79 | \$1,186.86 | \$2,588.80 | \$4,671.00 | \$1,314.60 | \$1,042.19 | \$1,240.17 | \$1,100.61 | \$3,034.00 | \$5,278.00 | \$1,466.00 | \$1,042.19 | \$1,399.52 | \$1,321.92 | \$3,100.00 |
| Office consultation | 99243 | | 6.24% | 3.85% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Laparo cholecystectomy/graph | 47563 | | 1.25% | 3.45% | 4,719.96 | 1,343.73 | 1,071.29 | 1,262.83 | 1,174.66 | 2,340.52 | 5,000.00 | 1,373.86 | 1,068.23 | 1,264.29 | 1,062.77 | 3,140.00 | 5,155.50 | 1,510.57 | 1,089.59 | 1,394.90 | 1,393.60 | 3,486.00 |
| Office consultation | 99244 | | 3.79% | 3.43% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office/outpatient visit, est | 99213 | | 9.53% | 2.89% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Laparoscopy, appendectomy | 44970 | | 0.97% | 2.43% | 2,891.04 | 1,059.86 | 880.96 | 997.41 | 928.75 | 2,255.06 | 3,015.00 | 1,038.35 | 835.56 | 988.92 | 870.49 | 2,430.00 | 3,383.00 | 1,169.01 | 969.00 | 1,082.62 | 1,089.40 | 3,209.00 |
| Lap gastric bypass/roux-en-y | 43644 | | 0.47% | 2.25% | 8,034.15 | 2,996.43 | 2,703.45 | 3,772.65 | 2,930.59 | Not Cred | 9,785.00 | 3,078.12 | 2,444.99 | 3,096.72 | 2,591.40 | Not Cred | 9,785.00 | 3,205.02 | 2,493.89 | 5,590.00 | 2,893.73 | Not Cred |
| Prp i/hern init reduc >5 yr | 49505 | | 0.96% | 2.14% | 2,335.27 | 919.28 | 745.15 | 832.44 | 788.35 | 1,583.58 | 2,500.00 | 906.56 | 726.87 | 850.55 | 717.21 | 1,642.00 | 2,900.00 | 1,060.62 | 726.87 | 953.12 | 957.44 | 1,786.64 |
| Office/outpatient visit, est | 99214 | | 4.21% | 1.92% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Diagnostic colonoscopy | 45378 | | 1.23% | 1.31% | 1,199.45 | 618.32 | 399.59 | 587.87 | 448.27 | 772.43 | 1,239.00 | 634.57 | 326.64 | 628.06 | 386.59 | 855.00 | 1,450.00 | 758.50 | 414.90 | 738.72 | 564.34 | 944.00 |
| Office consultation | 99245 | | 1.13% | 1.26% | 512.68 | 334.98 | 374.53 | 411.96 | 347.70 | 325.66 | 575.00 | 335.00 | 355.51 | 410.94 | 333.92 | 314.15 | 640.00 | 375.00 | 392.00 | 453.13 | 396.43 | 367.81 |
| Office consultation | 99242 | | 2.67% | 1.20% | 247.89 | 138.71 | 144.75 | 166.52 | 142.00 | 143.69 | 260.00 | 134.13 | 142.66 | 165.82 | 135.71 | 147.00 | 275.00 | 148.39 | 145.51 | 183.96 | 162.11 | 161.50 |
| Office/outpatient visit, est | 99212 | | 6.09% | 1.15% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Removal of breast lesion | 19120 | | 0.62% | 1.11% | Not Cred | 626.68 | 564.92 | 682.70 | 644.91 | 936.35 | Not Cred | 635.95 | 561.57 | 687.97 | 592.23 | 1,005.00 | Not Cred | 715.97 | 572.80 | 790.55 | 722.43 | 1,073.50 |
| Office/outpatient visit, new | 99203 | | 2.13% | 0.98% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Office/outpatient visit, new | 99204 | | 1.08% | 0.76% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Subsequent hospital care | 99232 | | 2.15% | 0.69% | 198.52 | 103.04 | 107.93 | 121.88 | 102.61 | 104.64 | 228.00 | 101.84 | 104.73 | 123.95 | 98.82 | 107.70 | 237.00 | 112.67 | 110.08 | 133.20 | 115.53 | 115.00 |
| Office/outpatient visit, est | 99215 | | 1.01% | 0.62% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Us exam, breast(s) | 76645 | 26 | 1.28% | 0.53% | 106.87 | 71.64 | 49.02 | 50.71 | 47.29 | 97.38 | 107.00 | 57.18 | 43.02 | 48.47 | 46.44 | 117.00 | 107.00 | 102.40 | 43.88 | 51.83 | 48.88 | 121.00 |
| Office/outpatient visit, new | 99202 | | 1.23% | 0.39% | 149.21 | 91.12 | 86.37 | 110.70 | 93.63 | 87.29 | 155.00 | 93.40 | 99.63 | 114.79 | 90.39 | 88.00 | 172.00 | 103.33 | 99.63 | 123.60 | 108.17 | 97.00 |
| Subsequent hospital care | 99231 | | 1.85% | 0.33% | 136.98 | 60.16 | 65.27 | 72.19 | 61.74 | 72.72 | 164.00 | 56.49 | 58.31 | 69.01 | 57.42 | 69.00 | 177.00 | 64.43 | 69.00 | 77.52 | 66.81 | 100.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-10
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
General Surgery

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|------------|------------|------------|------------|------------|----------|------------|------------|------------|-----------------|------------|----------|------------|------------|------------|------------|------------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Laparoscopic cholecystectomy | 47562 | | 2.14% | 5.81% | Not Cred | \$1,576.46 | \$1,578.66 | \$1,713.51 | \$1,699.91 | \$2,164.37 | Not Cred | \$1,703.00 | \$1,483.00 | \$1,682.50 | \$1,619.00 | \$2,166.50 | Not Cred | \$1,933.00 | \$1,713.00 | \$2,000.00 | \$2,025.10 | \$3,387.00 |
| Office consultation | 99243 | | 6.24% | 3.85% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Laparo cholecystectomy/graph | 47563 | | 1.25% | 3.45% | Not Cred | 1,653.02 | Not Cred | 1,815.78 | 1,989.21 | Not Cred | Not Cred | 1,615.00 | Not Cred | 1,805.00 | 1,837.50 | Not Cred | Not Cred | 1,832.20 | Not Cred | 2,209.00 | 2,359.00 | Not Cred |
| Office consultation | 99244 | | 3.79% | 3.43% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Office/outpatient visit, est | 99213 | | 9.53% | 2.89% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 |
| Laparoscopy, appendectomy | 44970 | | 0.97% | 2.43% | No Data | Not Cred | Not Cred | Not Cred | 1,347.23 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 1,255.00 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 1,435.00 | Not Cred |
| Lap gastric bypass/roux-en-y | 43644 | | 0.47% | 2.25% | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Prp i/hern init reduc >5 yr | 49505 | | 0.96% | 2.14% | 2,017.86 | 1,047.86 | 1,078.27 | 1,292.15 | 1,220.36 | Not Cred | 2,537.78 | 1,079.00 | 1,027.00 | 1,231.00 | 1,147.00 | Not Cred | 2,793.00 | 1,347.00 | 1,266.00 | 1,546.00 | 1,433.00 | Not Cred |
| Office/outpatient visit, est | 99214 | | 4.21% | 1.92% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Diagnostic colonoscopy | 45378 | | 1.23% | 1.31% | 1,309.21 | 684.93 | 612.11 | 803.51 | 717.23 | 897.04 | 1,380.00 | 635.00 | 553.50 | 810.40 | 730.00 | 1,016.00 | 1,500.00 | 1,046.85 | 1,020.00 | 1,000.00 | 883.00 | 1,075.00 |
| Office consultation | 99245 | | 1.13% | 1.26% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 | 487.00 |
| Office consultation | 99242 | | 2.67% | 1.20% | 234.71 | 147.02 | 141.55 | 191.84 | 170.88 | 142.85 | 260.00 | 149.00 | 160.00 | 199.00 | 175.00 | 150.00 | 287.83 | 175.00 | 180.00 | 234.42 | 201.00 | 187.00 |
| Office/outpatient visit, est | 99212 | | 6.09% | 1.15% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Removal of breast lesion | 19120 | | 0.62% | 1.11% | No Data | 681.98 | Not Cred | Not Cred | 935.38 | Not Cred | No Data | 658.50 | Not Cred | Not Cred | 904.50 | Not Cred | No Data | 920.94 | Not Cred | Not Cred | 1,190.00 | Not Cred |
| Office/outpatient visit, new | 99203 | | 2.13% | 0.98% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Office/outpatient visit, new | 99204 | | 1.08% | 0.76% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Subsequent hospital care | 99232 | | 2.15% | 0.69% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 |
| Office/outpatient visit, est | 99215 | | 1.01% | 0.62% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Us exam, breast(s) | 76645 | 26 | 1.28% | 0.53% | 122.33 | 94.22 | 73.89 | 78.90 | 89.07 | 74.68 | 112.00 | 92.00 | 68.00 | 83.00 | 91.20 | 83.00 | 121.00 | 128.00 | 98.00 | 98.00 | 98.00 | 117.00 |
| Office/outpatient visit, new | 99202 | | 1.23% | 0.39% | 140.22 | 88.61 | 96.09 | 119.68 | 110.48 | 93.11 | 150.00 | 91.00 | 105.00 | 127.00 | 112.00 | 98.10 | 177.00 | 115.00 | 120.00 | 151.30 | 131.00 | 116.00 |
| Subsequent hospital care | 99231 | | 1.85% | 0.33% | 140.10 | 74.65 | 79.05 | 88.72 | 94.01 | 88.60 | 152.00 | 75.00 | 78.00 | 87.00 | 84.00 | 88.00 | 180.00 | 89.00 | 98.00 | 108.00 | 102.00 | 109.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-11
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Internal Medicine

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | |
|---------------------------------|-------|----------|-------------------------|------------|---------|---------|---------|---------|---------|---------|---------|---------|----------|------------------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 20.32% | 20.40% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | \$65.82 | \$64.23 | \$64.23 | |
| Office/outpatient visit, est | 99214 | | 11.31% | 17.05% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | 98.63 | 96.32 | 96.32 | |
| Office/outpatient visit, est | 99215 | | 1.80% | 3.66% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | 133.18 | 130.32 | 130.32 | |
| Office/outpatient visit, new | 99204 | | 1.09% | 2.53% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | 152.59 | 149.84 | 149.84 | |
| Office/outpatient visit, new | 99203 | | 1.51% | 2.31% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | 98.27 | 96.05 | 96.05 | |
| Prev visit, est, age 40-64 | 99396 | | 1.40% | 2.25% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 190.02 | 100.55 | 99.23 | 103.78 | 101.35 | 108.24 | 103.01 | 100.48 | 103.01 | 100.48 | 100.48 | |
| Subsequent hospital care | 99232 | | 1.79% | 1.92% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | 69.18 | 68.50 | 68.50 | |
| Subsequent hospital care | 99233 | | 0.96% | 1.46% | 134.62 | 96.24 | 97.32 | 98.33 | 96.80 | 102.73 | 98.37 | 99.76 | 193.87 | 97.78 | 96.79 | 99.41 | 98.06 | 102.72 | 99.36 | 98.43 | 99.36 | 98.43 | 98.43 | |
| Office/outpatient visit, new | 99205 | | 0.49% | 1.44% | 255.06 | 188.57 | 192.05 | 194.47 | 190.30 | 205.10 | 194.23 | 197.54 | 359.60 | 187.26 | 184.68 | 192.09 | 188.26 | 200.14 | 191.58 | 188.31 | 191.58 | 188.31 | 188.31 | |
| Initial hospital care | 99223 | | 0.47% | 1.35% | 260.99 | 186.77 | 188.62 | 190.73 | 187.80 | 199.70 | 191.26 | 194.52 | 373.42 | 188.24 | 186.12 | 191.18 | 188.64 | 197.80 | 191.41 | 189.96 | 191.41 | 189.96 | 189.96 | |
| Office/outpatient visit, est | 99212 | | 2.07% | 1.28% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | 39.23 | 38.04 | 38.04 | |
| Office consultation | 99244 | | 0.37% | 1.12% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | 186.85 | 183.17 | 183.17 | |
| Inflximab injection | 11745 | | 0.03% | 1.07% | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Electrocardiogram, complete | 93000 | | 1.88% | 0.72% | 23.57 | 18.66 | 19.33 | 19.62 | 18.97 | 20.97 | 19.43 | 19.74 | 34.09 | 19.18 | 18.79 | 20.10 | 19.41 | 21.28 | 19.89 | 19.15 | 19.89 | 19.15 | 19.15 | |
| Immunization admin | 90471 | | 1.79% | 0.62% | 27.44 | 21.99 | 22.92 | 23.24 | 22.40 | 24.81 | 22.87 | 23.12 | 36.58 | 20.72 | 20.35 | 21.80 | 21.02 | 23.02 | 21.47 | 20.52 | 21.47 | 20.52 | 20.52 | |
| Lipid panel | 80061 | | 1.71% | 0.52% | 18.85 | 15.96 | 17.17 | 18.85 | 18.85 | 18.85 | 18.85 | 15.67 | 23.08 | 17.59 | 17.23 | 17.44 | 17.44 | 16.01 | 16.13 | 17.61 | 16.13 | 17.61 | 17.61 | |
| Therproph/diag inj, sc/im | 90772 | | 1.19% | 0.44% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Complete cbc w/auto diff wbc | 85025 | | 1.57% | 0.28% | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 13.40 | 10.21 | 10.00 | 10.12 | 10.12 | 9.30 | 9.36 | 10.22 | 9.36 | 10.22 | 10.22 | |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.25% | 0.28% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Routine venipuncture | 36415 | | 5.37% | 0.27% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | |
| Comprehen metabolic panel | 80053 | | 1.10% | 0.27% | 14.87 | 14.87 | 14.87 | 14.87 | 14.87 | 12.01 | 12.01 | 14.87 | 18.20 | 13.87 | 13.59 | 13.76 | 13.76 | 12.63 | 12.72 | 13.89 | 12.72 | 13.89 | 13.89 | |
| Percut allergy skin tests | 95004 | | 1.18% | 0.11% | 7.04 | 5.98 | 6.27 | 6.39 | 6.12 | 6.96 | 6.33 | 6.47 | 8.99 | 5.43 | 5.27 | 5.78 | 5.52 | 6.24 | 5.72 | 5.45 | 5.72 | 5.45 | 5.45 | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-11
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Internal Medicine

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | | |
|---------------------------------|-------|----------|------------|------------|-------------------|---------|---------|---------|---------|---------|----------|-------------------------|---------|---------|-------------|---------|----------|----------|--------------------------------------|---------------|-------------|-----|--|--|--|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | |
| Office/outpatient visit, est | 99213 | | 20.32% | 20.40% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A | | | |
| Office/outpatient visit, est | 99214 | | 11.31% | 17.05% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | | |
| Office/outpatient visit, est | 99215 | | 1.80% | 3.66% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | | | |
| Office/outpatient visit, new | 99204 | | 1.09% | 2.53% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | | | |
| Office/outpatient visit, new | 99203 | | 1.51% | 2.31% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | | | |
| Prev visit, est, age 40-64 | 99396 | | 1.40% | 2.25% | 277.45 | N/A | N/A | N/A | N/A | N/A | N/A | 116.63 | 143.51 | 78.73 | Not Covered | N/A | 298.33 | 203.03 | 191.39 | 211.95 | Not Covered | N/A | | | |
| Subsequent hospital care | 99232 | | 1.79% | 1.92% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A | | | |
| Subsequent hospital care | 99233 | | 0.96% | 1.46% | 199.87 | 96.24 | 97.32 | 98.33 | 102.73 | 99.76 | 172.68 | 89.47 | 139.78 | 75.95 | 60.02 | N/A | 378.31 | 194.02 | 181.48 | 201.01 | 162.15 | N/A | | | |
| Office/outpatient visit, new | 99205 | | 0.49% | 1.44% | 329.91 | 188.57 | 192.05 | 194.47 | 205.10 | 197.54 | 319.74 | 167.67 | 267.28 | 146.89 | 110.46 | N/A | 431.74 | 380.16 | 359.25 | 397.23 | 320.97 | N/A | | | |
| Initial hospital care | 99223 | | 0.47% | 1.35% | 394.90 | 186.77 | 188.62 | 190.73 | 199.70 | 194.52 | 331.73 | 169.27 | 269.42 | 146.61 | 115.60 | N/A | 589.90 | 376.53 | 353.68 | 390.39 | 314.88 | N/A | | | |
| Office/outpatient visit, est | 99212 | | 2.07% | 1.28% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | | |
| Office consultation | 99244 | | 0.37% | 1.12% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | | | |
| Infliximab injection | 11745 | | 0.03% | 1.07% | 194.44 | 60.58 | 60.58 | 60.58 | 60.58 | 60.58 | 58.07 | 55.21 | 58.66 | 60.04 | N/A | N/A | 182.89 | N/A | N/A | N/A | 71.05 | N/A | | | |
| Electrocardiogram, complete | 93000 | | 1.88% | 0.72% | 91.38 | 18.66 | 19.33 | 19.62 | 20.97 | 19.74 | 30.31 | 18.76 | 27.21 | 15.30 | 12.23 | N/A | 151.74 | 37.62 | 35.93 | 37.50 | 32.10 | N/A | | | |
| Immunization admin | 90471 | | 1.79% | 0.62% | 10.39 | 21.99 | 22.92 | 23.24 | 24.81 | 23.12 | 32.51 | 19.07 | 13.90 | 16.41 | 13.12 | 10.00 | 35.87 | 30.42 | 42.12 | 43.22 | 38.18 | N/A | | | |
| Lipid panel | 80061 | | 1.71% | 0.52% | 43.45 | 15.96 | 17.17 | 18.85 | 18.85 | 15.67 | 19.19 | 15.85 | 17.48 | 14.20 | 14.58 | 14.00 | 121.13 | TBD | 42.93 | 80% of billed | 26.39 | N/A | | | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.19% | 0.44% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | |
| Complete cbc w/auto diff wbc | 85025 | | 1.57% | 0.28% | 40.35 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 11.14 | 10.86 | 11.14 | 8.24 | 8.47 | 9.85 | 56.86 | TBD | 27.35 | 80% of billed | 15.32 | N/A | | | |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.25% | 0.28% | 14.46 | N/A | N/A | N/A | N/A | N/A | 15.56 | 13.22 | 11.34 | 11.36 | N/A | N/A | 18.61 | N/A | N/A | 80% of billed | 22.10 | N/A | | | |
| Routine venipuncture | 36415 | | 5.37% | 0.27% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | | | |
| Comprehen metabolic panel | 80053 | | 1.10% | 0.27% | 49.40 | 14.87 | 14.87 | 14.87 | 12.01 | 14.87 | 15.14 | 14.77 | 15.14 | 11.20 | 9.29 | 13.29 | 91.24 | TBD | 37.17 | 80% of billed | 16.81 | N/A | | | |
| Percut allergy skin tests | 95004 | | 1.18% | 0.11% | 11.30 | 5.98 | 6.27 | 6.39 | 6.96 | 6.47 | 7.99 | 5.06 | 7.47 | 4.45 | 3.56 | 6.39 | 10.96 | 12.06 | 11.77 | 12.08 | 10.51 | N/A | | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-11
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Internal Medicine

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|-----------------------------------|-----------------|----------|---------|----------|----------|---------|---------|----------|---------|----------|----------|-----------------|---------|----------|----------|----------|----------|----------|---------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 20.32% | 20.40% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office/outpatient visit, est | 99214 | | 11.31% | 17.05% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Office/outpatient visit, est | 99215 | | 1.80% | 3.66% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Office/outpatient visit, new | 99204 | | 1.09% | 2.53% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Office/outpatient visit, new | 99203 | | 1.51% | 2.31% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Prev visit, est, age 40-64 | 99396 | | 1.40% | 2.25% | 256.37 | 150.07 | 133.83 | 185.24 | 155.63 | 153.26 | 267.00 | 146.50 | 138.69 | 183.40 | 147.00 | 148.12 | 295.00 | 162.07 | 138.69 | 199.26 | 177.98 | 181.00 |
| Subsequent hospital care | 99232 | | 1.79% | 1.92% | 198.52 | 103.04 | 107.93 | 121.88 | 102.61 | 104.64 | 228.00 | 101.84 | 104.73 | 123.95 | 98.82 | 107.70 | 237.00 | 112.67 | 110.08 | 133.20 | 115.53 | 115.00 |
| Subsequent hospital care | 99233 | | 0.96% | 1.46% | 264.74 | 153.13 | 163.08 | 171.63 | 143.35 | 151.49 | 300.00 | 145.81 | 150.02 | 174.89 | 135.85 | 146.05 | 340.00 | 163.44 | 183.30 | 189.57 | 160.32 | 185.00 |
| Office/outpatient visit, new | 99205 | | 0.49% | 1.44% | 375.22 | 254.81 | 264.22 | 292.23 | 249.90 | 228.90 | 400.00 | 266.00 | 280.79 | 315.52 | 246.88 | 224.10 | 435.00 | 281.00 | 280.79 | 344.96 | 290.00 | 264.00 |
| Initial hospital care | 99223 | | 0.47% | 1.35% | 474.21 | 287.32 | 282.89 | 338.27 | 275.24 | 269.78 | 530.00 | 275.64 | 283.05 | 335.00 | 265.00 | 264.00 | 586.30 | 304.95 | 288.71 | 358.56 | 311.27 | 293.83 |
| Office/outpatient visit, est | 99212 | | 2.07% | 1.28% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Office consultation | 99244 | | 0.37% | 1.12% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Infliximab injection | J1745 | | 0.03% | 1.07% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Electrocardiogram, complete | 93000 | | 1.88% | 0.72% | 110.60 | 37.45 | 46.11 | 42.34 | 36.73 | 68.41 | 125.00 | 35.17 | 32.83 | 40.61 | 35.01 | 67.00 | 141.12 | 37.30 | 37.88 | 45.00 | 40.00 | 85.00 |
| Immunization admin | 90471 | | 1.79% | 0.62% | 26.62 | 21.70 | 23.10 | 31.49 | 23.59 | 17.23 | 26.00 | 19.00 | 24.63 | 35.00 | 25.00 | 14.31 | 32.00 | 30.14 | 24.63 | 41.62 | 30.45 | 22.90 |
| Lipid panel | 80061 | | 1.71% | 0.52% | 58.57 | 29.49 | 37.31 | 26.38 | 20.73 | 40.22 | 59.90 | 27.00 | 34.93 | 26.96 | 19.57 | 36.00 | 97.00 | 40.15 | 34.93 | 29.40 | 22.47 | 63.00 |
| Ther/proph/diag inj, sc/im | 90772 | | 1.19% | 0.44% | 35.61 | 21.89 | Not Cred | 34.28 | 22.42 | 21.86 | 35.00 | 20.00 | Not Cred | 35.00 | 20.04 | 19.50 | 50.00 | 28.00 | Not Cred | 43.00 | 30.52 | 31.50 |
| Complete cbc w/auto diff wbc | 85025 | | 1.57% | 0.28% | 34.86 | 16.34 | 24.54 | 16.14 | 12.43 | 29.04 | 40.00 | 15.42 | 22.25 | 15.64 | 11.35 | 27.30 | 50.00 | 16.38 | 22.25 | 20.74 | 13.03 | 47.00 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.25% | 0.28% | 20.88 | 13.71 | 14.06 | 15.34 | 13.55 | 15.07 | 20.00 | 13.88 | 12.29 | 14.21 | 14.21 | 13.94 | 28.00 | 16.00 | 15.00 | 16.53 | 15.58 | 19.74 |
| Routine venipuncture | 36415 | | 5.37% | 0.27% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |
| Comprehen metabolic panel | 80053 | | 1.10% | 0.27% | 47.74 | 21.24 | 31.51 | 21.74 | 15.21 | 38.55 | 47.26 | 20.97 | 30.26 | 21.27 | 12.46 | 34.00 | 75.00 | 22.03 | 30.26 | 23.20 | 16.93 | 62.00 |
| Percut allergy skin tests | 95004 | | 1.18% | 0.11% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-11
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Internal Medicine

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|-------------------------------|-----------------|----------|---------|----------|----------|----------|----------|----------|---------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 20.32% | 20.40% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office/outpatient visit, est | 99214 | | 11.31% | 17.05% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Office/outpatient visit, est | 99215 | | 1.80% | 3.66% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Office/outpatient visit, new | 99204 | | 1.09% | 2.53% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Office/outpatient visit, new | 99203 | | 1.51% | 2.31% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Prev visit, est, age 40-64 | 99396 | | 1.40% | 2.25% | Not Cred | 125.33 | 75.68 | 149.15 | 144.92 | Not Cred | Not Cred | 158.50 | 60.00 | 177.03 | 159.50 | Not Cred | Not Cred | 179.00 | 116.00 | 221.00 | 200.00 | Not Cred |
| Subsequent hospital care | 99232 | | 1.79% | 1.92% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 |
| Subsequent hospital care | 99233 | | 0.96% | 1.46% | 297.97 | 172.78 | 186.49 | 209.46 | 195.52 | 189.21 | 338.00 | 172.00 | 188.00 | 212.00 | 198.80 | 188.00 | 361.00 | 201.00 | 195.00 | 249.00 | 227.00 | 236.00 |
| Office/outpatient visit, new | 99205 | | 0.49% | 1.44% | 358.00 | 282.67 | 282.52 | 358.57 | 310.49 | 277.38 | 370.00 | 285.00 | 314.00 | 370.00 | 308.30 | 271.50 | 439.00 | 337.00 | 333.00 | 461.00 | 383.00 | 350.00 |
| Initial hospital care | 99223 | | 0.47% | 1.35% | 531.64 | 306.56 | 324.97 | 386.93 | 373.24 | 321.45 | 536.00 | 318.00 | 317.00 | 395.00 | 377.50 | 333.00 | 635.00 | 349.50 | 354.00 | 467.00 | 429.00 | 377.00 |
| Office/outpatient visit, est | 99212 | | 2.07% | 1.28% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Office consultation | 99244 | | 0.37% | 1.12% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Infliximab injection | J1745 | | 0.03% | 1.07% | No Data | 88.48 | 131.40 | 94.54 | 94.28 | 118.23 | No Data | 83.00 | 131.40 | 90.00 | 91.40 | 103.00 | No Data | 85.00 | 131.40 | 96.00 | 114.16 | 136.00 |
| Electrocardiogram, complete | 93000 | | 1.88% | 0.72% | 105.88 | 51.56 | 64.80 | 54.14 | 56.58 | 96.95 | 125.00 | 50.00 | 66.00 | 56.00 | 52.80 | 90.00 | 128.00 | 75.00 | 78.00 | 62.00 | 72.00 | 175.00 |
| Immunization admin | 90471 | | 1.79% | 0.62% | 27.07 | 27.47 | 31.90 | 34.76 | 32.20 | 23.54 | 25.00 | 30.00 | 32.00 | 38.00 | 32.00 | 22.50 | 36.00 | 36.25 | 38.00 | 46.50 | 42.00 | 28.15 |
| Lipid panel | 80061 | | 1.71% | 0.52% | 69.85 | 45.11 | 59.69 | 45.18 | 49.63 | 67.63 | 81.00 | 39.20 | 56.00 | 40.00 | 40.00 | 71.00 | 93.00 | 57.10 | 70.00 | 54.90 | 68.22 | 86.00 |
| Ther/proph/diag inj, sc/im | 90772 | | 1.19% | 0.44% | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | |
| Complete cbc w/auto diff wbc | 85025 | | 1.57% | 0.28% | 33.93 | 29.96 | 42.83 | 26.51 | 32.26 | 37.16 | 27.51 | 30.00 | 40.00 | 24.00 | 30.00 | 37.00 | 46.00 | 39.10 | 49.00 | 32.50 | 40.03 | 56.00 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.25% | 0.28% | 16.04 | 15.50 | 14.66 | 16.15 | 16.31 | 14.83 | 13.22 | 13.50 | 13.55 | 13.25 | 13.22 | 13.21 | 23.05 | 20.00 | 16.00 | 20.00 | 20.00 | 18.00 |
| Routine venipuncture | 36415 | | 5.37% | 0.27% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |
| Comprehen metabolic panel | 80053 | | 1.10% | 0.27% | 45.03 | 38.41 | 61.10 | 35.30 | 38.95 | 48.15 | 42.85 | 39.29 | 61.00 | 32.63 | 39.29 | 53.00 | 65.00 | 42.26 | 65.00 | 44.31 | 51.00 | 56.00 |
| Percut allergy skin tests | 95004 | | 1.18% | 0.11% | Not Cred | 7.35 | Not Cred | 9.82 | 10.50 | Not Cred | Not Cred | 8.00 | Not Cred | 9.20 | 10.00 | Not Cred | Not Cred | 8.25 | Not Cred | 13.00 | 12.00 | Not Cred |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-12
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Interventional Cardiology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|--------|--------|--------|----------|---------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | Portland | Rest of | Seattle | Rest of | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Left heart catheterization | 93510 | 26 | 16.56% | 46.77% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$471.79 | \$243.76 | \$238.76 | \$248.10 | \$243.85 | \$260.49 | \$250.51 | \$249.61 | \$249.61 | |
| Imaging, cardiac cath | 93556 | 26 | 17.19% | 8.45% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 86.31 | 44.20 | 43.81 | 45.23 | 44.46 | 46.75 | 44.96 | 44.16 | 44.16 | |
| Rt & Lt heart catheters | 93526 | 26 | 1.62% | 6.41% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 651.66 | 336.55 | 329.57 | 342.42 | 336.60 | 359.61 | 345.90 | 344.83 | 344.83 | |
| Ablate heart dysrhythm focus | 93651 | | 1.20% | 6.35% | N/A | 878.16 | 879.43 | 896.17 | 881.38 | 957.20 | 915.10 | 951.48 | 1,763.20 | 909.91 | 889.17 | 924.09 | 908.87 | 972.96 | 936.66 | 937.02 | 937.02 | 937.02 | |
| Imaging, cardiac cath | 93555 | 26 | 15.57% | 6.25% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 84.21 | 43.12 | 42.73 | 44.12 | 43.37 | 45.61 | 43.86 | 43.09 | 43.09 | |
| Electrophysiology evaluation | 93620 | 26 | 1.54% | 5.30% | 859.96 | 627.59 | 628.62 | 640.56 | 629.94 | 684.18 | 653.99 | 679.90 | 1,260.88 | 651.08 | 636.26 | 661.40 | 650.41 | 696.39 | 670.25 | 670.31 | 670.31 | 670.31 | |
| Inject for coronary x-rays | 93545 | | 17.07% | 2.84% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 271.89 | 163.46 | 160.20 | 174.93 | 166.87 | 186.30 | 170.81 | 160.41 | 160.41 | 160.41 | |
| Cath placement, angiography | 93508 | 26 | 1.08% | 2.34% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 447.02 | 231.01 | 226.31 | 235.16 | 231.12 | 246.86 | 237.36 | 236.42 | 236.42 | 236.42 | |
| Transcath closure of asd | 93580 | | 0.31% | 1.80% | N/A | 981.18 | 983.13 | 1,001.81 | 984.99 | 1,070.16 | 1,022.54 | 1,062.91 | 1,962.98 | 1,014.10 | 990.98 | 1,030.31 | 1,013.09 | 1,084.92 | 1,044.04 | 1,043.98 | 1,043.98 | 1,043.98 | |
| Injection for heart x-rays | 93543 | | 15.27% | 1.67% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 130.83 | 77.59 | 76.11 | 82.75 | 79.12 | 87.92 | 80.90 | 76.23 | 76.23 | 76.23 | |
| Electrophys map 3d, add-on | 93613 | | 0.58% | 1.32% | N/A | 378.53 | 379.13 | 386.33 | 379.94 | 412.61 | 394.43 | 410.06 | 760.35 | 392.48 | 383.53 | 398.64 | 392.05 | 419.73 | 404.03 | 404.15 | 404.15 | 404.15 | |
| Electrophysiology evaluation | 93641 | 26 | 0.67% | 1.17% | N/A | 320.41 | 320.89 | 326.99 | 321.59 | 349.25 | 333.88 | 347.14 | 643.13 | 331.89 | 324.31 | 337.06 | 331.50 | 354.89 | 341.65 | 341.80 | 341.80 | 341.80 | |
| Biopsy of heart lining | 93505 | 26 | 0.49% | 1.00% | N/A | 233.81 | 234.64 | 238.77 | 234.80 | 254.16 | 242.92 | 251.53 | 470.69 | 242.53 | 237.49 | 246.55 | 242.48 | 258.88 | 249.21 | 248.71 | 248.71 | 248.71 | |
| Stimulation, pacing heart | 93623 | 26 | 1.02% | 0.88% | N/A | 154.25 | 154.44 | 157.40 | 154.81 | 168.17 | 160.79 | 167.26 | 309.74 | 159.85 | 156.19 | 162.33 | 159.66 | 170.94 | 164.56 | 164.65 | 164.65 | 164.65 | |
| Electrophysiology evaluation | 93621 | 26 | 1.22% | 0.80% | N/A | 113.42 | 113.61 | 115.75 | 113.84 | 123.58 | 118.14 | 122.77 | 228.20 | 117.77 | 115.12 | 119.64 | 117.66 | 125.92 | 121.21 | 121.19 | 121.19 | 121.19 | |
| Injection, cardiac cath | 93540 | | 1.35% | 0.26% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 386.20 | 233.70 | 228.96 | 250.52 | 238.72 | 267.05 | 244.42 | 229.10 | 229.10 | 229.10 | |
| Injection, cardiac cath | 93539 | | 1.51% | 0.21% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 134.05 | 78.37 | 76.91 | 83.25 | 79.79 | 88.29 | 81.57 | 77.22 | 77.22 | 77.22 | |
| Injection for aortography | 93544 | | 1.32% | 0.12% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 95.66 | 56.32 | 55.26 | 59.94 | 57.38 | 63.62 | 58.66 | 55.40 | 55.40 | 55.40 | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

The procedure codes used for interventional cardiology have changed in 2011 and as a result, fee schedule amounts for many payers no longer exist for the most commonly used procedure codes historically. For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-12
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Interventional Cardiology**

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|------------|------------|-------------------|--------|--------|----------|----------|----------|----------|-------------------------|----------|----------|--------|-----|-----------|--------------------------------------|----------|----------|-------------|-----|-----|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Left heart catheterization | 93510 | 26 | 16.56% | 46.77% | \$603.85 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | \$258.22 | \$307.54 | N/A | N/A | N/A | \$5,657.83 | N/A | N/A | N/A | N/A | N/A |
| Imaging, cardiac cath | 93556 | 26 | 17.19% | 8.45% | 114.09 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 27.60 | 56.48 | N/A | N/A | N/A | 487.32 | N/A | N/A | N/A | N/A | N/A |
| Rt & Lt heart catheters | 93526 | 26 | 1.62% | 6.41% | 835.22 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 369.43 | 424.29 | N/A | N/A | N/A | 7,072.30 | N/A | N/A | N/A | N/A | N/A |
| Ablate heart dysrhythm focus | 93651 | | 1.20% | 6.35% | 2,264.67 | 878.16 | 879.43 | 896.17 | 957.20 | 951.48 | 1,516.69 | 838.09 | 1,286.27 | 731.39 | 566.20 | N/A | 7,840.11 | 1,770.33 | 1,723.17 | 1,770.15 | 1,508.57 | N/A | N/A |
| Imaging, cardiac cath | 93555 | 26 | 15.57% | 6.25% | 112.23 | N/A | N/A | N/A | N/A | N/A | N/A | 23.77 | 55.05 | N/A | N/A | N/A | 320.70 | N/A | N/A | N/A | N/A | N/A | N/A |
| Electrophysiology evaluation | 93620 | 26 | 1.54% | 5.30% | 1,613.66 | 627.59 | 628.62 | 640.56 | 684.18 | 679.90 | N/A | 678.91 | 878.01 | 523.29 | 405.25 | N/A | 4,026.48 | 1,265.21 | 1,231.37 | 1,264.84 | 1,078.02 | N/A | N/A |
| Inject for coronary x-rays | 93545 | | 17.07% | 2.84% | 317.20 | N/A | N/A | N/A | N/A | N/A | N/A | 243.27 | 117.37 | 231.54 | N/A | N/A | 445.27 | N/A | N/A | N/A | N/A | N/A | N/A |
| Cath placement, angiography | 93508 | 26 | 1.08% | 2.34% | 571.18 | N/A | N/A | N/A | N/A | N/A | N/A | 300.30 | 291.40 | N/A | N/A | N/A | 2,758.19 | N/A | N/A | N/A | N/A | N/A | N/A |
| Transcath closure of asd | 93580 | | 0.31% | 1.80% | 2,545.21 | 981.18 | 983.13 | 1,001.81 | 1,070.16 | 1,062.91 | 1,688.35 | 933.80 | 1,434.05 | 815.13 | 631.33 | N/A | 30,299.36 | 1,978.04 | 1,925.10 | 1,976.72 | Not Covered | N/A | N/A |
| Injection for heart x-rays | 93543 | | 15.27% | 1.67% | 224.61 | N/A | N/A | N/A | N/A | N/A | 116.82 | 57.47 | 109.90 | N/A | N/A | N/A | 277.64 | N/A | N/A | N/A | N/A | N/A | N/A |
| Electrophys map 3d, add-on | 93613 | | 0.58% | 1.32% | 984.23 | 378.53 | 379.13 | 386.33 | 412.61 | 410.06 | 654.24 | 362.26 | 554.84 | 315.48 | 244.31 | N/A | BR | 763.11 | 742.66 | 763.36 | 650.25 | N/A | N/A |
| Electrophysiology evaluation | 93641 | 26 | 0.67% | 1.17% | 826.58 | 320.41 | 320.89 | 326.99 | 349.25 | 347.14 | N/A | 350.48 | 448.02 | 266.79 | 206.52 | N/A | 2,640.48 | 645.93 | 628.69 | 645.77 | 550.63 | N/A | N/A |
| Biopsy of heart lining | 93505 | 26 | 0.49% | 1.00% | 607.51 | 233.81 | 234.64 | 238.77 | 254.16 | 251.53 | N/A | 460.10 | 327.95 | 193.91 | 150.72 | N/A | 1,728.63 | 471.36 | 455.88 | 468.44 | 400.66 | N/A | N/A |
| Stimulation, pacing heart | 93623 | 26 | 1.02% | 0.88% | 396.44 | 154.25 | 154.44 | 157.40 | 168.17 | 167.26 | N/A | 462.57 | 215.94 | 128.53 | 99.59 | N/A | 1,038.95 | 310.97 | 302.89 | 310.81 | 265.08 | N/A | N/A |
| Electrophysiology evaluation | 93621 | 26 | 1.22% | 0.80% | 297.09 | 113.42 | 113.61 | 115.75 | 123.58 | 122.77 | N/A | 1,287.36 | 158.52 | 94.59 | 73.36 | N/A | 1,145.12 | 228.65 | 222.36 | 228.82 | 194.80 | N/A | N/A |
| Injection, cardiac cath | 93540 | | 1.35% | 0.26% | 296.64 | N/A | N/A | N/A | N/A | N/A | 345.39 | 165.96 | 331.30 | N/A | N/A | N/A | 429.55 | N/A | N/A | N/A | N/A | N/A | N/A |
| Injection, cardiac cath | 93539 | | 1.51% | 0.21% | 296.64 | N/A | N/A | N/A | N/A | N/A | 119.69 | 58.95 | 111.50 | N/A | N/A | N/A | 387.65 | N/A | N/A | N/A | N/A | N/A | N/A |
| Injection for aortography | 93544 | | 1.32% | 0.12% | 34.53 | N/A | N/A | N/A | N/A | N/A | 85.55 | 42.16 | 80.03 | N/A | N/A | N/A | 277.64 | N/A | N/A | N/A | N/A | N/A | N/A |

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- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

The procedure codes used for interventional cardiology have changed in 2011 and as a result, fee schedule for fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-12
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Interventional Cardiology**

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|------------|----------|----------|----------|----------|----------|------------|----------|----------|----------|-----------------|----------|------------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Left heart catheterization | 93510 | 26 | 16.56% | 46.77% | \$2,203.48 | \$389.01 | \$416.15 | \$453.32 | \$389.54 | \$605.25 | \$2,700.00 | \$408.53 | \$390.61 | \$462.30 | \$366.48 | \$400.34 | \$2,700.00 | \$430.44 | \$398.42 | \$497.00 | \$439.28 | \$518.00 |
| Imaging, cardiac cath | 93556 | 26 | 17.19% | 8.45% | 495.93 | 79.54 | 85.16 | 85.04 | 73.22 | 116.55 | 525.00 | 74.91 | 71.90 | 85.00 | 66.96 | 81.39 | 525.00 | 76.32 | 73.34 | 92.30 | 79.31 | 99.00 |
| Ri & Lt heart catheters | 93526 | 26 | 1.62% | 6.41% | 2,614.94 | 505.40 | Not Cred | 646.09 | 567.81 | 1,084.45 | 3,321.00 | 552.40 | Not Cred | 637.17 | 507.06 | 648.62 | 3,375.00 | 560.27 | Not Cred | 682.00 | 593.90 | 906.00 |
| Ablate heart dysrhythm focus | 93651 | | 1.20% | 6.35% | 5,750.14 | 1,700.93 | 2,879.59 | 1,789.96 | 1,424.63 | 2,070.63 | 6,222.00 | 1,482.11 | 1,720.71 | 1,701.13 | 1,375.10 | 1,675.00 | 6,222.00 | 1,561.00 | 5,362.18 | 1,975.16 | 1,623.75 | 2,267.35 |
| Imaging, cardiac cath | 93555 | 26 | 15.57% | 6.25% | 370.18 | 77.08 | 86.57 | 83.67 | 71.20 | 101.61 | 465.00 | 73.08 | 70.20 | 83.08 | 64.74 | 86.33 | 473.00 | 74.43 | 71.60 | 90.17 | 77.21 | 91.00 |
| Electrophysiology evaluation | 93620 | 26 | 1.54% | 5.30% | 3,960.69 | 1,329.21 | 2,876.48 | 995.74 | 911.01 | 1,212.04 | 4,147.00 | 1,009.74 | 1,293.07 | 1,076.26 | 921.12 | 1,057.86 | 4,147.00 | 1,128.00 | 4,680.65 | 1,228.56 | 1,135.34 | 1,418.80 |
| Inject for coronary x-rays | 93545 | | 17.07% | 2.84% | 458.37 | 46.52 | 48.86 | 74.60 | 57.11 | 103.27 | 510.00 | 36.34 | 34.53 | 41.85 | 32.94 | 43.00 | 510.00 | 39.14 | 36.10 | 53.20 | 43.00 | 192.32 |
| Cath placement, angiography | 93508 | 26 | 1.08% | 2.34% | 2,576.92 | 353.92 | Not Cred | 391.06 | 369.49 | 518.07 | 2,525.00 | 380.25 | Not Cred | 425.75 | 355.65 | 419.07 | 2,525.00 | 439.36 | Not Cred | 471.25 | 442.40 | 875.51 |
| Transcath closure of asd | 93580 | | 0.31% | 1.80% | Not Cred | Not Cred | No Data | 1,666.16 | 1,586.69 | Not Cred | Not Cred | Not Cred | No Data | 1,709.62 | 1,543.42 | Not Cred | Not Cred | Not Cred | No Data | 2,004.10 | 1,764.21 | Not Cred |
| Injection for heart x-rays | 93543 | | 15.27% | 1.67% | 411.69 | 27.71 | 35.10 | 37.19 | 30.71 | 74.43 | 487.00 | 25.84 | 24.91 | 28.80 | 22.14 | 43.00 | 495.00 | 27.00 | 41.88 | 38.27 | 28.80 | 95.04 |
| Electrophys map 3d, add-on | 93613 | | 0.58% | 1.32% | 2,612.80 | 752.30 | Not Cred | 730.21 | 627.82 | Not Cred | 2,738.00 | 624.50 | Not Cred | 712.65 | 591.84 | Not Cred | 2,738.00 | 819.00 | Not Cred | 852.74 | 681.11 | Not Cred |
| Electrophysiology evaluation | 93641 | 26 | 0.67% | 1.17% | Not Cred | Not Cred | Not Cred | 512.66 | 457.71 | Not Cred | Not Cred | Not Cred | Not Cred | 550.38 | 466.48 | Not Cred | Not Cred | Not Cred | Not Cred | 642.59 | 553.60 | Not Cred |
| Biopsy of heart lining | 93505 | 26 | 0.49% | 1.00% | No Data | Not Cred | Not Cred | 456.25 | Not Cred | Not Cred | No Data | Not Cred | Not Cred | 473.60 | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | 473.60 | Not Cred |
| Stimulation, pacing heart | 93623 | 26 | 1.02% | 0.88% | 830.24 | 262.47 | Not Cred | 299.99 | 253.19 | Not Cred | 861.00 | 260.05 | Not Cred | 291.00 | 232.73 | Not Cred | 861.00 | 284.00 | Not Cred | 333.26 | 284.93 | Not Cred |
| Electrophysiology evaluation | 93621 | 26 | 1.22% | 0.80% | 969.55 | 182.08 | 199.68 | 223.24 | 204.54 | 391.75 | 1,019.00 | 187.14 | 186.25 | 214.50 | 190.34 | 209.56 | 1,019.00 | 193.96 | 222.94 | 248.64 | 236.00 | 255.37 |
| Injection, cardiac cath | 93540 | | 1.35% | 0.26% | Not Cred | 68.22 | Not Cred | 53.88 | 53.78 | Not Cred | Not Cred | 39.58 | Not Cred | 44.22 | 34.56 | Not Cred | Not Cred | 91.81 | Not Cred | 48.24 | 43.85 | Not Cred |
| Injection, cardiac cath | 93539 | | 1.51% | 0.21% | 352.21 | 46.77 | Not Cred | 48.28 | 40.73 | Not Cred | 502.00 | 36.68 | Not Cred | 40.55 | 32.10 | Not Cred | 502.00 | 43.75 | Not Cred | 45.99 | 39.14 | Not Cred |
| Injection for aortography | 93544 | | 1.32% | 0.12% | Not Cred | 50.98 | Not Cred | 51.16 | 38.15 | 64.79 | Not Cred | 22.90 | Not Cred | 27.00 | 23.01 | 46.50 | Not Cred | 96.21 | Not Cred | 33.00 | 28.47 | 113.65 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

The procedure codes used for interventional cardiology have changed in 2011 and as a result, fee schedule for fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-12
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Interventional Cardiology

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|------------|----------|----------|----------|----------|------------|------------|----------|----------|----------|-----------------|----------|------------|----------|----------|----------|----------|------------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Left heart catheterization | 93510 | 26 | 16.56% | 46.77% | \$2,048.97 | \$626.66 | \$741.51 | \$610.91 | \$674.95 | \$1,401.51 | \$2,657.00 | \$552.00 | \$650.00 | \$568.00 | \$587.00 | \$680.00 | \$2,700.00 | \$809.00 | \$945.00 | \$676.00 | \$731.40 | \$2,929.00 |
| Imaging, cardiac cath | 93556 | 26 | 17.19% | 8.45% | 408.20 | 118.45 | 111.26 | 111.96 | 121.66 | 257.28 | 517.00 | 99.20 | 101.00 | 102.50 | 109.20 | 205.00 | 525.00 | 172.48 | 135.00 | 124.00 | 134.60 | 569.00 |
| Rt & Lt heart catheters | 93526 | 26 | 1.62% | 6.41% | Not Cred | 931.58 | 1,239.68 | 845.13 | 945.00 | 1,961.90 | Not Cred | 793.00 | 1,380.00 | 831.00 | 948.79 | 1,515.50 | Not Cred | 1,599.81 | 1,884.26 | 1,155.00 | 1,182.00 | 3,661.00 |
| Ablate heart dysrhythm focus | 93651 | | 1.20% | 6.35% | Not Cred | 1,764.62 | No Data | 2,639.95 | 2,357.18 | Not Cred | Not Cred | 1,675.00 | No Data | 2,761.00 | 2,156.00 | Not Cred | Not Cred | 1,838.00 | No Data | 2,887.50 | 2,691.30 | Not Cred |
| Imaging, cardiac cath | 93555 | 26 | 15.57% | 6.25% | 399.31 | 107.15 | 108.53 | 113.24 | 111.48 | 234.25 | 473.00 | 96.80 | 84.00 | 99.50 | 100.00 | 107.25 | 473.00 | 168.31 | 123.00 | 122.00 | 120.62 | 513.00 |
| Electrophysiology evaluation | 93620 | 26 | 1.54% | 5.30% | Not Cred | 1,332.21 | Not Cred | 1,807.43 | 1,827.31 | Not Cred | Not Cred | 1,258.00 | Not Cred | 1,840.00 | 1,519.50 | Not Cred | Not Cred | 1,597.00 | Not Cred | 1,909.00 | 2,000.00 | Not Cred |
| Inject for coronary x-rays | 93545 | | 17.07% | 2.84% | 468.23 | 120.91 | 150.40 | 160.56 | 204.45 | 333.18 | 510.00 | 50.00 | 120.85 | 60.00 | 138.00 | 324.00 | 510.00 | 243.00 | 253.00 | 300.00 | 415.00 | 553.00 |
| Cath placement, angiography | 93508 | 26 | 1.08% | 2.34% | 2,622.57 | 385.95 | 538.85 | 552.46 | 598.25 | Not Cred | 2,525.00 | 416.00 | 465.00 | 517.00 | 555.50 | Not Cred | 3,446.00 | 556.00 | 712.00 | 558.00 | 599.25 | Not Cred |
| Transcath closure of asd | 93580 | | 0.31% | 1.80% | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data |
| Injection for heart x-rays | 93543 | | 15.27% | 1.67% | No Data | 109.49 | Not Cred | 97.75 | 108.05 | Not Cred | No Data | 61.20 | Not Cred | 72.00 | 46.60 | Not Cred | No Data | 218.00 | Not Cred | 155.00 | 202.00 | Not Cred |
| Electrophys map 3d, add-on | 93613 | | 0.58% | 1.32% | Not Cred | Not Cred | No Data | Not Cred | 1,046.89 | Not Cred | Not Cred | Not Cred | No Data | Not Cred | 893.60 | Not Cred | Not Cred | Not Cred | No Data | Not Cred | 1,057.48 | Not Cred |
| Electrophysiology evaluation | 93641 | 26 | 0.67% | 1.17% | Not Cred | 722.02 | Not Cred | 812.95 | 845.80 | Not Cred | Not Cred | 632.00 | Not Cred | 773.99 | 754.00 | Not Cred | Not Cred | 865.00 | Not Cred | 945.50 | 981.60 | Not Cred |
| Biopsy of heart lining | 93505 | 26 | 0.49% | 1.00% | Not Cred | Not Cred | No Data | Not Cred | 720.20 | No Data | Not Cred | Not Cred | No Data | Not Cred | 721.90 | No Data | Not Cred | Not Cred | No Data | Not Cred | 721.90 | No Data |
| Stimulation, pacing heart | 93623 | 26 | 1.02% | 0.88% | Not Cred | 315.45 | Not Cred | 438.06 | 496.67 | Not Cred | Not Cred | 304.00 | Not Cred | 437.00 | 364.50 | Not Cred | Not Cred | 323.00 | Not Cred | 468.00 | 431.04 | Not Cred |
| Electrophysiology evaluation | 93621 | 26 | 1.22% | 0.80% | Not Cred | 231.93 | Not Cred | 731.68 | 407.70 | Not Cred | Not Cred | 220.50 | Not Cred | 452.00 | 275.00 | Not Cred | Not Cred | 280.00 | Not Cred | 1,865.60 | 317.90 | Not Cred |
| Injection, cardiac cath | 93540 | | 1.35% | 0.26% | 407.45 | 127.77 | 114.22 | 174.94 | 230.63 | 383.14 | 517.00 | 54.00 | 73.00 | 65.00 | 132.00 | 391.50 | 525.00 | 216.00 | 185.00 | 200.00 | 465.70 | 570.00 |
| Injection, cardiac cath | 93539 | | 1.51% | 0.21% | 394.43 | 82.56 | 113.00 | 95.72 | 146.16 | 242.23 | 510.00 | 52.00 | 130.00 | 60.00 | 140.00 | 158.84 | 510.00 | 76.00 | 166.00 | 150.00 | 264.00 | 482.50 |
| Injection for aortography | 93544 | | 1.32% | 0.12% | Not Cred | Not Cred | 141.95 | 92.34 | 114.90 | Not Cred | Not Cred | Not Cred | 85.14 | 41.30 | 53.00 | Not Cred | Not Cred | Not Cred | 255.00 | 110.00 | 208.00 | Not Cred |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

The procedure codes used for interventional cardiology have changed in 2011 and as a result, fee schedule for fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-13
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Laboratory

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | |
|------------------------------|-------|----------|-------------------------|-----------------|----------|---------|---------|---------|---------|---------|---------|---------|---------|------------------------|----------|---------|---------|---------|---------|---------|---------|--|
| | | | % of Total Util | % of Total RVUs | Portland | | | Rest Of | | Seattle | | Rest Of | | | Portland | | Rest of | | Seattle | | Rest of | |
| | | | | | AK | ID | ND | OR | OR | WA | WA | WY | AK | ID | ND | OR | OR | WA | WA | WY | | |
| Lipid panel | 80061 | | 5.94% | 6.21% | \$18.85 | \$15.96 | \$17.17 | \$18.85 | \$18.85 | \$18.85 | \$18.85 | \$18.85 | \$15.67 | \$23.08 | \$17.59 | \$17.23 | \$17.44 | \$17.44 | \$16.01 | \$16.13 | \$17.61 | |
| Tissue exam by pathologist | 88305 | 26 | 0.99% | 5.72% | 49.95 | 35.61 | 36.17 | 36.44 | 35.86 | 37.82 | 36.18 | 36.37 | 72.48 | 36.54 | 36.29 | 37.24 | 36.71 | 38.30 | 37.02 | 36.47 | | |
| Assay thyroid stim hormone | 84443 | | 3.77% | 5.08% | 23.64 | 22.14 | 23.64 | 23.64 | 23.64 | 23.56 | 23.56 | 23.09 | 28.94 | 22.05 | 21.60 | 21.86 | 21.86 | 20.08 | 20.22 | 22.08 | | |
| Cytopath c/v auto fluid redo | 88175 | | 2.05% | 4.09% | 37.28 | 36.57 | 37.28 | 37.28 | 37.28 | 37.28 | 37.28 | 37.28 | 45.63 | 34.77 | 34.06 | 34.48 | 34.48 | 31.66 | 31.89 | 34.81 | | |
| Comprehen metabolic panel | 80053 | | 4.75% | 3.94% | 14.87 | 14.87 | 14.87 | 14.87 | 14.87 | 12.01 | 12.01 | 14.87 | 18.20 | 13.87 | 13.59 | 13.76 | 13.76 | 12.63 | 12.72 | 13.89 | | |
| Chylmd trach, dna, amp probe | 87491 | | 1.23% | 3.28% | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 60.47 | 46.08 | 45.14 | 45.69 | 45.69 | 41.95 | 42.26 | 46.13 | | |
| N.gonorrhoeae, dna, amp prob | 87591 | | 1.19% | 3.16% | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 60.47 | 46.08 | 45.14 | 45.69 | 45.69 | 41.95 | 42.26 | 46.13 | | |
| Complete cbc w/auto diff wbc | 85025 | | 4.34% | 2.64% | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 13.40 | 10.21 | 10.00 | 10.12 | 10.12 | 9.30 | 9.36 | 10.22 | | |
| Hpv, dna, amp probe | 87621 | | 0.94% | 2.51% | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 60.47 | 46.08 | 45.14 | 45.69 | 45.69 | 41.95 | 42.26 | 46.13 | | |
| General health panel | 80050 | | 2.09% | 2.14% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 60.84 | 46.36 | 45.42 | 45.97 | 45.97 | 42.21 | 42.52 | 46.41 | | |
| Assay of psa, total | 84153 | | 1.21% | 1.77% | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 31.68 | 24.14 | 23.65 | 23.94 | 23.94 | 21.98 | 22.14 | 24.17 | | |
| Glycosylated hemoglobin test | 83036 | | 2.11% | 1.62% | 13.66 | 9.84 | 13.66 | 13.66 | 13.66 | 13.66 | 13.66 | 10.69 | 16.72 | 12.74 | 12.48 | 12.63 | 12.63 | 11.60 | 11.68 | 12.75 | | |
| Cytopath, c/v, thin layer | 88142 | | 1.03% | 1.60% | 28.51 | 28.51 | 28.51 | 28.51 | 28.51 | 28.51 | 28.51 | 28.51 | 34.91 | 26.60 | 26.06 | 26.38 | 26.38 | 24.22 | 24.40 | 26.63 | | |
| Urine culture/colony count | 87086 | | 1.99% | 1.26% | 11.36 | 11.36 | 11.36 | 11.36 | 11.36 | 11.36 | 11.36 | 5.29 | 13.92 | 10.61 | 10.39 | 10.52 | 10.52 | 9.66 | 9.73 | 10.62 | | |
| Assay of free thyroxine | 84439 | | 1.67% | 1.19% | 12.69 | 12.69 | 11.40 | 12.69 | 12.69 | 12.31 | 12.31 | 12.69 | 15.54 | 11.84 | 11.60 | 11.74 | 11.74 | 10.78 | 10.86 | 11.85 | | |
| Assay of total testosterone | 84403 | | 0.55% | 1.12% | 36.33 | 33.06 | 36.33 | 36.33 | 36.33 | 36.33 | 36.33 | 36.33 | 44.48 | 33.89 | 33.20 | 33.61 | 33.61 | 30.86 | 31.08 | 33.93 | | |
| Routine venipuncture | 36415 | | 5.67% | 0.98% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | |
| Culture, bacteria, other | 87070 | | 1.13% | 0.77% | 12.12 | 12.12 | 12.12 | 12.12 | 12.12 | 12.12 | 12.12 | 5.29 | 14.84 | 11.31 | 11.08 | 11.21 | 11.21 | 10.30 | 10.37 | 11.32 | | |
| Metabolic panel total ca | 80048 | | 1.08% | 0.71% | 11.91 | 11.91 | 11.91 | 11.91 | 11.91 | 8.99 | 8.99 | 10.82 | 14.57 | 11.11 | 10.88 | 11.01 | 11.01 | 10.11 | 10.19 | 11.12 | | |
| Hepatic function panel | 80076 | | 1.08% | 0.68% | 11.49 | 11.49 | 11.49 | 11.49 | 11.49 | 8.99 | 8.99 | 10.82 | 14.07 | 10.72 | 10.51 | 10.63 | 10.63 | 9.76 | 9.84 | 10.74 | | |
| Assay of total thyroxine | 84436 | | 1.03% | 0.56% | 9.67 | 9.67 | 9.67 | 9.67 | 9.67 | 9.67 | 9.67 | 9.67 | 11.84 | 9.02 | 8.84 | 8.94 | 8.94 | 8.21 | 8.27 | 9.03 | | |
| Assay of blood/uric acid | 84550 | | 1.04% | 0.38% | 6.36 | 6.36 | 6.36 | 6.36 | 6.36 | 6.36 | 6.36 | 6.36 | 7.79 | 5.93 | 5.81 | 5.88 | 5.88 | 5.40 | 5.44 | 5.94 | | |
| Urinalysis, auto w/scope | 81001 | | 1.34% | 0.34% | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 3.60 | 5.46 | 4.16 | 4.08 | 4.12 | 4.12 | 3.79 | 3.82 | 4.16 | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-13
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Laboratory

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|-------------|------------|-------------------|-------|-------|---------|---------|---------|-------------------------|---------|---------|---------|---------|---------|--------------------------------------|---------|---------|---------------|-------|---------|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| | | | Lipid panel | 80061 | | 5.94% | 6.21% | \$43.45 | \$15.96 | \$17.17 | \$18.85 | \$18.85 | \$15.67 | \$19.19 | \$15.85 | \$17.48 | \$14.20 | \$14.58 | \$14.00 | \$121.13 | TBD | \$42.93 |
| Tissue exam by pathologist | 88305 | 26 | 0.99% | 5.72% | 111.69 | 35.61 | 36.17 | 36.44 | 37.82 | 36.37 | 64.94 | 65.46 | 53.27 | 28.10 | 22.23 | N/A | 259.83 | TBD | N/A | 58.26 | 59.77 | N/A |
| Assay thyroid stim hormone | 84443 | | 3.77% | 5.08% | 57.55 | 22.14 | 23.64 | 23.64 | 23.56 | 23.09 | 24.06 | 21.98 | 24.06 | 17.80 | 18.22 | 20.64 | 122.82 | TBD | 59.10 | 80% of billed | 32.98 | N/A |
| Cytopath c/v auto fluid redo | 88175 | | 2.05% | 4.09% | 109.50 | 36.57 | 37.28 | 37.28 | 37.28 | 37.28 | 37.94 | 36.31 | 37.94 | 28.08 | 37.94 | N/A | 93.50 | TBD | 93.20 | 80% of billed | 52.19 | N/A |
| Comprehen metabolic panel | 80053 | | 4.75% | 3.94% | 49.40 | 14.87 | 14.87 | 14.87 | 12.01 | 14.87 | 15.14 | 14.77 | 15.14 | 11.20 | 9.29 | 13.29 | 91.24 | TBD | 37.17 | 80% of billed | 16.81 | N/A |
| Chylnd trach, dna, amp prob | 87491 | | 1.23% | 3.28% | 145.32 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 50.27 | 49.04 | 50.27 | 37.20 | 38.21 | N/A | 203.53 | TBD | 123.47 | 80% of billed | 69.15 | N/A |
| N.gonorrhoeae, dna, amp prob | 87591 | | 1.19% | 3.16% | 145.32 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 50.27 | 49.04 | 50.27 | 37.20 | 38.21 | N/A | 203.53 | TBD | 123.47 | 80% of billed | 69.15 | N/A |
| Complete cbc w/auto diff wbc | 85025 | | 4.34% | 2.64% | 40.35 | 10.94 | 10.94 | 10.94 | 10.94 | 10.94 | 11.14 | 10.86 | 11.14 | 8.24 | 8.47 | 9.85 | 56.86 | TBD | 27.35 | 80% of billed | 15.32 | N/A |
| Hpv, dna, amp probe | 87621 | | 0.94% | 2.51% | 145.32 | 49.39 | 49.39 | 49.39 | 49.39 | 49.39 | 50.27 | 49.04 | 50.27 | 37.20 | 38.21 | N/A | 203.53 | TBD | 123.47 | 80% of billed | 69.15 | N/A |
| General health panel | 80050 | | 2.09% | 2.14% | 121.78 | N/A | N/A | N/A | N/A | N/A | 50.13 | 51.11 | N/A | 36.75 | 36.67 | N/A | 173.06 | TBD | UCR | 80% of billed | 65.11 | N/A |
| Assay of psa, total | 84153 | | 1.21% | 1.77% | 66.02 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 26.34 | 25.70 | 26.34 | 19.49 | 20.02 | N/A | 140.35 | TBD | 64.72 | 80% of billed | 36.25 | N/A |
| Glycosylated hemoglobin test | 83036 | | 2.11% | 1.62% | 40.83 | 9.84 | 13.66 | 13.66 | 13.66 | 10.69 | 13.90 | 9.77 | 13.90 | 10.29 | 10.56 | N/A | 92.23 | TBD | 34.15 | 80% of billed | 19.12 | N/A |
| Cytopath, c/v, thin layer | 88142 | | 1.03% | 1.60% | 83.92 | 28.51 | 28.51 | 28.51 | 28.51 | 28.51 | 29.02 | 28.31 | 29.02 | 21.47 | 29.02 | N/A | 81.51 | TBD | 71.28 | 80% of billed | 39.91 | N/A |
| Urine culture/colony count | 87086 | | 1.99% | 1.26% | 43.75 | 11.36 | 11.36 | 11.36 | 11.36 | 5.29 | 11.57 | 11.28 | 11.57 | 8.56 | 8.79 | N/A | 79.07 | TBD | 28.40 | 80% of billed | 15.90 | N/A |
| Assay of free thyroxine | 84439 | | 1.67% | 1.19% | 70.00 | 12.69 | 11.40 | 12.69 | 12.31 | 12.69 | 12.92 | 12.60 | 11.60 | 9.56 | 9.52 | N/A | 87.74 | TBD | 28.50 | 80% of billed | 17.23 | N/A |
| Assay of total testosterone | 84403 | | 0.55% | 1.12% | 106.43 | 33.06 | 36.33 | 36.33 | 36.33 | 36.33 | 36.98 | 32.82 | 36.98 | 27.37 | 28.10 | N/A | 137.45 | TBD | 90.83 | 80% of billed | 50.86 | N/A |
| Routine venipuncture | 36415 | | 5.67% | 0.98% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A |
| Culture, bacteria, other | 87070 | | 1.13% | 0.77% | 57.91 | 12.12 | 12.12 | 12.12 | 12.12 | 5.29 | 12.34 | 12.03 | 12.34 | 9.13 | 9.38 | N/A | 85.40 | TBD | 30.30 | 80% of billed | 16.97 | N/A |
| Metabolic panel total ca | 80048 | | 1.08% | 0.71% | 48.58 | 11.91 | 11.91 | 11.91 | 8.99 | 10.82 | 12.12 | 11.83 | 12.12 | 8.97 | 6.95 | N/A | 66.08 | TBD | 29.77 | 80% of billed | 12.59 | N/A |
| Hepatic function panel | 80076 | | 1.08% | 0.68% | 49.84 | 11.49 | 11.49 | 11.49 | 8.99 | 10.82 | 11.70 | 11.42 | 11.70 | 8.66 | 6.95 | N/A | 62.93 | TBD | 28.72 | 80% of billed | 12.59 | N/A |
| Assay of total thyroxine | 84436 | | 1.03% | 0.56% | 28.82 | 9.67 | 9.67 | 9.67 | 9.67 | 9.67 | 9.84 | 9.61 | 9.84 | 7.28 | 7.48 | N/A | 52.64 | TBD | 24.18 | 80% of billed | 13.54 | N/A |
| Assay of blood/uric acid | 84550 | | 1.04% | 0.38% | 11.44 | 6.36 | 6.36 | 6.36 | 6.36 | 6.36 | 6.47 | 6.31 | 6.47 | 4.79 | 4.92 | N/A | 38.02 | TBD | 15.90 | 80% of billed | 8.90 | N/A |
| Urinalysis, auto w/scope | 81001 | | 1.34% | 0.34% | 32.35 | 4.45 | 4.45 | 4.45 | 4.45 | 3.60 | 4.54 | 4.43 | 4.54 | 3.36 | 3.45 | N/A | 36.49 | TBD | 11.12 | 80% of billed | 6.23 | N/A |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-13
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Laboratory

| | | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|--------|-----------------------------------|-----------------|-----------------|---------|---------|---------|---------|---------|---------|---------|---------|---------|-----------------|---------|---------|---------|---------|---------|---------|---------|---------|--|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | | |
| Description | HCP/CS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Lipid panel | 80061 | | 5.94% | 6.21% | \$58.57 | \$29.49 | \$37.31 | \$26.38 | \$20.73 | \$40.22 | \$59.90 | \$27.00 | \$34.93 | \$26.96 | \$19.57 | \$36.00 | \$97.00 | \$40.15 | \$34.93 | \$29.40 | \$22.47 | \$63.00 | |
| Tissue exam by pathologist | 88305 | 26 | 0.99% | 5.72% | 226.49 | 72.40 | 65.94 | 77.08 | 64.43 | 127.60 | 250.00 | 61.60 | 58.31 | 68.38 | 57.17 | 113.00 | 260.00 | 78.75 | 64.13 | 74.52 | 73.76 | 194.00 | |
| Assay thyroid stim hormone | 84443 | | 3.77% | 5.08% | 53.09 | 30.61 | 49.18 | 32.56 | 25.51 | 46.78 | 45.00 | 31.21 | 48.09 | 32.86 | 24.44 | 41.52 | 91.00 | 31.88 | 48.09 | 35.09 | 28.07 | 68.00 | |
| Cytopath c/v auto fluid redo | 88175 | | 2.05% | 4.09% | 61.74 | 48.01 | 72.66 | 48.96 | 40.68 | 73.24 | 49.50 | 50.25 | 75.83 | 51.81 | 37.01 | 74.00 | 90.00 | 52.73 | 75.83 | 54.50 | 44.47 | 99.90 | |
| Comprehen metabolic panel | 80053 | | 4.75% | 3.94% | 47.74 | 21.24 | 31.51 | 21.74 | 15.21 | 38.55 | 47.26 | 20.97 | 30.26 | 21.27 | 12.46 | 34.00 | 75.00 | 22.03 | 30.26 | 23.20 | 16.93 | 62.00 | |
| Chylind trach, dna, amp prob | 87491 | | 1.23% | 3.28% | 59.65 | 62.76 | 72.43 | 54.29 | 51.32 | 76.87 | 50.00 | 66.14 | 100.47 | 50.56 | 49.94 | 61.00 | 80.00 | 70.12 | 100.47 | 59.51 | 53.94 | 99.00 | |
| N.gonorrhoeae, dna, amp prob | 87591 | | 1.19% | 3.16% | 58.58 | 62.38 | 70.31 | 53.92 | 50.31 | 69.77 | 49.49 | 66.14 | 100.47 | 50.56 | 49.04 | 61.00 | 75.00 | 70.12 | 100.47 | 59.51 | 53.94 | 102.48 | |
| Complete cbc w/auto diff wbc | 85025 | | 4.34% | 2.64% | 34.86 | 16.34 | 24.54 | 16.14 | 12.43 | 29.04 | 40.00 | 15.42 | 22.25 | 15.64 | 11.35 | 27.30 | 50.00 | 16.38 | 22.25 | 20.74 | 13.03 | 47.00 | |
| Hpv, dna, amp probe | 87621 | | 0.94% | 2.51% | 89.79 | 61.23 | 101.54 | 65.17 | 53.18 | 70.89 | 66.00 | 66.14 | 100.00 | 68.66 | 49.04 | 63.75 | 157.47 | 69.64 | 126.00 | 72.45 | 54.91 | 114.80 | |
| General health panel | 80050 | | 2.09% | 2.14% | 134.32 | 58.64 | 79.23 | 66.65 | 53.59 | 89.21 | 140.24 | 59.27 | 70.00 | 64.80 | 55.00 | 80.00 | 212.00 | 62.70 | 122.40 | 81.60 | 63.27 | 135.75 | |
| Assay of psa, total | 84153 | | 1.21% | 1.77% | 75.92 | 34.49 | 55.96 | 34.50 | 28.20 | 48.84 | 82.24 | 34.86 | 52.66 | 34.80 | 26.83 | 40.28 | 110.00 | 36.49 | 53.71 | 37.01 | 30.84 | 72.25 | |
| Glycosylated hemoglobin test | 83036 | | 2.11% | 1.62% | 52.59 | 17.75 | 28.76 | 18.67 | 15.43 | 27.68 | 60.65 | 18.46 | 27.78 | 18.46 | 14.17 | 27.08 | 75.00 | 18.51 | 27.78 | 20.12 | 16.27 | 36.90 | |
| Cytopath, c/v, thin layer | 88142 | | 1.03% | 1.60% | 64.79 | 38.48 | 55.00 | 39.78 | 32.02 | 52.41 | 65.00 | 39.93 | 58.00 | 40.77 | 28.31 | 48.00 | 92.00 | 42.53 | 58.00 | 41.83 | 40.20 | 71.25 | |
| Urine culture/colony count | 87086 | | 1.99% | 1.26% | 38.70 | 16.58 | 23.85 | 14.84 | 13.12 | 16.13 | 36.10 | 16.02 | 23.11 | 14.15 | 11.79 | 11.74 | 66.00 | 16.95 | 23.11 | 16.24 | 13.43 | 32.00 | |
| Assay of free thyroxine | 84439 | | 1.67% | 1.19% | 45.71 | 18.22 | 24.69 | 17.88 | 14.38 | 29.84 | 43.35 | 16.97 | 23.17 | 17.40 | 12.77 | 20.39 | 79.00 | 17.89 | 23.17 | 18.62 | 14.66 | 48.57 | |
| Assay of total testosterone | 84403 | | 0.55% | 1.12% | 77.34 | 44.60 | 66.35 | 49.16 | 37.98 | 58.83 | 70.00 | 46.90 | 73.92 | 50.51 | 36.80 | 49.00 | 126.00 | 48.85 | 73.92 | 63.00 | 41.03 | 82.50 | |
| Routine venipuncture | 36415 | | 5.67% | 0.98% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 | |
| Culture, bacteria, other | 87070 | | 1.13% | 0.77% | 48.30 | 17.45 | 25.10 | 15.94 | 14.18 | 21.97 | 50.00 | 17.08 | 24.65 | 13.83 | 12.57 | 14.93 | 75.00 | 18.08 | 24.65 | 17.32 | 14.18 | 33.25 | |
| Metabolic panel total ca | 80048 | | 1.08% | 0.71% | 38.21 | 16.00 | 25.05 | 17.49 | 11.89 | 29.30 | 40.00 | 16.69 | 24.24 | 17.04 | 9.33 | 28.05 | 62.00 | 17.75 | 24.24 | 19.40 | 13.01 | 44.00 | |
| Hepatic function panel | 80076 | | 1.08% | 0.68% | 33.79 | 16.07 | 23.28 | 16.60 | 11.55 | 26.64 | 30.00 | 16.22 | 23.40 | 16.44 | 9.33 | 20.00 | 56.00 | 16.95 | 23.40 | 18.20 | 12.79 | 42.00 | |
| Assay of total thyroxine | 84436 | | 1.03% | 0.56% | 29.26 | 12.04 | 17.85 | 13.37 | 10.36 | 17.63 | 34.17 | 12.86 | 19.69 | 13.65 | 9.80 | 12.57 | 45.00 | 13.65 | 19.69 | 15.08 | 10.57 | 25.09 | |
| Assay of blood/uric acid | 84550 | | 1.04% | 0.38% | 18.07 | 8.70 | 11.38 | 8.97 | 6.48 | 13.47 | 16.00 | 8.72 | 9.12 | 8.83 | 6.31 | 8.24 | 30.00 | 8.96 | 12.93 | 11.55 | 6.94 | 22.07 | |
| Urinalysis, auto w/scope | 81001 | | 1.34% | 0.34% | 23.55 | 7.37 | 10.17 | 7.97 | 6.16 | 11.33 | 30.00 | 6.47 | 9.08 | 6.38 | 4.63 | 9.33 | 36.00 | 6.78 | 9.08 | 8.55 | 5.56 | 17.00 | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-13
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Laboratory

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|---------|----------|---------|---------|----------|----------|---------|----------|---------|-----------------|----------|----------|---------|----------|---------|---------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Lipid panel | 80061 | | 5.94% | 6.21% | \$69.85 | \$45.11 | \$59.69 | \$45.18 | \$49.63 | \$67.63 | \$81.00 | \$39.20 | \$56.00 | \$40.00 | \$40.00 | \$71.00 | \$93.00 | \$57.10 | \$70.00 | \$54.90 | \$68.22 | \$86.00 |
| Tissue exam by pathologist | 88305 | 26 | 0.99% | 5.72% | 203.69 | 90.67 | 92.46 | 106.85 | 112.96 | 107.68 | 210.00 | 94.20 | 94.75 | 86.00 | 104.00 | 97.00 | 260.00 | 135.00 | 110.00 | 150.75 | 138.00 | 157.00 |
| Assay thyroid stim hormone | 84443 | | 3.77% | 5.08% | 58.37 | 49.23 | 64.39 | 49.42 | 52.04 | 72.26 | 45.00 | 40.17 | 62.00 | 45.00 | 44.31 | 72.42 | 94.00 | 55.73 | 67.00 | 53.00 | 62.00 | 85.00 |
| Cytopath c/v auto fluid redo | 88175 | | 2.05% | 4.09% | 62.10 | 60.80 | 79.42 | 61.47 | 71.42 | 87.58 | 49.50 | 58.00 | 78.00 | 49.00 | 70.00 | 74.00 | 90.00 | 61.86 | 84.00 | 69.25 | 90.00 | 115.00 |
| Comprehen metabolic panel | 80053 | | 4.75% | 3.94% | 45.03 | 38.41 | 61.10 | 35.30 | 38.95 | 48.15 | 42.85 | 39.29 | 61.00 | 32.63 | 39.29 | 53.00 | 65.00 | 42.26 | 65.00 | 44.31 | 51.00 | 56.00 |
| Chylmd trach, dna, amp probe | 87491 | | 1.23% | 3.28% | Not Cred | 71.48 | Not Cred | 66.56 | 77.62 | Not Cred | Not Cred | 71.11 | Not Cred | 59.52 | 74.31 | Not Cred | Not Cred | 74.31 | Not Cred | 80.00 | 80.00 | Not Cred |
| N.gonorrhoeae, dna, amp prob | 87591 | | 1.19% | 3.16% | Not Cred | 69.76 | Not Cred | 67.11 | 77.78 | Not Cred | Not Cred | 68.56 | Not Cred | 59.51 | 74.31 | Not Cred | Not Cred | 74.31 | Not Cred | 80.00 | 82.00 | Not Cred |
| Complete cbc w/auto diff wbc | 85025 | | 4.34% | 2.64% | 33.93 | 29.96 | 42.83 | 26.51 | 32.26 | 37.16 | 27.51 | 30.00 | 40.00 | 24.00 | 30.00 | 37.00 | 46.00 | 39.10 | 49.00 | 32.50 | 40.03 | 56.00 |
| Hpv, dna, amp probe | 87621 | | 0.94% | 2.51% | Not Cred | 95.05 | Not Cred | 103.51 | 95.98 | 118.83 | Not Cred | 75.61 | Not Cred | 98.57 | 94.69 | 102.71 | Not Cred | 105.00 | Not Cred | 105.00 | 105.00 | 154.00 |
| General health panel | 80050 | | 2.09% | 2.14% | Not Cred | 100.36 | Not Cred | 103.38 | 102.29 | Not Cred | Not Cred | 119.00 | Not Cred | 112.00 | 109.00 | Not Cred | Not Cred | 121.50 | Not Cred | 121.50 | 121.50 | Not Cred |
| Assay of psa, total | 84153 | | 1.21% | 1.77% | 65.76 | 58.92 | 75.35 | 60.17 | 66.33 | 80.63 | 54.00 | 50.00 | 80.00 | 51.40 | 55.10 | 71.50 | 115.00 | 75.00 | 80.00 | 72.00 | 89.00 | 114.00 |
| Glycosylated hemoglobin test | 83036 | | 2.11% | 1.62% | 50.23 | 39.10 | 42.08 | 36.44 | 39.00 | 43.22 | 40.00 | 40.70 | 37.00 | 33.90 | 36.00 | 45.00 | 78.00 | 45.84 | 54.00 | 41.00 | 45.84 | 60.00 |
| Cytopath, c/v, thin layer | 88142 | | 1.03% | 1.60% | Not Cred | 59.90 | Not Cred | 48.02 | 69.19 | Not Cred | Not Cred | 60.00 | Not Cred | 46.63 | 73.00 | Not Cred | Not Cred | 75.00 | Not Cred | 60.00 | 80.00 | Not Cred |
| Urine culture/colony count | 87086 | | 1.99% | 1.26% | 34.69 | 38.38 | 37.83 | 32.23 | 40.26 | 38.16 | 35.66 | 38.00 | 41.00 | 32.00 | 37.50 | 35.00 | 37.50 | 52.40 | 41.00 | 37.50 | 52.68 | 55.00 |
| Assay of free thyroxine | 84439 | | 1.67% | 1.19% | 62.50 | 42.77 | 40.88 | 36.73 | 44.05 | 66.61 | 63.00 | 39.56 | 36.00 | 31.50 | 37.40 | 61.00 | 75.00 | 63.00 | 41.00 | 40.40 | 49.00 | 75.00 |
| Assay of total testosterone | 84403 | | 0.55% | 1.12% | 95.23 | 82.75 | 102.07 | 82.88 | 84.60 | 113.33 | 80.13 | 61.50 | 98.00 | 72.16 | 72.16 | 101.20 | 157.68 | 99.69 | 129.75 | 93.81 | 99.69 | 169.00 |
| Routine venipuncture | 36415 | | 5.67% | 0.98% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |
| Culture, bacteria, other | 87070 | | 1.13% | 0.77% | 55.39 | 44.04 | 41.47 | 41.25 | 49.82 | 58.05 | 57.82 | 42.02 | 39.00 | 36.60 | 42.02 | 51.00 | 81.32 | 50.49 | 47.00 | 63.00 | 77.05 | 82.00 |
| Metabolic panel total ca | 80048 | | 1.08% | 0.71% | 40.44 | 32.04 | 49.24 | 28.26 | 32.44 | 39.27 | 34.29 | 34.00 | 51.00 | 25.00 | 33.00 | 41.00 | 62.00 | 38.70 | 62.00 | 34.32 | 38.70 | 48.00 |
| Hepatic function panel | 80076 | | 1.08% | 0.68% | 28.91 | 28.74 | 43.95 | 27.28 | 33.52 | 42.43 | 14.75 | 26.00 | 48.00 | 26.00 | 35.00 | 41.00 | 48.00 | 39.53 | 49.00 | 32.85 | 42.40 | 55.00 |
| Assay of total thyroxine | 84436 | | 1.03% | 0.56% | 31.30 | 33.98 | Not Cred | 29.82 | 33.79 | 36.09 | 34.50 | 34.80 | Not Cred | 29.00 | 37.80 | 37.00 | 34.50 | 39.56 | Not Cred | 39.56 | 43.00 | 41.81 |
| Assay of blood/uric acid | 84550 | | 1.04% | 0.38% | 24.99 | 16.57 | 24.57 | 16.79 | 17.56 | 23.05 | 30.00 | 11.36 | 19.00 | 15.34 | 15.00 | 24.50 | 30.00 | 24.00 | 38.00 | 21.00 | 27.00 | 27.50 |
| Urinalysis, auto w/scope | 81001 | | 1.34% | 0.34% | 23.70 | 21.11 | 19.60 | 18.93 | 24.62 | 20.94 | 24.00 | 19.00 | 21.00 | 18.50 | 20.00 | 20.50 | 38.00 | 36.63 | 21.00 | 24.00 | 37.55 | 26.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-14
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Neurology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|---------|----------|----------|---------|----------|----------|----------|------------------------|---------|---------|---------|---------|----------|---------|---------|---------|---------|---------|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | Rest Of | WA | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99214 | | 14.78% | 10.71% | \$130.96 | \$98.08 | \$100.41 | \$101.63 | \$99.18 | \$107.25 | \$101.06 | \$102.45 | \$182.64 | \$96.32 | \$95.07 | \$99.31 | \$97.05 | \$103.52 | \$98.63 | \$96.32 | \$98.63 | \$96.32 | \$96.32 | |
| Office consultation | 99244 | | 5.68% | 8.17% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | 186.85 | 183.17 | 183.17 | |
| Office consultation | 99245 | | 3.80% | 6.73% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | 228.17 | 224.00 | 224.00 | |
| Polysomnography, 4 or more | 95810 | 26 | 1.48% | 5.38% | 170.05 | 121.81 | 123.51 | 124.66 | 122.63 | 129.97 | 124.26 | 125.55 | 334.42 | 167.93 | 166.58 | 170.72 | 168.50 | 175.82 | 170.24 | 168.39 | 170.24 | 168.39 | 168.39 | |
| Office/outpatient visit, est | 99213 | | 10.83% | 5.23% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | 65.82 | 64.23 | 64.23 | |
| Polysomnography w/cpap | 95811 | 26 | 1.17% | 4.82% | 177.60 | 127.32 | 129.10 | 130.33 | 128.19 | 135.94 | 129.94 | 131.34 | 360.49 | 181.07 | 179.54 | 184.03 | 181.65 | 189.64 | 183.62 | 181.72 | 183.62 | 181.72 | 181.72 | |
| Office/outpatient visit, est | 99215 | | 4.50% | 4.40% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | 133.18 | 130.32 | 130.32 | |
| Natalizumab injection | J2323 | | 0.20% | 3.11% | 10.21 | 10.21 | 10.21 | 10.21 | 10.21 | 10.21 | 10.21 | 10.21 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Mri brain w/o & w/dye | 70553 | 26 | 0.39% | 2.26% | 159.35 | 113.98 | 115.30 | 116.49 | 114.66 | 121.71 | 116.51 | 118.15 | 233.34 | 118.21 | 117.00 | 120.37 | 118.62 | 124.45 | 120.18 | 118.82 | 120.18 | 118.82 | 118.82 | |
| Eeg, awake and asleep | 95819 | 26 | 2.25% | 2.23% | 73.73 | 52.85 | 53.62 | 54.11 | 53.22 | 56.40 | 53.90 | 54.43 | 105.45 | 53.28 | 52.83 | 54.27 | 53.49 | 55.96 | 54.07 | 53.37 | 54.07 | 53.37 | 53.37 | |
| Sense nerve conduction test | 95904 | | 5.88% | 2.22% | 62.29 | 50.39 | 52.63 | 53.38 | 51.39 | 57.08 | 52.48 | 53.04 | 81.00 | 46.28 | 45.46 | 48.84 | 47.01 | 51.64 | 48.02 | 45.79 | 48.02 | 45.79 | 45.79 | |
| Botulinum toxin a per unit | J0585 | | 0.50% | 2.09% | 5.48 | 5.48 | 5.48 | 5.48 | 5.48 | 5.48 | 5.48 | 5.48 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Motor nerve conduction test | 95903 | | 3.58% | 1.74% | 83.77 | 66.34 | 68.91 | 69.86 | 67.50 | 74.46 | 68.91 | 69.72 | 110.49 | 61.63 | 60.63 | 64.61 | 62.46 | 68.02 | 63.69 | 61.14 | 63.69 | 61.14 | 61.14 | |
| Muscle test, 2 limbs | 95861 | | 1.92% | 1.70% | 163.66 | 125.90 | 130.03 | 131.60 | 127.76 | 139.28 | 129.99 | 131.25 | 218.82 | 118.23 | 116.66 | 122.89 | 119.51 | 128.50 | 121.45 | 117.52 | 121.45 | 117.52 | 117.52 | |
| Muscle test, one limb | 95860 | | 2.29% | 1.48% | 111.40 | 86.58 | 89.63 | 90.76 | 87.95 | 96.26 | 89.56 | 90.45 | 148.48 | 81.16 | 80.02 | 84.65 | 82.13 | 88.68 | 83.53 | 80.53 | 83.53 | 80.53 | 80.53 | |
| Eeg, awake and drowsy | 95816 | 26 | 1.40% | 1.46% | 73.95 | 53.05 | 53.77 | 54.29 | 53.40 | 56.67 | 54.16 | 54.79 | 105.78 | 53.48 | 52.97 | 54.45 | 53.67 | 56.22 | 54.32 | 53.70 | 54.32 | 53.70 | 53.70 | |
| Motor nerve conduction test | 95900 | | 3.07% | 1.33% | 71.19 | 57.27 | 59.77 | 60.59 | 58.38 | 64.71 | 59.58 | 60.17 | 92.83 | 52.71 | 51.81 | 55.54 | 53.51 | 58.63 | 54.61 | 52.14 | 54.61 | 52.14 | 52.14 | |
| Subsequent hospital care | 99232 | | 2.35% | 1.21% | 93.75 | 67.04 | 67.83 | 68.52 | 67.45 | 71.57 | 68.51 | 69.45 | 134.96 | 68.09 | 67.41 | 69.24 | 68.29 | 71.54 | 69.18 | 68.50 | 69.18 | 68.50 | 68.50 | |
| EEG monitoring/videorecord | 95951 | 26 | 0.53% | 1.14% | 414.17 | 297.75 | 300.94 | 304.45 | 299.51 | 319.25 | 305.30 | 310.71 | 593.10 | 300.51 | 296.92 | 305.62 | 301.25 | 316.69 | 305.95 | 303.32 | 305.95 | 303.32 | 303.32 | |
| Office consultation | 99243 | | 1.07% | 1.05% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | 125.83 | 123.16 | 123.16 | |
| Inpatient consultation | 99255 | | 0.66% | 1.03% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 396.77 | 201.14 | 199.02 | 204.82 | 201.81 | 211.86 | 204.56 | 202.30 | 204.56 | 202.30 | 202.30 | |
| Immune globulin, powder | J1566 | | 0.09% | 1.01% | 31.28 | 31.28 | 31.28 | 31.28 | 31.28 | 31.28 | 31.28 | 31.28 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Subsequent hospital care | 99233 | | 1.32% | 0.97% | 134.62 | 96.24 | 97.32 | 98.33 | 96.80 | 102.73 | 98.37 | 99.76 | 193.87 | 97.78 | 96.79 | 99.41 | 98.06 | 102.72 | 99.36 | 98.43 | 99.36 | 98.43 | 98.43 | |
| Office/outpatient visit, est | 99212 | | 1.42% | 0.43% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | 39.23 | 38.04 | 38.04 | |
| H-reflex test | 95934 | | 1.04% | 0.35% | 67.99 | 53.60 | 55.69 | 56.41 | 54.53 | 59.99 | 55.56 | 56.10 | 88.54 | 49.08 | 48.32 | 51.37 | 49.72 | 53.99 | 50.64 | 48.66 | 50.64 | 48.66 | 48.66 | |
| Subsequent hospital care | 99231 | | 1.05% | 0.30% | 51.71 | 37.05 | 37.46 | 37.87 | 37.27 | 39.61 | 37.90 | 38.48 | 74.26 | 37.52 | 37.10 | 38.14 | 37.61 | 39.46 | 38.16 | 37.83 | 38.16 | 37.83 | 37.83 | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-14
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Neurology

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁵⁾ | | | | | |
|------------------------------|-------|----------|------------------------------|------------|-------------------|--------|--------|----------|---------|----------|-------------------------|----------|----------|----------|---------|----------|--------------------------------------|---------|---------|----------|-------------|----------|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| | | | Office/outpatient visit, est | 99214 | | 14.78% | 10.71% | \$150.83 | \$98.08 | \$100.41 | \$101.63 | \$107.25 | \$102.45 | \$163.18 | \$86.45 | \$137.64 | \$75.39 | \$57.10 | \$95.57 | \$216.25 | \$197.74 | \$186.44 |
| Office consultation | 99244 | | 5.68% | 8.17% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A |
| Office consultation | 99245 | | 3.80% | 6.73% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | N/A | 138.05 | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A |
| Polysomnography, 4 or more | 95810 | 26 | 1.48% | 5.38% | 464.60 | 121.81 | 123.51 | 124.66 | 129.97 | 125.55 | N/A | 346.87 | 172.75 | 129.64 | 102.70 | N/A | 1,023.02 | 245.57 | 228.56 | 235.17 | 204.76 | N/A |
| Office/outpatient visit, est | 99213 | | 10.83% | 5.23% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A |
| Polysomnography w/cpap | 95811 | 26 | 1.17% | 4.82% | 499.97 | 127.32 | 129.10 | 130.33 | 135.94 | 131.34 | N/A | 389.47 | 180.35 | 139.93 | 110.71 | N/A | 1,084.13 | 256.69 | 239.09 | 245.34 | 214.17 | N/A |
| Office/outpatient visit, est | 99215 | | 4.50% | 4.40% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A |
| Natalizumab injection | J2323 | | 0.20% | 3.11% | 18.61 | 10.21 | 10.21 | 10.21 | 10.21 | 10.21 | N/A | 7.72 | 8.24 | 10.06 | N/A | N/A | N/A | N/A | N/A | N/A | Not Covered | N/A |
| Mri brain w/o & w/dye | 70553 | 26 | 0.39% | 2.26% | 394.10 | 113.98 | 115.30 | 116.49 | 121.71 | 118.15 | 207.98 | 100.14 | 160.89 | 91.81 | 72.47 | N/A | 826.63 | 294.28 | 214.93 | 219.48 | 192.03 | N/A |
| Eeg, awake and asleep | 95819 | 26 | 2.25% | 2.23% | 152.71 | 52.85 | 53.62 | 54.11 | 56.40 | 54.43 | N/A | 108.41 | 74.99 | 41.17 | 32.68 | N/A | 272.33 | 106.55 | 99.10 | 101.70 | 89.10 | N/A |
| Sense nerve conduction test | 95904 | | 5.88% | 2.22% | 132.01 | 50.39 | 52.63 | 53.38 | 57.08 | 53.04 | 72.53 | 41.71 | 65.62 | 36.72 | 29.34 | N/A | 257.40 | 101.59 | 96.63 | 99.15 | 87.44 | N/A |
| Botulinum toxin a per unit | J0585 | | 0.50% | 2.09% | 13.30 | 5.48 | 5.48 | 5.48 | 5.48 | 5.48 | N/A | 5.26 | 5.47 | 5.47 | N/A | N/A | 14.37 | N/A | N/A | N/A | 5.67 | N/A |
| Motor nerve conduction test | 95903 | | 3.58% | 1.74% | 169.52 | 66.34 | 68.91 | 69.86 | 74.46 | 69.72 | 98.73 | 56.06 | 87.49 | 48.69 | 38.90 | N/A | 402.53 | 133.75 | 126.98 | 130.93 | 114.55 | N/A |
| Muscle test, 2 limbs | 95861 | | 1.92% | 1.70% | 486.70 | 123.90 | 130.03 | 131.60 | 139.28 | 131.25 | 195.07 | 108.10 | 168.59 | 92.64 | 73.80 | N/A | 583.92 | 253.82 | 239.09 | 245.34 | 215.83 | N/A |
| Muscle test, one limb | 95860 | | 2.29% | 1.48% | 345.69 | 86.58 | 89.63 | 90.76 | 96.26 | 90.45 | 132.32 | 74.22 | 115.77 | 63.71 | 50.91 | N/A | 449.17 | 174.55 | 164.76 | 169.71 | 148.86 | N/A |
| Eeg, awake and drowsy | 95816 | 26 | 1.40% | 1.46% | 152.71 | 53.05 | 53.77 | 54.29 | 56.67 | 54.79 | N/A | 99.30 | 74.99 | 41.45 | 32.90 | N/A | 272.33 | 106.94 | 99.72 | 102.33 | 89.10 | N/A |
| Motor nerve conduction test | 95900 | | 3.07% | 1.33% | 156.84 | 57.27 | 59.77 | 60.59 | 64.71 | 60.17 | 82.54 | 47.46 | 75.22 | 41.73 | 33.35 | N/A | 257.40 | 115.46 | 109.63 | 112.50 | 99.61 | N/A |
| Subsequent hospital care | 99232 | | 2.35% | 1.21% | 140.57 | 67.04 | 67.83 | 68.52 | 71.57 | 69.45 | 120.29 | 62.39 | 97.63 | 52.86 | 41.79 | N/A | 256.48 | 135.17 | 126.36 | 140.16 | 112.89 | N/A |
| EEG monitoring/videorecord | 95951 | 26 | 0.53% | 1.14% | 846.92 | 297.75 | 300.94 | 304.45 | 319.25 | 310.71 | N/A | 660.12 | 420.50 | N/A | 184.73 | N/A | 1,146.92 | 600.28 | 564.89 | 580.94 | 503.04 | N/A |
| Office consultation | 99243 | | 1.07% | 1.05% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A |
| Inpatient consultation | 99255 | | 0.66% | 1.03% | 392.77 | N/A | N/A | N/A | N/A | N/A | 352.78 | N/A | N/A | N/A | 123.60 | N/A | 657.70 | 376.41 | N/A | 388.34 | 313.78 | N/A |
| Immune globulin, powder | J1566 | | 0.09% | 1.01% | 61.43 | 31.28 | 31.28 | 31.28 | 31.28 | 31.28 | N/A | 27.67 | 30.48 | 31.20 | N/A | N/A | N/A | N/A | N/A | N/A | 45.45 | N/A |
| Subsequent hospital care | 99233 | | 1.32% | 0.97% | 199.87 | 96.24 | 97.32 | 98.33 | 102.73 | 99.76 | 172.68 | 89.47 | 139.78 | 75.95 | 60.02 | N/A | 378.31 | 194.02 | 181.48 | 201.01 | 162.15 | N/A |
| Office/outpatient visit, est | 99212 | | 1.42% | 0.43% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A |
| H-reflex test | 95934 | | 1.04% | 0.35% | 322.13 | 53.60 | 55.69 | 56.41 | 59.99 | 56.10 | 78.73 | 40.43 | 69.89 | 38.67 | 30.90 | N/A | 290.23 | 108.06 | 102.20 | 105.51 | 92.42 | N/A |
| Subsequent hospital care | 99231 | | 1.05% | 0.30% | 85.13 | 37.05 | 37.46 | 37.87 | 39.61 | 38.48 | 66.52 | 34.77 | 53.88 | 29.21 | 23.12 | N/A | 188.08 | 74.69 | 69.99 | 77.26 | 62.53 | N/A |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-14
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Neurology

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99214 | | 14.78% | 10.71% | \$194.83 | \$133.62 | \$140.11 | \$164.90 | \$140.23 | \$117.70 | \$205.00 | \$136.59 | \$144.92 | \$171.00 | \$135.16 | \$118.47 | \$220.00 | \$151.91 | \$144.92 | \$182.40 | \$161.20 | \$130.00 |
| Office consultation | 99244 | | 5.68% | 8.17% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office consultation | 99245 | | 3.80% | 6.73% | 512.68 | 334.98 | 374.53 | 411.96 | 347.70 | 325.66 | 575.00 | 335.00 | 355.51 | 410.94 | 333.92 | 314.15 | 640.00 | 375.00 | 392.00 | 453.13 | 396.43 | 367.81 |
| Polysomnography, 4 or more | 95810 | 26 | 1.48% | 5.38% | 866.91 | 292.60 | 270.77 | 341.51 | 272.27 | 381.67 | 921.00 | 280.22 | 265.50 | 325.89 | 255.42 | 397.00 | 950.00 | 309.35 | 265.50 | 383.58 | 301.94 | 500.00 |
| Office/outpatient visit, est | 99213 | | 10.83% | 5.23% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Polysomnography w/cpap | 95811 | 26 | 1.17% | 4.82% | 951.46 | 312.49 | 293.35 | 366.52 | 291.22 | 361.34 | 970.00 | 301.09 | 285.32 | 350.52 | 274.32 | 299.88 | 1,020.00 | 332.39 | 285.32 | 412.09 | 317.96 | 432.00 |
| Office/outpatient visit, est | 99215 | | 4.50% | 4.40% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Natalizumab injection | J2323 | | 0.20% | 3.11% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Mri brain w/o & w/dye | 70553 | 26 | 0.39% | 2.26% | 407.64 | 285.48 | 226.64 | 223.92 | 204.41 | 360.82 | 441.00 | 244.51 | 188.51 | 213.53 | 203.31 | 379.76 | 461.00 | 404.58 | 204.98 | 229.43 | 214.00 | 495.90 |
| Eeg, awake and asleep | 95819 | 26 | 2.25% | 2.23% | 220.57 | 94.78 | 84.78 | 110.48 | 90.55 | 87.97 | 250.00 | 89.53 | 84.35 | 102.27 | 86.53 | 86.19 | 250.00 | 97.16 | 84.35 | 121.68 | 100.00 | 106.59 |
| Sense nerve conduction test | 95904 | | 5.88% | 2.22% | 228.41 | 85.94 | 101.89 | 92.45 | 88.25 | 90.56 | 238.00 | 73.94 | 72.46 | 88.76 | 73.67 | 86.00 | 254.00 | 82.71 | 94.50 | 97.88 | 91.91 | 93.72 |
| Botulinum toxin a per unit | J0585 | | 0.50% | 2.09% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Motor nerve conduction test | 95903 | | 3.58% | 1.74% | 299.81 | 136.67 | 131.99 | 120.82 | 106.30 | 124.15 | 244.00 | 98.57 | 96.24 | 114.63 | 94.05 | 117.00 | 356.00 | 160.62 | 136.33 | 133.65 | 114.64 | 149.75 |
| Muscle test, 2 limbs | 95861 | | 1.92% | 1.70% | 425.15 | 201.18 | 221.23 | 225.23 | 181.68 | 231.90 | 494.00 | 182.75 | 183.41 | 217.35 | 168.90 | 214.00 | 577.00 | 201.75 | 191.10 | 240.16 | 190.62 | 278.10 |
| Muscle test, one limb | 95860 | | 2.29% | 1.48% | 391.75 | 164.39 | 168.59 | 162.06 | 135.53 | 165.51 | 415.00 | 128.24 | 126.24 | 154.78 | 124.88 | 151.00 | 415.00 | 143.45 | 152.10 | 174.96 | 151.63 | 188.10 |
| Eeg, awake and drowsy | 95816 | 26 | 1.40% | 1.46% | 236.75 | 99.28 | 93.06 | 106.46 | 89.61 | 81.00 | 270.00 | 89.53 | 84.35 | 101.84 | 84.90 | 77.40 | 297.00 | 99.00 | 84.35 | 122.74 | 99.39 | 106.59 |
| Motor nerve conduction test | 95900 | | 3.07% | 1.33% | 222.81 | 89.12 | 98.04 | 103.64 | 95.99 | 95.59 | 238.00 | 86.35 | 82.08 | 101.53 | 85.69 | 91.00 | 258.00 | 93.47 | 87.61 | 112.38 | 105.39 | 101.00 |
| Subsequent hospital care | 99232 | | 2.35% | 1.21% | 198.52 | 103.04 | 107.93 | 121.88 | 102.61 | 104.64 | 228.00 | 101.84 | 104.73 | 123.95 | 98.82 | 107.70 | 237.00 | 112.67 | 110.08 | 133.20 | 115.53 | 115.00 |
| EEG monitoring/videorecord | 95951 | 26 | 0.53% | 1.14% | 626.84 | 450.45 | 743.58 | 601.58 | 496.77 | 418.41 | 554.38 | 375.00 | 423.20 | 599.56 | 504.49 | 432.00 | 554.38 | 598.23 | 561.81 | 699.69 | 570.05 | 593.61 |
| Office consultation | 99243 | | 1.07% | 1.05% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Inpatient consultation | 99255 | | 0.66% | 1.03% | 541.40 | 329.79 | 318.68 | 369.11 | 312.11 | 323.57 | 609.50 | 306.03 | 317.02 | 375.20 | 299.86 | 281.19 | 650.00 | 342.54 | 320.95 | 414.17 | 351.77 | 390.56 |
| Immune globulin, powder | J1566 | | 0.09% | 1.01% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Subsequent hospital care | 99233 | | 1.32% | 0.97% | 264.74 | 153.13 | 163.08 | 171.63 | 143.35 | 151.49 | 300.00 | 145.81 | 150.02 | 174.89 | 135.85 | 146.05 | 340.00 | 163.44 | 183.30 | 189.57 | 160.32 | 185.00 |
| Office/outpatient visit, est | 99212 | | 1.42% | 0.43% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| H-reflex test | 95934 | | 1.04% | 0.35% | 231.50 | 78.00 | 101.15 | 81.55 | 61.85 | 84.03 | 250.00 | 59.36 | 62.70 | 87.92 | 63.23 | 92.50 | 260.40 | 75.00 | 107.50 | 92.95 | 66.55 | 92.50 |
| Subsequent hospital care | 99231 | | 1.05% | 0.30% | 136.98 | 60.16 | 65.27 | 72.19 | 61.74 | 72.72 | 164.00 | 56.49 | 58.31 | 69.01 | 57.42 | 69.00 | 177.00 | 64.43 | 69.00 | 77.52 | 66.81 | 100.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-14
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Neurology

| | | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|-------------------------------|-----------------|-----------------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|--|
| | | Mean | | | | | Median | | | | | 80th Percentile | | | | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Office/outpatient visit, est | 99214 | | 14.78% | 10.71% | \$196.23 | \$131.45 | \$144.89 | \$184.32 | \$165.49 | \$132.65 | \$208.00 | \$138.00 | \$150.00 | \$190.00 | \$163.00 | \$130.00 | \$220.00 | \$166.00 | \$171.00 | \$221.00 | \$200.00 | \$156.00 | |
| Office consultation | 99244 | | 5.68% | 8.17% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 | |
| Office consultation | 99245 | | 3.80% | 6.73% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 450.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 | |
| Polysomnography, 4 or more | 95810 | 26 | 1.48% | 5.38% | Not Cred | 370.99 | 402.96 | 427.86 | 387.53 | 520.31 | Not Cred | 394.00 | 401.00 | 404.00 | 377.00 | 518.90 | Not Cred | 468.00 | 508.00 | 526.00 | 457.00 | 671.00 | |
| Office/outpatient visit, est | 99213 | | 10.83% | 5.23% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 | |
| Polysomnography w/cpap | 95811 | 26 | 1.17% | 4.82% | 1,158.85 | 398.39 | 441.86 | 458.40 | 403.70 | 532.91 | 875.00 | 397.00 | 397.00 | 434.00 | 398.00 | 515.00 | 1,040.00 | 509.00 | 590.00 | 542.00 | 491.00 | 739.00 | |
| Office/outpatient visit, est | 99215 | | 4.50% | 4.40% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 | |
| Natalizumab injection | J2323 | | 0.20% | 3.11% | 15.00 | 13.32 | No Data | 12.00 | 15.40 | 13.50 | 15.00 | 13.70 | No Data | 12.00 | 16.00 | 13.50 | 15.00 | 13.70 | No Data | 12.00 | 18.00 | 13.50 | |
| Mri brain w/o & w/dye | 70553 | 26 | 0.39% | 2.26% | 529.07 | 384.67 | 325.34 | 334.06 | 379.68 | 298.17 | 461.00 | 359.00 | 342.00 | 362.00 | 384.00 | 334.50 | 632.00 | 553.00 | 342.00 | 400.00 | 423.00 | 442.00 | |
| Eeg, awake and asleep | 95819 | 26 | 2.25% | 2.23% | No Data | 120.91 | Not Cred | 132.04 | 224.35 | Not Cred | No Data | 97.00 | Not Cred | 124.00 | 157.60 | Not Cred | No Data | 148.33 | Not Cred | 155.00 | 360.00 | Not Cred | |
| Sense nerve conduction test | 95904 | | 5.88% | 2.22% | 159.47 | 92.83 | 105.05 | 112.83 | 102.34 | 125.53 | 143.00 | 96.00 | 94.00 | 113.00 | 100.00 | 132.30 | 254.00 | 132.00 | 110.00 | 134.00 | 121.00 | 168.00 | |
| Botulinum toxin a per unit | 10585 | | 0.50% | 2.09% | Not Cred | 8.10 | 9.86 | 67.84 | 8.45 | Not Cred | Not Cred | 8.00 | 10.00 | 8.00 | 8.00 | Not Cred | Not Cred | 9.00 | 11.00 | 14.00 | 10.00 | Not Cred | |
| Motor nerve conduction test | 95903 | | 3.58% | 1.74% | 189.71 | 125.90 | 129.65 | 139.87 | 130.75 | 168.24 | 176.00 | 107.50 | 120.00 | 139.00 | 125.00 | 193.50 | 348.00 | 190.24 | 135.00 | 170.00 | 165.00 | 237.00 | |
| Muscle test, 2 limbs | 95861 | | 1.92% | 1.70% | Not Cred | 216.45 | Not Cred | 265.08 | 262.49 | 316.86 | Not Cred | 205.00 | Not Cred | 259.00 | 250.00 | 320.00 | Not Cred | 280.00 | Not Cred | 325.00 | 308.00 | 412.00 | |
| Muscle test, one limb | 95860 | | 2.29% | 1.48% | 275.74 | 177.04 | 176.03 | 206.64 | 196.12 | 210.86 | 300.00 | 189.00 | 197.00 | 205.20 | 198.00 | 220.50 | 430.00 | 265.00 | 200.00 | 245.00 | 245.00 | 270.00 | |
| Eeg, awake and drowsy | 95816 | 26 | 1.40% | 1.46% | Not Cred | 176.35 | 112.33 | 152.96 | 179.79 | Not Cred | Not Cred | 150.00 | 110.00 | 152.00 | 131.62 | Not Cred | Not Cred | 222.00 | 121.00 | 176.00 | 175.00 | Not Cred | |
| Motor nerve conduction test | 95900 | | 3.07% | 1.33% | 193.75 | 104.25 | 103.76 | 130.68 | 113.89 | 131.89 | 216.00 | 105.50 | 110.00 | 129.20 | 111.40 | 154.00 | 258.00 | 149.00 | 110.00 | 151.80 | 141.00 | 154.80 | |
| Subsequent hospital care | 99232 | | 2.35% | 1.21% | 208.11 | 115.76 | 131.12 | 141.72 | 138.76 | 129.72 | 234.00 | 120.00 | 125.00 | 144.00 | 138.80 | 125.00 | 238.17 | 130.00 | 133.00 | 167.00 | 158.00 | 160.00 | |
| EEG monitoring/videorecord | 95951 | 26 | 0.53% | 1.14% | Not Cred | 879.52 | No Data | Not Cred | 862.62 | No Data | Not Cred | 782.20 | No Data | Not Cred | 843.00 | No Data | Not Cred | 1,380.47 | No Data | Not Cred | 894.73 | No Data | |
| Office consultation | 99243 | | 1.07% | 1.05% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 | |
| Inpatient consultation | 99255 | | 0.66% | 1.03% | 477.62 | 355.21 | 398.36 | 443.39 | 400.14 | 402.83 | 477.00 | 350.00 | 404.00 | 446.00 | 420.00 | 414.00 | 628.55 | 438.47 | 404.00 | 523.00 | 476.00 | 500.00 | |
| Immune globulin, powder | J1566 | | 0.09% | 1.01% | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | |
| Subsequent hospital care | 99233 | | 1.32% | 0.97% | 297.97 | 172.78 | 186.49 | 209.46 | 195.52 | 189.21 | 338.00 | 172.00 | 188.00 | 212.00 | 198.80 | 188.00 | 361.00 | 201.00 | 195.00 | 249.00 | 227.00 | 236.00 | |
| Office/outpatient visit, est | 99212 | | 1.42% | 0.43% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 | |
| H-reflex test | 95934 | | 1.04% | 0.35% | Not Cred | Not Cred | Not Cred | 124.74 | 85.19 | Not Cred | Not Cred | Not Cred | Not Cred | 110.00 | 85.00 | Not Cred | Not Cred | Not Cred | Not Cred | 142.64 | 95.13 | Not Cred | |
| Subsequent hospital care | 99231 | | 1.05% | 0.30% | 140.10 | 74.65 | 79.05 | 88.72 | 94.01 | 88.60 | 152.00 | 75.00 | 78.00 | 87.00 | 84.00 | 88.00 | 180.00 | 89.00 | 98.00 | 108.00 | 102.00 | 109.00 | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-15
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Obstetrics / Gynecology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|------------|------------|------------|-------------|------------|------------|------------|------------|------------------------|------------|------------|-------------|------------|------------|------------|------------|--|--|
| | | | % of | | AK | ID | ND | Portland OR | Rest Of OR | Seattle WA | Rest Of WA | WY | AK | ID | ND | Portland OR | Rest of OR | Seattle WA | Rest of WA | WY | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | |
| Obstetrical care | 59400 | | 1.21% | 17.83% | \$2,354.90 | \$1,749.07 | \$1,754.18 | \$1,791.77 | \$1,757.34 | \$1,928.14 | \$1,834.33 | \$1,916.79 | \$3,181.81 | \$1,661.32 | \$2,203.84 | \$1,955.94 | \$1,955.94 | \$1,983.25 | \$1,983.25 | \$2,984.72 | | |
| Cesarean delivery | 59510 | | 0.54% | 9.06% | 2,617.84 | 1,945.38 | 1,950.39 | 1,992.71 | 1,954.41 | 2,145.78 | 2,041.39 | 2,134.78 | 3,601.43 | 1,880.73 | 2,495.44 | 2,214.32 | 2,214.32 | 2,026.87 | 1,983.25 | 3,649.01 | | |
| Office/outpatient visit, est | 99213 | | 10.17% | 5.34% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | | |
| Prev visit, est, age 40-64 | 99396 | | 6.08% | 5.13% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 190.02 | 100.55 | 99.23 | 103.78 | 101.35 | 108.24 | 103.01 | 100.48 | | |
| Prev visit, est, age 18-39 | 99395 | | 5.82% | 4.49% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 173.14 | 91.99 | 90.78 | 95.08 | 92.78 | 99.22 | 94.30 | 91.85 | | |
| Office/outpatient visit, est | 99214 | | 5.00% | 3.95% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | |
| Transvaginal us, non-ob | 76830 | 26 | 2.46% | 2.42% | 46.59 | 33.32 | 33.76 | 34.08 | 33.53 | 35.53 | 33.99 | 34.37 | 67.61 | 34.18 | 33.89 | 34.82 | 34.32 | 35.92 | 34.70 | 34.25 | | |
| Ob us >= 14 wks, sngl fetus | 76805 | | 1.67% | 1.95% | 171.55 | 138.22 | 144.34 | 146.32 | 140.93 | 156.25 | 143.78 | 145.15 | 240.27 | 137.49 | 135.18 | 145.26 | 139.75 | 153.41 | 142.55 | 135.63 | | |
| Total hysterectomy | 58150 | | 0.39% | 1.93% | 1,290.86 | 942.28 | 948.34 | 964.04 | 947.15 | 1,024.14 | 977.17 | 1,008.18 | 1,831.03 | 940.18 | 922.03 | 955.59 | 940.32 | 1,001.09 | 964.51 | 961.74 | | |
| Ob us, detailed, sngl fetus | 76811 | | 1.02% | 1.79% | 237.29 | 185.87 | 192.89 | 195.30 | 188.99 | 207.34 | 192.39 | 194.11 | 332.79 | 184.65 | 181.94 | 193.46 | 187.17 | 203.17 | 190.47 | 182.75 | | |
| Office/outpatient visit, est | 99215 | | 1.62% | 1.72% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | |
| Prev visit, new, age 18-39 | 99385 | | 1.59% | 1.44% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 197.89 | 105.41 | 103.99 | 109.02 | 106.33 | 113.83 | 108.11 | 105.23 | | |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.34% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | |
| Office/outpatient visit, est | 99212 | | 4.06% | 1.32% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | |
| Transvaginal us, obstetric | 76817 | | 1.42% | 1.19% | 118.13 | 94.50 | 98.47 | 99.82 | 96.27 | 106.52 | 98.25 | 99.28 | 168.22 | 95.64 | 94.03 | 100.83 | 97.13 | 106.43 | 99.09 | 94.52 | | |
| Us exam, pelvic, complete | 76856 | 26 | 1.09% | 1.07% | 46.59 | 33.32 | 33.76 | 34.08 | 33.53 | 35.53 | 33.99 | 34.37 | 68.17 | 34.53 | 34.23 | 35.20 | 34.68 | 36.32 | 35.06 | 34.59 | | |
| Ob us, follow-up, per fetus | 76816 | | 1.13% | 0.92% | 125.08 | 99.50 | 103.56 | 104.96 | 101.31 | 111.85 | 103.33 | 104.38 | 177.67 | 100.37 | 98.75 | 105.66 | 101.89 | 111.38 | 103.88 | 99.23 | | |
| Ob us, limited, fetus(s) | 76815 | 26 | 1.08% | 0.77% | 43.36 | 30.93 | 31.41 | 31.66 | 31.15 | 32.87 | 31.44 | 31.62 | 63.04 | 31.81 | 31.59 | 32.42 | 31.96 | 33.37 | 32.24 | 31.77 | | |
| Fetal non-stress test | 59025 | | 1.84% | 0.71% | 56.96 | 43.92 | 44.81 | 45.66 | 44.41 | 49.07 | 45.99 | 47.46 | 85.81 | 46.56 | 57.57 | 48.08 | 46.80 | 53.12 | 53.12 | 145.25 | | |
| Specimen handling | 99000 | | 1.15% | 0.71% | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.22% | 0.24% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | |
| Office/outpatient visit, est | 99211 | | 1.17% | 0.20% | 23.86 | 18.81 | 19.52 | 19.78 | 19.13 | 21.05 | 19.51 | 19.72 | 33.40 | 18.65 | 18.34 | 19.55 | 18.89 | 20.59 | 19.28 | 18.51 | | |
| Urine pregnancy test | 81025 | | 1.49% | 0.11% | 8.90 | 8.90 | 8.90 | 8.90 | 8.90 | 5.30 | 5.30 | 8.90 | 10.90 | 8.30 | 8.13 | 8.23 | 8.23 | 7.56 | 7.61 | 8.31 | | |
| Urinalysis nonauto w/o scope | 81002 | | 2.67% | 0.08% | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 2.89 | 4.40 | 3.35 | 3.28 | 3.32 | 3.32 | 3.05 | 3.08 | 3.36 | | |
| Routine venipuncture | 36415 | | 3.09% | 0.08% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | |
| Smear, wet mount, saline/ink | 87210 | | 1.47% | 0.08% | 6.01 | 6.01 | 6.01 | 6.01 | 6.01 | 6.01 | 6.01 | 4.63 | 7.34 | 5.60 | 5.48 | 5.55 | 5.55 | 5.10 | 5.13 | 5.60 | | |
| Hemoglobin | 85018 | | 1.92% | 0.06% | 3.33 | 3.33 | 3.33 | 3.33 | 3.33 | 3.33 | 3.33 | 2.24 | 4.07 | 3.10 | 3.04 | 3.08 | 3.08 | 2.83 | 2.85 | 3.11 | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-15
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Obstetrics / Gynecology

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | | Workers' Compensation ⁽⁵⁾ | | | | | | |
|------------------------------|-------|----------|------------------|------------|-------------------|----------|----------|------------|------------|------------|------------|-------------------------|------------|------------|-------------|------------|------------|------------|--------------------------------------|---------------|-------------|------------|------------|------------|-----|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | |
| | | | Obstetrical care | 59400 | | 1.21% | 17.83% | \$4,231.13 | \$1,749.07 | \$1,754.18 | \$1,791.77 | \$1,928.14 | \$1,916.79 | \$2,821.81 | \$1,539.21 | \$2,339.40 | \$2,018.09 | \$2,034.50 | N/A | \$5,274.96 | \$4,515.39 | \$3,468.64 | \$4,590.19 | \$3,028.76 | N/A |
| Cesarean delivery | 59510 | | 0.54% | 9.06% | 4,801.48 | 1,945.38 | 1,950.39 | 1,992.71 | 2,145.78 | 2,134.78 | 3,194.05 | 1,742.30 | 2,647.23 | 2,287.30 | 2,034.50 | N/A | 7,129.38 | 5,022.17 | 3,862.58 | 5,111.77 | 3,032.08 | N/A | | | |
| Office/outpatient visit, est | 99213 | | 10.17% | 5.34% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | | | |
| Prev visit, est, age 40-64 | 99396 | | 6.08% | 5.13% | 277.45 | N/A | N/A | N/A | N/A | N/A | N/A | 116.63 | 143.51 | 78.73 | Not Covered | N/A | 298.33 | 203.03 | 191.39 | 211.95 | Not Covered | N/A | | | |
| Prev visit, est, age 18-39 | 99395 | | 5.82% | 4.49% | 251.38 | N/A | N/A | N/A | N/A | N/A | 154.25 | 116.63 | 131.24 | 72.05 | 85.48 | N/A | 273.05 | 186.08 | 175.29 | 193.49 | Not Covered | N/A | | | |
| Office/outpatient visit, est | 99214 | | 5.00% | 3.95% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | | | |
| Transvaginal us, non-ob | 76830 | 26 | 2.46% | 2.42% | 91.87 | 33.32 | 33.76 | 34.08 | 35.53 | 34.37 | 60.11 | 41.46 | 46.99 | 26.43 | 20.90 | N/A | 257.81 | 86.02 | 62.56 | 63.70 | 55.89 | N/A | | | |
| Ob us >= 14 wks, sngl fetus | 76805 | | 1.67% | 1.95% | 356.63 | 138.22 | 144.34 | 146.32 | 156.25 | 145.15 | 213.64 | 131.67 | 195.79 | 108.78 | 87.14 | N/A | 507.24 | 368.44 | 89.19 | 278.77 | 247.92 | N/A | | | |
| Total hysterectomy | 58150 | | 0.39% | 1.93% | 2,390.99 | 942.28 | 948.34 | 964.04 | 1,024.14 | 1,008.18 | 1,626.50 | 872.26 | 1,334.28 | 748.64 | 582.87 | N/A | 5,327.17 | 2,432.64 | 1,828.47 | 2,337.70 | 1,612.05 | N/A | | | |
| Ob us, detailed, sngl fetus | 76811 | | 1.02% | 1.79% | 659.78 | 185.87 | 192.89 | 195.30 | 207.34 | 194.11 | 296.40 | 180.67 | 263.02 | 145.22 | 116.04 | N/A | 608.97 | 479.88 | 170.95 | 360.76 | 320.42 | N/A | | | |
| Office/outpatient visit, est | 99215 | | 1.62% | 1.72% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | | | |
| Prev visit, new, age 18-39 | 99385 | | 1.59% | 1.44% | 308.16 | N/A | N/A | N/A | N/A | N/A | 176.26 | 134.65 | 150.45 | 82.63 | 103.23 | N/A | 328.68 | 212.72 | 200.69 | 222.20 | Not Covered | N/A | | | |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.34% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | | | |
| Office/outpatient visit, est | 99212 | | 4.06% | 1.32% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | | | |
| Transvaginal us, obstetric | 76817 | | 1.42% | 1.19% | 260.34 | 94.50 | 98.47 | 99.82 | 106.52 | 99.28 | 150.09 | 93.92 | 136.58 | 75.95 | 60.69 | N/A | 507.24 | 255.57 | 67.51 | 192.99 | 171.55 | N/A | | | |
| Us exam, pelvic, complete | 76856 | 26 | 1.09% | 1.07% | 91.87 | 33.32 | 33.76 | 34.08 | 35.53 | 34.37 | 60.90 | 41.59 | 46.99 | 26.71 | 21.12 | N/A | 225.59 | 86.02 | 62.56 | 63.70 | 55.89 | N/A | | | |
| Ob us, follow-up, per fetus | 76816 | | 1.13% | 0.92% | 232.79 | 99.50 | 103.56 | 104.96 | 111.85 | 104.38 | 167.48 | 87.94 | 152.05 | 84.57 | 67.58 | N/A | 326.70 | 289.16 | 76.81 | 218.85 | 194.24 | N/A | | | |
| Ob us, limited, fetus(s) | 76815 | 26 | 1.08% | 0.77% | 87.09 | 30.93 | 31.41 | 31.66 | 32.87 | 31.62 | 56.06 | 33.29 | 43.66 | 24.48 | 19.56 | N/A | 167.58 | 79.85 | 57.60 | 58.66 | 52.02 | N/A | | | |
| Fetal non-stress test | 59025 | | 1.84% | 0.71% | 108.11 | 43.92 | 44.81 | 45.66 | 49.07 | 47.46 | 69.77 | 39.93 | 59.75 | 34.22 | 52.20 | N/A | 260.69 | 113.39 | 86.10 | 113.81 | 76.37 | N/A | | | |
| Specimen handling | 99000 | | 1.15% | 0.71% | 15.95 | Bundled | Bundled | Bundled | Bundled | Bundled | N/A | N/A | 3.88 | N/A | Bundled | N/A | 52.48 | N/A | N/A | 80% of billed | Bundled | N/A | | | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.22% | 0.24% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | |
| Office/outpatient visit, est | 99211 | | 1.17% | 0.20% | 49.04 | 18.81 | 19.52 | 19.78 | 21.05 | 19.72 | 29.70 | 18.25 | 26.68 | N/A | 11.42 | N/A | 82.18 | 37.91 | 35.93 | 39.65 | 32.65 | N/A | | | |
| Urine pregnancy test | 81025 | | 1.49% | 0.11% | 26.61 | 8.90 | 8.90 | 8.90 | 5.30 | 8.90 | 9.06 | 8.84 | 9.06 | 6.70 | 4.10 | N/A | 53.95 | TBD | 22.25 | 80% of billed | 7.42 | N/A | | | |
| Urinalysis nonauto w/o scope | 81002 | | 2.67% | 0.08% | 20.10 | 3.60 | 3.60 | 3.60 | 3.60 | 2.89 | 3.66 | 3.57 | 3.66 | 2.71 | 2.78 | N/A | 28.57 | TBD | 9.00 | 80% of billed | 5.04 | N/A | | | |
| Routine venipuncture | 36415 | | 3.09% | 0.08% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | | | |
| Smear, wet mount, saline/ink | 87210 | | 1.47% | 0.08% | 17.40 | 6.01 | 6.01 | 6.01 | 6.01 | 4.63 | 6.11 | 5.96 | 6.11 | 4.52 | 4.64 | N/A | 37.71 | TBD | 15.03 | 80% of billed | 8.41 | N/A | | | |
| Hemoglobin | 85018 | | 1.92% | 0.06% | 17.99 | 3.33 | 3.33 | 3.33 | 3.33 | 2.24 | 3.39 | 3.31 | 3.39 | 2.51 | 2.58 | N/A | 27.66 | TBD | 8.32 | 80% of billed | 4.66 | N/A | | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-15
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Obstetrics / Gynecology

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|-----------------|------------|------------|------------|------------|------------|------------|------------|--|--|--|--|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | | | | |
| | | | Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | | | | |
| Obstetrical care | 59400 | | 1.21% | 17.83% | \$4,704.80 | \$2,457.25 | \$2,500.69 | \$3,183.41 | \$2,601.20 | \$3,061.87 | \$5,000.00 | \$2,454.92 | \$2,661.24 | \$3,203.00 | \$2,474.56 | \$3,352.00 | \$5,000.00 | \$2,600.00 | \$2,661.24 | \$3,612.13 | \$2,867.61 | \$3,390.00 | | | | |
| Cesarean delivery | 59510 | | 0.54% | 9.06% | 6,286.66 | 2,810.42 | 2,970.73 | 3,683.44 | 2,959.66 | 3,734.23 | 6,325.00 | 2,778.70 | 3,013.92 | 3,672.18 | 2,795.90 | 4,075.00 | 7,243.54 | 2,946.03 | 3,013.92 | 4,168.80 | 3,292.22 | 4,190.00 | | | | |
| Office/outpatient visit, est | 99213 | | 10.17% | 5.34% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 | | | | |
| Prev visit, est, age 40-64 | 99396 | | 6.08% | 5.13% | 256.37 | 150.07 | 133.83 | 185.24 | 155.63 | 153.26 | 267.00 | 146.50 | 138.69 | 183.40 | 147.00 | 148.12 | 295.00 | 162.07 | 138.69 | 199.26 | 177.98 | 181.00 | | | | |
| Prev visit, est, age 18-39 | 99395 | | 5.82% | 4.49% | 238.21 | 135.53 | 114.86 | 167.65 | 140.03 | 142.36 | 250.27 | 133.33 | 123.00 | 166.85 | 132.84 | 140.00 | 275.00 | 147.51 | 126.81 | 181.09 | 159.87 | 173.00 | | | | |
| Office/outpatient visit, est | 99214 | | 5.00% | 3.95% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 | | | | |
| Transvaginal us, non-ob | 76830 | 26 | 2.46% | 2.42% | 154.38 | 84.86 | 58.77 | 64.84 | 61.90 | 119.04 | 135.00 | 72.18 | 54.35 | 62.23 | 59.61 | 134.62 | 225.00 | 129.60 | 55.44 | 67.68 | 66.00 | 149.00 | | | | |
| Ob us >= 14 wks, sngl fetus | 76805 | | 1.67% | 1.95% | 422.92 | 254.60 | 196.38 | 277.04 | 243.44 | 358.20 | 450.00 | 265.99 | 228.14 | 278.72 | 224.28 | 399.00 | 480.00 | 272.82 | 228.14 | 326.76 | 304.22 | 400.00 | | | | |
| Total hysterectomy | 58150 | | 0.39% | 1.93% | 4,239.57 | 1,775.90 | 1,550.23 | 1,725.11 | 1,338.35 | 2,602.77 | 4,907.50 | 1,710.15 | 1,475.82 | 1,746.69 | 1,368.68 | 3,285.00 | 5,081.00 | 2,114.28 | 1,568.18 | 2,056.01 | 1,652.89 | 3,285.00 | | | | |
| Ob us, detailed, sngl fetus | 76811 | | 1.02% | 1.79% | 639.94 | 399.21 | 291.32 | 424.15 | 411.34 | 484.26 | 757.00 | 409.97 | 325.51 | 437.65 | 365.66 | 550.00 | 757.00 | 427.37 | 356.63 | 457.20 | 536.32 | 624.00 | | | | |
| Office/outpatient visit, est | 99215 | | 1.62% | 1.72% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 | | | | |
| Prev visit, new, age 18-39 | 99385 | | 1.59% | 1.44% | 273.14 | 159.18 | 137.29 | 196.48 | 169.22 | 173.99 | 294.00 | 156.79 | 142.50 | 195.00 | 157.80 | 166.98 | 324.00 | 173.28 | 146.12 | 210.38 | 192.33 | 220.00 | | | | |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.34% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 | | | | |
| Office/outpatient visit, est | 99212 | | 4.06% | 1.32% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 | | | | |
| Transvaginal us, obstetric | 76817 | | 1.42% | 1.19% | 320.94 | 183.56 | 150.94 | 189.11 | 159.38 | 249.33 | 371.16 | 187.84 | 157.94 | 189.74 | 147.87 | 283.35 | 420.00 | 196.90 | 157.94 | 220.45 | 185.14 | 295.00 | | | | |
| Us exam, pelvic, complete | 76856 | 26 | 1.09% | 1.07% | 143.64 | 85.39 | 59.31 | 61.91 | 60.96 | 117.88 | 135.00 | 71.25 | 54.91 | 62.23 | 59.61 | 131.40 | 167.00 | 121.50 | 56.74 | 68.42 | 64.99 | 139.00 | | | | |
| Ob us, follow-up, per fetus | 76816 | | 1.13% | 0.92% | 312.02 | 178.57 | 166.81 | 217.70 | 162.88 | 201.69 | 325.00 | 194.03 | 173.79 | 218.81 | 153.92 | 200.00 | 341.59 | 201.56 | 173.79 | 264.19 | 182.08 | 225.00 | | | | |
| Ob us, limited, fetus(s) | 76815 | 26 | 1.08% | 0.77% | 148.73 | 74.15 | 56.24 | 60.74 | 64.62 | 89.62 | 144.45 | 69.32 | 50.95 | 58.96 | 59.15 | 97.00 | 155.00 | 73.82 | 59.45 | 63.00 | 81.47 | 121.00 | | | | |
| Fetal non-stress test | 59025 | | 1.84% | 0.71% | 232.98 | 62.85 | 69.63 | 84.80 | 68.53 | 158.47 | 260.00 | 62.36 | 71.33 | 85.00 | 65.27 | 174.00 | 267.00 | 65.54 | 79.61 | 102.48 | 74.42 | 196.00 | | | | |
| Specimen handling | 99000 | | 1.15% | 0.71% | 23.61 | 12.10 | 13.85 | 13.42 | 10.96 | 19.65 | 30.00 | 9.60 | 10.01 | 11.00 | 10.29 | 23.75 | 36.00 | 15.21 | 17.10 | 13.87 | 13.68 | 26.00 | | | | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.22% | 0.24% | 35.61 | 21.89 | Not Cred | 34.28 | 22.42 | 21.86 | 35.00 | 20.00 | Not Cred | 35.00 | 20.04 | 19.50 | 50.00 | 28.00 | Not Cred | 43.00 | 30.52 | 31.50 | | | | |
| Office/outpatient visit, est | 99211 | | 1.17% | 0.20% | 63.99 | 29.21 | 29.84 | 36.72 | 30.27 | 31.26 | 70.00 | 28.37 | 29.44 | 34.95 | 28.74 | 32.00 | 78.00 | 31.93 | 29.70 | 39.96 | 35.37 | 34.00 | | | | |
| Urine pregnancy test | 81025 | | 1.49% | 0.11% | 36.69 | 12.72 | 18.15 | 12.25 | 7.13 | 14.76 | 42.00 | 12.50 | 18.11 | 12.38 | 5.49 | 10.00 | 49.00 | 12.99 | 18.11 | 13.06 | 8.84 | 23.75 | | | | |
| Urinalysis nonauto w/o scope | 81002 | | 2.67% | 0.08% | 18.49 | 6.15 | 8.07 | 5.31 | 3.98 | 10.09 | 21.62 | 5.05 | 7.31 | 5.00 | 3.57 | 10.00 | 26.00 | 5.08 | 7.31 | 5.14 | 3.74 | 12.35 | | | | |
| Routine venipuncture | 36415 | | 3.09% | 0.08% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 | | | | |
| Smear, wet mount, saline/ink | 87210 | | 1.47% | 0.08% | 34.72 | 9.85 | 12.47 | 8.81 | 7.34 | 19.22 | 37.00 | 8.46 | 12.21 | 8.34 | 6.08 | 20.00 | 48.00 | 9.06 | 12.21 | 8.97 | 7.45 | 25.00 | | | | |
| Hemoglobin | 85018 | | 1.92% | 0.06% | 23.76 | 5.70 | 7.56 | 5.12 | 3.89 | 10.22 | 28.00 | 4.70 | 6.78 | 4.63 | 3.31 | 11.50 | 38.00 | 5.40 | 6.78 | 5.00 | 3.71 | 12.00 | | | | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-15
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Obstetrics / Gynecology

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | | Median | | | | | | | 80th Percentile | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Obstetrical care | 59400 | | 1.21% | 17.83% | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data | Not Cred | No Data | Not Cred | Not Cred | Not Cred | No Data | |
| Cesarean delivery | 59510 | | 0.54% | 9.06% | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | |
| Office/outpatient visit, est | 99213 | | 10.17% | 5.34% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 | |
| Prev visit, est, age 40-64 | 99396 | | 6.08% | 5.13% | Not Cred | 125.33 | 75.68 | 149.15 | 144.92 | Not Cred | Not Cred | 158.50 | 60.00 | 177.03 | 159.50 | Not Cred | Not Cred | 179.00 | 116.00 | 221.00 | 200.00 | Not Cred | |
| Prev visit, est, age 18-39 | 99395 | | 5.82% | 4.49% | No Data | Not Cred | Not Cred | Not Cred | 127.07 | No Data | No Data | Not Cred | Not Cred | Not Cred | 151.00 | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | 177.50 | No Data |
| Office/outpatient visit, est | 99214 | | 5.00% | 3.95% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 | |
| Transvaginal us, non-ob | 76830 | 26 | 2.46% | 2.42% | Not Cred | 108.74 | 94.48 | 108.97 | 108.04 | 100.11 | Not Cred | 100.00 | 77.00 | 114.00 | 98.00 | 92.00 | Not Cred | 137.00 | 140.00 | 142.00 | 121.00 | 166.00 | |
| Ob us >= 14 wks, snlgl fetus | 76805 | | 1.67% | 1.95% | Not Cred | No Data | Not Cred | Not Cred | 355.97 | Not Cred | Not Cred | No Data | Not Cred | Not Cred | 317.00 | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 404.00 | Not Cred |
| Total hysterectomy | 58150 | | 0.39% | 1.93% | No Data | Not Cred | Not Cred | Not Cred | 2,329.15 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | 2,200.00 | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | 2,736.25 | Not Cred |
| Ob us, detailed, snlgl fetus | 76811 | | 1.02% | 1.79% | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | |
| Office/outpatient visit, est | 99215 | | 1.62% | 1.72% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 | |
| Prev visit, new, age 18-39 | 99385 | | 1.59% | 1.44% | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | |
| Office/outpatient visit, new | 99204 | | 1.10% | 1.34% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 | |
| Office/outpatient visit, est | 99212 | | 4.06% | 1.32% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 | |
| Transvaginal us, obstetric | 76817 | | 1.42% | 1.19% | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | Not Cred | Not Cred | No Data | Not Cred | Not Cred | Not Cred | |
| Us exam, pelvic, complete | 76856 | 26 | 1.09% | 1.07% | 140.50 | 113.11 | 99.28 | 106.85 | 105.78 | 106.14 | 135.00 | 100.73 | 99.00 | 112.00 | 106.00 | 120.00 | 197.00 | 124.00 | 117.00 | 128.00 | 117.60 | 166.00 | |
| Ob us, follow-up, per fetus | 76816 | | 1.13% | 0.92% | Not Cred | No Data | No Data | Not Cred | Not Cred | No Data | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | No Data | |
| Ob us, limited, fetus(s) | 76815 | 26 | 1.08% | 0.77% | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | Not Cred | |
| Fetal non-stress test | 59025 | | 1.84% | 0.71% | Not Cred | No Data | No Data | No Data | Not Cred | No Data | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | No Data | Not Cred | No Data | |
| Specimen handling | 99000 | | 1.15% | 0.71% | 42.60 | 18.22 | 15.35 | 14.69 | 14.51 | 16.35 | 38.00 | 16.90 | 14.00 | 11.00 | 16.00 | 16.00 | 80.00 | 20.00 | 19.00 | 20.00 | 18.00 | 16.00 | |
| Ther/proph/diag inj, sc/im | 90772 | | 1.22% | 0.24% | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | |
| Office/outpatient visit, est | 99211 | | 1.17% | 0.20% | 61.45 | 31.51 | 36.11 | 43.78 | 44.31 | 33.61 | 75.00 | 31.93 | 37.00 | 45.00 | 41.00 | 35.00 | 80.00 | 40.00 | 37.00 | 51.00 | 50.00 | 45.00 | |
| Urine pregnancy test | 81025 | | 1.49% | 0.11% | Not Cred | Not Cred | Not Cred | 23.05 | 25.28 | Not Cred | Not Cred | Not Cred | Not Cred | 20.50 | 21.00 | Not Cred | Not Cred | Not Cred | Not Cred | 35.00 | 31.00 | Not Cred | |
| Urinalysis nonauto w/o scope | 81002 | | 2.67% | 0.08% | 20.82 | 10.52 | 13.41 | 11.81 | 12.72 | 10.69 | 21.00 | 10.00 | 12.00 | 11.00 | 11.00 | 10.00 | 25.00 | 13.00 | 17.00 | 15.00 | 16.00 | 18.00 | |
| Routine venipuncture | 36415 | | 3.09% | 0.08% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 | |
| Smear, wet mount, saline/ink | 87210 | | 1.47% | 0.08% | Not Cred | 24.54 | 19.02 | 20.96 | 25.77 | 26.33 | Not Cred | 14.90 | 18.00 | 20.00 | 18.00 | 29.00 | Not Cred | 27.50 | 23.00 | 27.00 | 36.00 | 31.00 | |
| Hemoglobin | 85018 | | 1.92% | 0.06% | Not Cred | 22.57 | 16.85 | 13.77 | 19.74 | Not Cred | Not Cred | 14.00 | 15.00 | 8.61 | 13.05 | Not Cred | Not Cred | 39.04 | 22.00 | 24.00 | 37.80 | Not Cred | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-16
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Ophthalmology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | WA | Rest Of | WA | WY | AK | ID | ND | OR | Rest of | Seattle | Rest of | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Eye exam & treatment | 92014 | | 21.61% | 23.52% | \$144.69 | \$110.75 | \$114.00 | \$115.48 | \$112.25 | \$122.39 | \$114.50 | \$116.04 | \$197.82 | \$106.57 | \$105.04 | \$110.57 | \$107.61 | \$115.73 | \$109.53 | \$109.53 | \$106.28 | \$106.28 | |
| Eye exam, new patient | 92004 | | 10.62% | 14.16% | 176.28 | 134.02 | 137.75 | 139.49 | 135.75 | 147.60 | 138.38 | 140.19 | 242.96 | 130.05 | 128.22 | 134.68 | 131.23 | 140.80 | 133.52 | 133.52 | 129.82 | 129.82 | |
| Eye exam established pat | 92012 | | 13.91% | 10.41% | 98.89 | 76.19 | 78.54 | 79.59 | 77.28 | 84.49 | 78.88 | 79.97 | 134.25 | 72.79 | 71.69 | 75.66 | 73.54 | 79.31 | 74.91 | 74.91 | 72.58 | 72.58 | |
| Refraction | 92015 | | 14.71% | 6.79% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 52.60 | 28.31 | 27.90 | 29.36 | 28.58 | 30.73 | 29.10 | 28.25 | 28.25 | 28.25 | |
| Cataract surg w/iol, 1 stage | 66984 | | 0.78% | 4.97% | 931.62 | 699.64 | 711.72 | 723.04 | 706.18 | 769.71 | 726.53 | 745.30 | 1,284.28 | 677.29 | 664.57 | 695.30 | 680.17 | 730.09 | 696.79 | 686.68 | 686.68 | 686.68 | |
| Office/outpatient visit, est | 99213 | | 4.60% | 2.94% | 87.71 | 66.04 | 67.67 | 68.52 | 66.81 | 72.42 | 68.12 | 69.10 | 121.23 | 64.21 | 63.34 | 66.28 | 64.72 | 69.17 | 65.82 | 64.23 | 64.23 | 64.23 | |
| Office consultation | 99244 | | 1.27% | 2.41% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | 183.17 | 183.17 | |
| Office/outpatient visit, est | 99214 | | 2.32% | 2.23% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | 96.32 | 96.32 | |
| Visual field examination(s) | 92083 | | 2.78% | 2.11% | 98.34 | 79.92 | 83.52 | 84.74 | 81.53 | 90.77 | 83.36 | 84.33 | 128.62 | 73.92 | 72.58 | 78.13 | 75.12 | 82.68 | 76.76 | 73.07 | 73.07 | 73.07 | |
| Ophth dx imaging post seg | 92135 | | 4.38% | 1.94% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 75.59 | 42.83 | 42.08 | 45.09 | 43.46 | 47.61 | 44.38 | 42.42 | 42.42 | 42.42 | |
| Eye exam, new patient | 92002 | | 2.34% | 1.66% | 93.51 | 71.95 | 74.13 | 75.12 | 72.96 | 79.74 | 74.49 | 75.55 | 127.76 | 69.23 | 68.18 | 71.93 | 69.93 | 75.41 | 71.25 | 69.07 | 69.07 | 69.07 | |
| Office/outpatient visit, new | 99204 | | 0.98% | 1.45% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | 149.84 | 149.84 | |
| Treatment of retinal lesion | 67228 | | 0.13% | 1.32% | 1,396.89 | 1,068.50 | 1,093.74 | 1,110.97 | 1,081.15 | 1,184.83 | 1,111.04 | 1,136.48 | 1,944.68 | 1,048.75 | 1,028.93 | 1,084.95 | 1,056.42 | 1,142.11 | 1,081.91 | 1,056.90 | 1,056.90 | 1,056.90 | |
| Office consultation | 99243 | | 0.99% | 1.29% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | 123.16 | 123.16 | |
| Eye exam with photos | 92250 | | 1.75% | 1.26% | 85.94 | 69.81 | 73.02 | 74.05 | 71.23 | 79.20 | 72.71 | 73.42 | 114.07 | 65.60 | 64.44 | 69.37 | 66.69 | 73.38 | 68.10 | 64.76 | 64.76 | 64.76 | |
| Bevacizumab injection | J9035 | | 0.04% | 1.11% | 59.67 | 59.67 | 59.67 | 59.67 | 59.67 | 59.67 | 59.67 | 59.67 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | |
| Eye exam with photos | 92235 | | 0.82% | 1.04% | 153.10 | 124.10 | 129.73 | 131.55 | 126.60 | 140.68 | 129.24 | 130.54 | 201.57 | 115.57 | 113.59 | 122.14 | 117.47 | 129.08 | 119.89 | 114.05 | 114.05 | 114.05 | |
| Office/outpatient visit, est | 99212 | | 2.26% | 0.89% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | 38.04 | 38.04 | |
| Special eye exam, subsequent | 92226 | | 1.35% | 0.28% | 29.28 | 21.98 | 22.58 | 22.82 | 22.25 | 24.01 | 22.59 | 22.78 | 40.52 | 21.40 | 21.15 | 22.09 | 21.58 | 23.00 | 21.89 | 21.32 | 21.32 | 21.32 | |
| Special eye exam, initial | 92225 | | 1.14% | 0.27% | 32.64 | 24.39 | 24.92 | 25.24 | 24.65 | 26.65 | 25.14 | 25.54 | 45.28 | 23.79 | 23.47 | 24.49 | 23.95 | 25.53 | 24.35 | 23.83 | 23.83 | 23.83 | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-16
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Ophthalmology

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|-------------------|------------|----------|----------|----------|----------|----------|----------|----------|-------------------------|----------|---------|---------|----------|----------|--------------------------------------|----------|----------|-------------|-----|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Eye exam & treatment | 92014 | | 21.61% | 23.52% | \$101.04 | \$110.75 | \$114.00 | \$115.48 | \$122.39 | \$116.04 | \$176.19 | \$97.40 | \$59.48 | \$83.74 | \$66.47 | \$107.56 | \$188.56 | \$223.27 | \$211.22 | \$217.38 | \$189.82 | N/A | |
| Eye exam, new patient | 92004 | | 10.62% | 14.16% | 87.27 | 134.02 | 137.75 | 139.49 | 147.60 | 140.19 | 216.03 | 119.56 | 59.48 | 102.10 | 81.14 | N/A | 206.80 | 270.19 | 255.19 | 262.50 | 229.66 | N/A | |
| Eye exam established pat | 92012 | | 13.91% | 10.41% | 88.80 | 76.19 | 78.54 | 79.59 | 84.49 | 79.97 | 119.86 | 66.88 | 59.48 | 57.31 | 45.57 | N/A | 153.20 | 153.61 | 145.56 | 150.00 | 131.16 | N/A | |
| Refraction | 92015 | | 14.71% | 6.79% | 45.74 | N/A | N/A | N/A | N/A | N/A | 46.77 | 17.80 | 40.55 | 22.26 | 17.56 | N/A | 66.78 | 51.75 | 48.93 | 50.21 | 43.72 | N/A | |
| Cataract surg w/iol, 1 stage | 66984 | | 0.78% | 4.97% | 1,770.95 | 699.64 | 711.72 | 723.04 | 769.71 | 745.30 | 1,141.23 | 585.99 | 961.37 | 769.95 | 422.15 | N/A | 6,342.27 | 1,806.26 | 1,353.39 | 1,730.93 | 1,202.54 | N/A | |
| Office/outpatient visit, est | 99213 | | 4.60% | 2.94% | 103.12 | 66.04 | 67.67 | 68.52 | 72.42 | 69.10 | 108.29 | 57.45 | 91.76 | 50.35 | 38.21 | 67.36 | 149.22 | 133.13 | 125.74 | 138.79 | 112.89 | N/A | |
| Office consultation | 99244 | | 1.27% | 2.41% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | |
| Office/outpatient visit, est | 99214 | | 2.32% | 2.23% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | |
| Visual field examination(s) | 92083 | | 2.78% | 2.11% | 181.99 | 79.92 | 83.52 | 84.74 | 90.77 | 84.33 | 114.36 | 68.17 | 105.10 | 58.70 | 46.91 | N/A | 346.23 | 161.13 | 153.61 | 158.26 | 139.46 | N/A | |
| Ophth dx imaging post seg | 92135 | | 4.38% | 1.94% | 192.25 | N/A | N/A | N/A | N/A | N/A | 67.22 | 39.71 | 60.82 | N/A | N/A | N/A | 227.52 | N/A | N/A | N/A | N/A | N/A | |
| Eye exam, new patient | 92002 | | 2.34% | 1.66% | 103.85 | 71.95 | 74.13 | 75.12 | 79.74 | 75.55 | 113.60 | 63.24 | 59.48 | 54.53 | 43.35 | N/A | 157.02 | 145.06 | 137.51 | 141.74 | 123.96 | N/A | |
| Office/outpatient visit, new | 99204 | | 0.98% | 1.45% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | |
| Treatment of retinal lesion | 67228 | | 0.13% | 1.32% | 2,244.02 | 1,068.50 | 1,093.74 | 1,110.97 | 1,184.83 | 1,136.48 | 1,729.14 | 888.95 | 1,488.47 | 169.90 | 657.12 | N/A | 3,289.42 | 2,758.55 | 2,065.08 | 2,642.27 | 1,842.82 | N/A | |
| Office consultation | 99243 | | 0.99% | 1.29% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | |
| Eye exam with photos | 92250 | | 1.75% | 1.26% | 117.84 | 69.81 | 73.02 | 74.05 | 79.20 | 73.42 | 101.43 | 64.15 | 93.36 | 52.02 | 41.57 | N/A | 212.48 | 140.74 | 133.79 | 137.29 | 121.19 | N/A | |
| Bevacizumab injection | 99035 | | 0.04% | 1.11% | 137.54 | 59.67 | 59.67 | 59.67 | 59.67 | 59.67 | N/A | 57.46 | 57.46 | 59.84 | N/A | N/A | N/A | N/A | N/A | N/A | Not Covered | N/A | |
| Eye exam with photos | 92235 | | 0.82% | 1.04% | 305.41 | 124.10 | 129.73 | 131.55 | 140.68 | 130.54 | 179.73 | 113.08 | 164.32 | 91.53 | 73.14 | N/A | 672.03 | 250.19 | 237.85 | 244.71 | 215.83 | N/A | |
| Office/outpatient visit, est | 99212 | | 2.26% | 0.89% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | |
| Special eye exam, subsequent | 92226 | | 1.35% | 0.28% | 53.22 | 21.98 | 22.58 | 22.82 | 24.01 | 22.78 | 36.03 | 19.14 | 30.41 | 16.69 | 13.34 | N/A | 182.83 | 44.31 | 41.50 | 42.59 | 37.63 | N/A | |
| Special eye exam, initial | 92225 | | 1.14% | 0.27% | 58.89 | 24.39 | 24.92 | 25.24 | 26.65 | 25.54 | 40.26 | 21.04 | 34.14 | 18.64 | 14.67 | N/A | 212.48 | 49.17 | 46.46 | 47.67 | 41.51 | N/A | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

**Appendix A-16
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Ophthalmology**

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Eye exam & treatment | 92014 | | 21.61% | 23.52% | \$162.63 | \$108.90 | \$121.59 | \$155.09 | \$120.55 | \$100.09 | \$169.00 | \$110.00 | \$120.57 | \$160.53 | \$113.00 | \$99.00 | \$198.00 | \$134.65 | \$161.90 | \$186.02 | \$148.00 | \$118.54 |
| Eye exam, new patient | 92004 | | 10.62% | 14.16% | 186.96 | 127.41 | 129.21 | 184.97 | 141.96 | 114.58 | 190.00 | 130.00 | 125.00 | 206.95 | 135.20 | 115.00 | 235.00 | 166.88 | 195.00 | 232.96 | 179.11 | 139.54 |
| Eye exam established pat | 92012 | | 13.91% | 10.41% | 149.24 | 89.61 | 89.33 | 115.44 | 82.29 | 74.13 | 155.00 | 89.24 | 94.00 | 120.00 | 76.80 | 70.00 | 165.00 | 104.98 | 110.96 | 131.32 | 95.00 | 86.40 |
| Refraction | 92015 | | 14.71% | 6.79% | 48.62 | 38.87 | 22.94 | 35.87 | 46.72 | 26.76 | 41.73 | 30.00 | 22.00 | 34.00 | 43.68 | 25.00 | 75.00 | 45.68 | 29.44 | 45.00 | 59.00 | 30.00 |
| Cataract surg w/iol, 1 stage | 66984 | | 0.78% | 4.97% | 1,888.28 | 1,174.24 | 951.32 | 1,090.36 | 906.25 | 1,394.03 | 994.87 | 1,295.74 | 1,002.56 | 1,133.60 | 920.81 | 908.28 | 4,166.00 | 1,760.00 | 1,317.60 | 1,262.88 | 1,158.04 | 2,446.25 |
| Office/outpatient visit, est | 99213 | | 4.60% | 2.94% | 134.15 | 89.05 | 92.87 | 108.87 | 90.19 | 79.88 | 140.00 | 89.93 | 96.24 | 112.52 | 86.74 | 83.00 | 150.00 | 100.77 | 96.24 | 120.96 | 101.79 | 86.00 |
| Office consultation | 99244 | | 1.27% | 2.41% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office/outpatient visit, est | 99214 | | 2.32% | 2.23% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Visual field examination(s) | 92083 | | 2.78% | 2.11% | 187.77 | 95.07 | 106.23 | 116.88 | 105.47 | 88.58 | 192.02 | 97.78 | 113.79 | 120.90 | 105.52 | 84.00 | 240.00 | 105.00 | 113.79 | 134.67 | 108.54 | 108.00 |
| Ophth dx imaging post seg | 92135 | | 4.38% | 1.94% | 154.18 | 59.87 | 66.85 | 74.79 | 62.74 | 74.97 | 165.00 | 60.64 | 66.23 | 74.24 | 62.62 | 75.00 | 199.00 | 62.00 | 66.23 | 83.53 | 62.72 | 86.00 |
| Eye exam, new patient | 92002 | | 2.34% | 1.66% | 153.87 | 73.84 | 85.00 | 117.50 | 82.02 | 79.85 | 170.27 | 75.00 | 89.00 | 116.75 | 75.85 | 80.00 | 175.00 | 95.26 | 105.29 | 131.76 | 97.44 | 95.00 |
| Office/outpatient visit, new | 99204 | | 0.98% | 1.45% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Treatment of retinal lesion | 67228 | | 0.13% | 1.32% | 2,863.61 | 1,600.77 | 1,593.65 | 1,692.87 | 1,405.58 | Not Cred | 2,775.00 | 1,585.49 | 1,565.27 | 1,604.10 | 1,411.64 | Not Cred | 3,184.99 | 1,913.95 | 1,565.27 | 1,900.60 | 1,651.95 | Not Cred |
| Office consultation | 99243 | | 0.99% | 1.29% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Eye exam with photos | 92250 | | 1.75% | 1.26% | 150.42 | 82.79 | 86.99 | 101.78 | 93.08 | 82.28 | 152.10 | 84.00 | 100.00 | 102.52 | 100.98 | 82.50 | 197.00 | 98.90 | 102.46 | 121.27 | 101.78 | 105.00 |
| Bevacizumab injection | 99035 | | 0.04% | 1.11% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Eye exam with photos | 92235 | | 0.82% | 1.04% | Not Cred | 168.03 | 216.92 | 215.46 | 173.15 | 185.05 | Not Cred | 172.82 | 183.42 | 218.12 | 179.22 | 177.00 | Not Cred | 181.06 | 234.65 | 233.10 | 181.06 | 182.40 |
| Office/outpatient visit, est | 99212 | | 2.26% | 0.89% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Special eye exam, subsequent | 92226 | | 1.35% | 0.28% | 58.25 | 28.13 | Not Cred | 40.23 | 29.16 | 38.46 | 55.04 | 26.77 | Not Cred | 40.60 | 29.15 | 39.00 | 78.00 | 30.76 | Not Cred | 42.92 | 29.40 | 39.00 |
| Special eye exam, initial | 92225 | | 1.14% | 0.27% | 101.10 | 31.47 | 37.94 | 40.51 | 32.26 | 53.88 | 94.00 | 30.00 | 35.66 | 40.19 | 32.18 | 69.00 | 150.00 | 33.93 | 35.66 | 44.95 | 33.17 | 69.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-16
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Ophthalmology

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Eye exam & treatment | 92014 | | 21.61% | 23.52% | \$182.11 | \$113.70 | \$132.95 | \$165.50 | \$148.31 | \$109.34 | \$190.00 | \$101.50 | \$135.00 | \$176.00 | \$143.00 | \$103.79 | \$212.00 | \$140.00 | \$178.00 | \$213.00 | \$186.00 | \$120.00 |
| Eye exam, new patient | 92004 | | 10.62% | 14.16% | 211.05 | 135.47 | 149.72 | 194.58 | 171.52 | 133.26 | 192.00 | 122.00 | 138.00 | 195.00 | 160.00 | 127.52 | 250.00 | 150.00 | 210.00 | 253.60 | 219.00 | 159.00 |
| Eye exam established pat | 92012 | | 13.91% | 10.41% | 158.18 | 90.89 | 92.18 | 122.95 | 101.33 | 92.68 | 165.00 | 87.00 | 80.00 | 128.00 | 95.30 | 87.00 | 188.00 | 118.00 | 122.00 | 157.00 | 129.00 | 125.00 |
| Refraction | 92015 | | 14.71% | 6.79% | 52.51 | 32.44 | 26.83 | 35.23 | 53.41 | 26.38 | 45.00 | 30.00 | 25.00 | 35.00 | 50.00 | 23.00 | 60.00 | 39.00 | 38.00 | 45.00 | 72.00 | 35.00 |
| Cataract surg w/iol, 1 stage | 66984 | | 0.78% | 4.97% | 4,000.36 | 1,025.18 | 1,829.00 | 1,574.37 | 1,493.47 | 2,678.82 | 4,166.00 | 658.75 | 1,871.00 | 1,417.00 | 1,434.40 | 2,665.00 | 6,325.00 | 2,023.00 | 1,871.00 | 2,100.00 | 2,165.00 | 4,139.00 |
| Office/outpatient visit, est | 99213 | | 4.60% | 2.94% | 134.60 | 84.31 | 94.91 | 119.82 | 107.32 | 88.42 | 145.00 | 83.00 | 98.00 | 125.00 | 107.00 | 87.00 | 152.25 | 110.00 | 114.00 | 145.00 | 128.00 | 106.70 |
| Office consultation | 99244 | | 1.27% | 2.41% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Office/outpatient visit, est | 99214 | | 2.32% | 2.23% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Visual field examination(s) | 92083 | | 2.78% | 2.11% | 205.08 | 89.10 | 112.40 | 130.22 | 116.99 | 91.90 | 225.00 | 84.00 | 115.00 | 135.00 | 116.00 | 89.00 | 240.00 | 108.00 | 125.00 | 161.00 | 141.00 | 120.00 |
| Ophth dx imaging post seg | 92135 | | 4.38% | 1.94% | 184.53 | 69.66 | 80.11 | 91.01 | 84.61 | 79.87 | 210.00 | 62.00 | 76.16 | 90.00 | 86.00 | 80.00 | 213.00 | 87.50 | 107.00 | 110.99 | 104.40 | 125.00 |
| Eye exam, new patient | 92002 | | 2.34% | 1.66% | 168.55 | 82.59 | 95.13 | 116.76 | 100.38 | 93.53 | 155.19 | 72.06 | 99.00 | 126.48 | 90.00 | 70.00 | 235.00 | 95.00 | 127.00 | 158.00 | 140.00 | 160.00 |
| Office/outpatient visit, new | 99204 | | 0.98% | 1.45% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Treatment of retinal lesion | 67228 | | 0.13% | 1.32% | Not Cred | 1,470.75 | Not Cred | 1,907.23 | 1,474.97 | Not Cred | Not Cred | 1,071.00 | Not Cred | 1,812.00 | 1,420.00 | Not Cred | Not Cred | 2,300.00 | Not Cred | 2,520.00 | 1,846.00 | Not Cred |
| Office consultation | 99243 | | 0.99% | 1.29% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Eye exam with photos | 92250 | | 1.75% | 1.26% | 195.88 | 84.12 | 100.64 | 117.65 | 115.29 | 83.30 | 180.00 | 84.00 | 104.00 | 125.00 | 115.00 | 79.00 | 296.00 | 100.00 | 108.50 | 150.00 | 130.00 | 107.00 |
| Bevacizumab injection | J9035 | | 0.04% | 1.11% | 100.90 | 83.12 | 92.01 | 114.18 | 99.35 | 97.05 | 90.00 | 66.88 | 85.00 | 90.00 | 94.50 | 73.00 | 125.00 | 150.00 | 128.00 | 150.00 | 125.00 | 150.00 |
| Eye exam with photos | 92235 | | 0.82% | 1.04% | 651.80 | 187.22 | 189.07 | 255.92 | 216.47 | 170.01 | 680.00 | 210.00 | 230.00 | 250.00 | 209.00 | 158.49 | 680.00 | 257.00 | 230.00 | 279.00 | 279.00 | 220.00 |
| Office/outpatient visit, est | 99212 | | 2.26% | 0.89% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Special eye exam, subsequent | 92226 | | 1.35% | 0.28% | Not Cred | 40.06 | 31.31 | 50.40 | 51.47 | 41.00 | Not Cred | 41.00 | 20.14 | 50.00 | 33.00 | 39.00 | Not Cred | 50.00 | 20.14 | 60.00 | 108.00 | 60.00 |
| Special eye exam, initial | 92225 | | 1.14% | 0.27% | 99.21 | 34.64 | 43.85 | 50.85 | 54.97 | 59.92 | 94.00 | 30.00 | 23.11 | 50.00 | 44.00 | 45.00 | 137.50 | 45.00 | 89.00 | 59.32 | 89.00 | 85.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-17
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Orthopedics

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------|-------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----|--|----|--|----|--|---------|--|---------|--|---------|--|--|
| | | | % of | | AK | | ID | | ND | | OR | | Rest Of | | Seattle | | Rest Of | | AK | | ID | | ND | | OR | | Rest of | | Seattle | | Rest of | | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 13.31% | 7.16% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | | | | | | | | | | | | | |
| Office/outpatient visit, new | 99203 | | 5.13% | 4.19% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | | | | | | | | | | | |
| Knee arthroscopy/surgery | 29881 | | 0.70% | 3.47% | 793.36 | 598.43 | 607.84 | 618.44 | 603.84 | 660.94 | 623.58 | 642.44 | 1,099.32 | 582.87 | 570.52 | 598.43 | 584.98 | 630.65 | 601.20 | 593.41 | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99214 | | 4.16% | 3.36% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | | | | | | | | | | | |
| Office consultation | 99243 | | 3.07% | 3.35% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | | | | | | | | | | | |
| Total knee arthroplasty | 27447 | | 0.32% | 2.93% | 1,934.46 | 1,439.14 | 1,454.54 | 1,480.23 | 1,449.34 | 1,580.12 | 1,498.41 | 1,547.54 | 2,713.06 | 1,419.21 | 1,389.02 | 1,450.06 | 1,421.59 | 1,526.07 | 1,461.56 | 1,450.69 | | | | | | | | | | | | | |
| Drain/inject, joint/bursa | 20610 | | 3.80% | 2.39% | 92.99 | 72.43 | 74.56 | 75.73 | 73.45 | 80.94 | 75.44 | 77.00 | 126.07 | 69.15 | 67.81 | 71.92 | 69.80 | 75.89 | 71.50 | 69.44 | | | | | | | | | | | | | |
| Therapeutic exercises | 97110 | | 5.27% | 2.37% | 38.37 | 28.62 | 29.37 | 29.67 | 28.96 | 31.16 | 29.36 | 29.58 | 53.75 | 28.26 | 27.95 | 29.15 | 28.50 | 30.29 | 28.87 | 28.13 | | | | | | | | | | | | | |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 0.47% | 2.22% | 91.78 | 65.75 | 66.43 | 67.18 | 66.13 | 70.34 | 67.34 | 68.47 | 133.88 | 67.86 | 67.10 | 69.06 | 68.06 | 71.50 | 69.06 | 68.38 | | | | | | | | | | | | | |
| Office/outpatient visit, new | 99204 | | 1.51% | 1.88% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | | | | | | | | | | | |
| Office consultation | 99244 | | 1.11% | 1.78% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99212 | | 5.31% | 1.77% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | | | | | | | | | | | |
| Shoulder arthroscopy/surgery | 29826 | | 0.38% | 1.77% | 822.58 | 619.18 | 628.41 | 639.42 | 624.59 | 683.30 | 645.19 | 665.04 | 1,146.05 | 606.78 | 593.89 | 622.64 | 608.84 | 656.10 | 625.77 | 618.06 | | | | | | | | | | | | | |
| Knee arthroscopy/surgery | 29888 | | 0.29% | 1.74% | 1,231.96 | 921.55 | 933.28 | 949.67 | 928.81 | 1,014.20 | 959.80 | 990.26 | 1,721.23 | 905.33 | 886.11 | 926.85 | 907.57 | 975.96 | 932.93 | 923.88 | | | | | | | | | | | | | |
| Total hip arthroplasty | 27130 | | 0.19% | 1.55% | 1,810.11 | 1,346.29 | 1,360.53 | 1,384.59 | 1,355.77 | 1,478.04 | 1,401.75 | 1,447.84 | 2,537.88 | 1,327.11 | 1,298.87 | 1,355.79 | 1,329.26 | 1,426.81 | 1,366.66 | 1,356.69 | | | | | | | | | | | | | |
| Knee arthroscopy/surgery | 29877 | | 0.27% | 1.28% | 762.17 | 575.57 | 584.86 | 595.06 | 580.87 | 636.02 | 599.81 | 617.84 | 1,054.87 | 559.94 | 548.08 | 575.13 | 562.06 | 606.15 | 577.62 | 569.87 | | | | | | | | | | | | | |
| Knee arthroscopy/surgery | 29880 | | 0.20% | 1.05% | 850.33 | 640.26 | 649.90 | 661.27 | 645.89 | 706.63 | 667.12 | 687.55 | 1,179.98 | 624.53 | 611.28 | 640.79 | 626.63 | 675.19 | 644.05 | 636.19 | | | | | | | | | | | | | |
| Office/outpatient visit, new | 99202 | | 1.35% | 0.75% | 89.38 | 67.88 | 69.71 | 70.61 | 68.74 | 74.76 | 70.13 | 71.13 | 123.19 | 65.86 | 64.92 | 68.16 | 66.44 | 71.28 | 67.62 | 65.81 | | | | | | | | | | | | | |
| Manual therapy | 97140 | | 2.18% | 0.75% | 36.23 | 26.98 | 27.67 | 27.96 | 27.29 | 29.35 | 27.67 | 27.88 | 50.51 | 26.48 | 26.20 | 27.29 | 26.70 | 28.34 | 27.04 | 26.38 | | | | | | | | | | | | | |
| X-ray exam of knee, 3 | 73562 | | 1.87% | 0.56% | 42.33 | 34.77 | 36.29 | 36.90 | 35.47 | 39.76 | 36.46 | 37.10 | 55.45 | 32.25 | 31.54 | 34.12 | 32.75 | 36.31 | 33.63 | 32.07 | | | | | | | | | | | | | |
| X-ray exam of shoulder | 73030 | 26 | 1.86% | 0.51% | 13.17 | 9.58 | 9.64 | 9.79 | 9.63 | 10.40 | 9.93 | 10.25 | 18.55 | 9.48 | 9.31 | 9.62 | 9.48 | 10.06 | 9.70 | 9.67 | | | | | | | | | | | | | |
| X-ray exam, knee, 4 or more | 73564 | | 1.17% | 0.40% | 48.82 | 39.97 | 41.73 | 42.41 | 40.77 | 45.62 | 41.86 | 42.54 | 64.74 | 37.54 | 36.75 | 39.71 | 38.13 | 42.21 | 39.11 | 37.28 | | | | | | | | | | | | | |
| X-ray exam of knee, 1 or 2 | 73560 | 26 | 1.53% | 0.39% | 12.29 | 8.92 | 8.96 | 9.11 | 8.96 | 9.68 | 9.25 | 9.57 | 17.21 | 8.76 | 8.60 | 8.88 | 8.75 | 9.28 | 8.97 | 8.96 | | | | | | | | | | | | | |
| X-ray exam of ankle | 73610 | 26 | 1.41% | 0.38% | 11.48 | 8.21 | 8.31 | 8.39 | 8.26 | 8.77 | 8.39 | 8.51 | 16.87 | 8.55 | 8.45 | 8.70 | 8.58 | 9.02 | 8.71 | 8.63 | | | | | | | | | | | | | |
| X-ray exam of foot | 73630 | | 1.25% | 0.34% | 36.93 | 30.19 | 31.57 | 32.05 | 30.81 | 34.40 | 31.55 | 31.97 | 49.84 | 28.90 | 28.31 | 30.58 | 29.36 | 32.48 | 30.09 | 28.65 | | | | | | | | | | | | | |
| X-ray exam of wrist | 73110 | 26 | 1.08% | 0.31% | 11.85 | 8.53 | 8.65 | 8.74 | 8.59 | 9.14 | 8.73 | 8.85 | 16.87 | 8.55 | 8.45 | 8.70 | 8.58 | 9.02 | 8.71 | 8.63 | | | | | | | | | | | | | |
| X-ray exam of wrist | 73100 | | 1.06% | 0.26% | 35.75 | 29.28 | 30.51 | 31.04 | 29.85 | 33.47 | 30.73 | 31.33 | 47.15 | 27.34 | 26.73 | 28.89 | 27.75 | 30.77 | 28.52 | 27.26 | | | | | | | | | | | | | |
| X-ray exam of finger(s) | 73140 | | 1.02% | 0.25% | 36.01 | 29.80 | 31.23 | 31.72 | 30.44 | 34.14 | 31.20 | 31.63 | 46.75 | 27.43 | 26.84 | 29.10 | 27.89 | 30.99 | 28.62 | 27.18 | | | | | | | | | | | | | |
| Electric stimulation therapy | 97014 | | 1.22% | 0.15% | 16.07 | 12.08 | 12.39 | 12.53 | 12.22 | 13.22 | 12.44 | 12.59 | 24.96 | 13.44 | 13.24 | 13.93 | 13.56 | 14.59 | 13.81 | 13.42 | | | | | | | | | | | | | |
| Methylprednisolone 40 MG inj | J1030 | | 1.09% | 0.06% | 2.79 | 2.79 | 2.79 | 2.79 | 2.79 | 2.79 | 2.79 | 2.79 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | | | | | | | | | | | |
| Hot or cold packs therapy | 97010 | | 0.011073925 | 0.000486685 | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | Bundled | 8.92 | 4.84 | 4.73 | 5.01 | 4.87 | 5.3 | 5.02 | 4.92 | | | | | | | | | | | | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-17
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Orthopedics

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|-------------|-------------|-------------------|----------|----------|----------|----------|----------|----------|-------------------------|----------|----------|---------|---------|-----------|--------------------------------------|----------|----------|----------|-----|--|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | | | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 13.31% | 7.16% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A | |
| Office/outpatient visit, new | 99203 | | 5.13% | 4.19% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | |
| Knee arthroscopy/surgery | 29881 | | 0.70% | 3.47% | 1,557.81 | 598.43 | 607.84 | 618.44 | 660.94 | 642.44 | 976.77 | 531.23 | 825.32 | 839.70 | 364.57 | N/A | 4,909.00 | 2,465.71 | 1,165.71 | 1,492.01 | 1,032.64 | N/A | |
| Office/outpatient visit, est | 99214 | | 4.16% | 3.36% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | |
| Office consultation | 99243 | | 3.07% | 3.35% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | |
| Total knee arthroplasty | 27447 | | 0.32% | 2.93% | 3,832.63 | 1,439.14 | 1,454.54 | 1,480.23 | 1,580.12 | 1,547.54 | 2,410.07 | 1,298.57 | 2,009.69 | 1,136.17 | 884.98 | N/A | 9,278.23 | 5,929.68 | 2,806.50 | 3,589.22 | 2,476.47 | N/A | |
| Drain/inject, joint/bursa | 20610 | | 3.80% | 2.39% | 167.30 | 72.43 | 74.56 | 75.73 | 80.94 | 77.00 | 112.09 | 62.45 | 98.16 | 55.08 | 43.57 | N/A | 303.51 | 186.99 | 139.98 | 185.87 | 125.62 | N/A | |
| Therapeutic exercises | 97110 | | 5.27% | 2.37% | 73.67 | 28.62 | 29.37 | 29.67 | 31.16 | 29.58 | 47.79 | 26.50 | 14.44 | 21.98 | 17.56 | 29.71 | 97.31 | 39.59 | 53.89 | 53.81 | 48.70 | N/A | |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 0.47% | 2.22% | 314.48 | 65.75 | 66.43 | 67.18 | 70.34 | 68.47 | 119.04 | 66.40 | 93.02 | 52.86 | 41.79 | N/A | 425.65 | 169.76 | 124.50 | 127.40 | 111.23 | N/A | |
| Office/outpatient visit, new | 99204 | | 1.51% | 1.88% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | |
| Office consultation | 99244 | | 1.11% | 1.78% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | |
| Office/outpatient visit, est | 99212 | | 5.31% | 1.77% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | |
| Shoulder arthroscopy/surgery | 29826 | | 0.38% | 1.77% | 1,750.62 | 619.18 | 628.41 | 639.42 | 683.30 | 665.04 | 1,017.74 | 561.95 | 859.47 | 1,270.96 | 379.24 | N/A | 4,747.16 | 2,551.23 | 1,206.59 | 1,543.44 | 1,068.06 | N/A | |
| Knee arthroscopy/surgery | 29888 | | 0.29% | 1.74% | 2,565.99 | 921.55 | 933.28 | 949.67 | 1,014.20 | 990.26 | 1,528.86 | 828.55 | 1,282.00 | 2,228.42 | 565.09 | N/A | 8,685.16 | 3,797.07 | 1,796.26 | 2,298.15 | 1,587.70 | N/A | |
| Total hip arthroplasty | 27130 | | 0.19% | 1.55% | 3,560.16 | 1,346.29 | 1,360.53 | 1,384.59 | 1,478.04 | 1,447.84 | 2,254.09 | 1,210.03 | 1,879.52 | 1,062.45 | 827.40 | N/A | 12,671.59 | 5,547.09 | 2,625.64 | 3,358.22 | 2,317.09 | N/A | |
| Knee arthroscopy/surgery | 29877 | | 0.27% | 1.28% | 1,489.77 | 575.57 | 584.86 | 595.06 | 636.02 | 617.84 | 937.26 | 510.04 | 792.78 | 839.70 | 350.12 | N/A | 4,315.61 | 2,371.54 | 1,121.11 | 1,434.26 | 993.35 | N/A | |
| Knee arthroscopy/surgery | 29880 | | 0.20% | 1.05% | 1,680.22 | 640.26 | 649.90 | 661.27 | 706.63 | 687.55 | 1,047.90 | 570.14 | 884.54 | 839.70 | 390.36 | N/A | 5,933.96 | 2,638.08 | 1,247.47 | 1,595.65 | 1,104.03 | N/A | |
| Office/outpatient visit, new | 99202 | | 1.35% | 0.75% | 121.20 | 67.88 | 69.71 | 70.61 | 74.76 | 71.13 | 109.84 | 59.02 | 93.90 | 51.75 | 39.31 | 69.70 | 171.90 | 136.85 | 129.45 | 142.89 | 116.21 | N/A | |
| Manual therapy | 97140 | | 2.18% | 0.75% | 69.72 | 26.98 | 27.67 | 27.96 | 29.35 | 27.88 | 44.91 | 24.62 | N/A | 20.59 | 16.45 | 27.46 | 74.53 | 37.32 | 50.79 | 50.14 | 45.93 | N/A | |
| X-ray exam of knee, 3 | 73562 | | 1.87% | 0.56% | 132.16 | 34.77 | 36.29 | 36.90 | 39.76 | 37.10 | 49.30 | 29.73 | 45.88 | 25.87 | 20.67 | N/A | 203.76 | 89.76 | 18.58 | 68.75 | 60.87 | N/A | |
| X-ray exam of shoulder | 73030 | 26 | 1.86% | 0.51% | 23.93 | 9.58 | 9.64 | 9.79 | 10.40 | 10.25 | 16.49 | 8.66 | 13.29 | 7.51 | 5.78 | N/A | 91.14 | 24.74 | 18.58 | 18.92 | 16.60 | N/A | |
| X-ray exam, knee, 4 or more | 73564 | | 1.17% | 0.40% | 97.41 | 39.97 | 41.73 | 42.41 | 45.62 | 42.54 | 57.56 | 33.88 | 53.35 | 30.05 | 24.01 | N/A | 228.82 | 103.20 | 21.68 | 79.47 | 69.73 | N/A | |
| X-ray exam of knee, 1 or 2 | 73560 | 26 | 1.53% | 0.39% | 36.76 | 8.92 | 8.96 | 9.11 | 9.68 | 9.57 | 15.30 | 7.95 | 12.34 | 6.96 | 5.34 | N/A | 68.96 | 23.03 | 17.34 | 17.66 | 15.50 | N/A | |
| X-ray exam of ankle | 73610 | 26 | 1.41% | 0.38% | 28.62 | 8.21 | 8.31 | 8.39 | 8.77 | 8.51 | 15.00 | 8.74 | 11.39 | 6.68 | 5.34 | N/A | 72.72 | 21.20 | 15.49 | 15.77 | 13.84 | N/A | |
| X-ray exam of foot | 73630 | | 1.25% | 0.34% | 103.98 | 30.19 | 31.57 | 32.05 | 34.40 | 31.97 | 44.32 | 27.30 | 41.08 | 23.09 | 18.45 | N/A | 181.81 | 77.96 | 15.49 | 59.29 | 52.57 | N/A | |
| X-ray exam of wrist | 73110 | 26 | 1.08% | 0.31% | 23.00 | 8.53 | 8.65 | 8.74 | 9.14 | 8.85 | 15.00 | 9.27 | 11.87 | 6.68 | 5.34 | N/A | 67.70 | 22.03 | 16.10 | 16.40 | 14.39 | N/A | |
| X-ray exam of wrist | 73100 | | 1.06% | 0.26% | 75.42 | 29.28 | 30.51 | 31.04 | 33.47 | 31.33 | 41.92 | 24.92 | 38.41 | 21.98 | 17.34 | N/A | 149.70 | 75.60 | 16.72 | 58.66 | 51.47 | N/A | |
| X-ray exam of finger(s) | 73140 | | 1.02% | 0.25% | 62.36 | 29.80 | 31.23 | 31.72 | 34.14 | 31.63 | 42.06 | 23.78 | 38.95 | 21.98 | 17.56 | N/A | 128.54 | 76.93 | 12.39 | 59.29 | 52.02 | N/A | |
| Electric stimulation therapy | 97014 | | 1.22% | 0.15% | 40.73 | 12.08 | 12.39 | 12.53 | 13.22 | 12.59 | 22.20 | N/A | N/A | 10.57 | 8.45 | N/A | 54.64 | 19.37 | 26.63 | 26.29 | 23.80 | N/A | |
| Methylprednisolone 40 MG inj | J1030 | | 1.09% | 0.06% | 15.35 | 2.79 | 2.79 | 2.79 | 2.79 | 2.79 | 4.30 | 4.63 | 3.76 | 2.53 | N/A | N/A | 12.62 | N/A | N/A | N/A | 3.88 | N/A | |
| Hot or cold packs therapy | 97010 | | 0.011073925 | 0.000486685 | 27.13582237 | Bundled | Bundled | Bundled | Bundled | Bundled | 7.93 | N/A | 6.03 | N/A | Bundled | N/A | 48.57 | 7.077495 | N/A | 9.78 | Bundled | N/A | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-17
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Orthopedics

| Description | HCPCS | Modifier | Commercial Allowed ⁽⁶⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------------------------|-----------------|------------|-------------|-------------|-------------|-------------|-------------|-----------|----------|----------|----------|-----------------|----------|-----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 13.31% | 7.16% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office/outpatient visit, new | 99203 | | 5.13% | 4.19% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Knee arthroscopy/surgery | 29881 | | 0.70% | 3.47% | 3,678.57 | 1,248.61 | 981.67 | 1,128.39 | 1,124.00 | 2,164.25 | 4,330.00 | 1,279.15 | 927.27 | 1,097.46 | 1,008.54 | 2,581.00 | 4,534.00 | 1,349.35 | 927.27 | 1,204.00 | 1,324.26 | 2,725.19 |
| Office/outpatient visit, est | 99214 | | 4.16% | 3.36% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Office consultation | 99243 | | 3.07% | 3.35% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Total knee arthroplasty | 27447 | | 0.32% | 2.93% | 7,264.91 | 2,566.63 | 2,269.14 | 2,461.07 | 2,288.07 | 5,406.51 | 8,600.00 | 2,824.16 | 2,285.91 | 2,680.56 | 2,305.13 | 6,368.00 | 9,037.00 | 3,185.89 | 2,285.91 | 2,883.06 | 3,255.45 | 7,259.90 |
| Drain/inject, joint/bursa | 20610 | | 3.80% | 2.39% | 255.79 | 133.14 | 105.48 | 130.55 | 113.84 | 117.19 | 287.00 | 135.31 | 109.82 | 129.72 | 109.21 | 101.00 | 303.51 | 145.46 | 109.82 | 139.72 | 130.85 | 151.00 |
| Therapeutic exercises | 97110 | | 5.27% | 2.37% | 115.96 | 54.40 | 66.31 | 75.29 | 54.26 | 81.03 | 90.00 | 50.58 | 44.16 | 70.00 | 56.22 | 80.00 | 163.80 | 82.17 | 88.32 | 112.18 | 76.22 | 120.00 |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 0.47% | 2.22% | 283.63 | 155.22 | 119.56 | 126.44 | 116.51 | 252.78 | 298.00 | 139.45 | 107.56 | 122.30 | 113.05 | 279.00 | 298.00 | 192.00 | 113.17 | 133.21 | 123.42 | 300.00 |
| Office/outpatient visit, new | 99204 | | 1.51% | 1.88% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Office consultation | 99244 | | 1.11% | 1.78% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office/outpatient visit, est | 99212 | | 5.31% | 1.77% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Shoulder arthroscopy/surgery | 29826 | | 0.38% | 1.77% | 3,340.87 | 1,174.05 | 755.72 | 940.92 | 966.41 | 2,085.43 | 4,100.00 | 1,361.37 | 942.30 | 1,102.61 | 917.25 | 1,980.90 | 4,907.00 | 1,549.78 | 977.65 | 1,230.49 | 1,375.00 | 3,198.60 |
| Knee arthroscopy/surgery | 29888 | | 0.29% | 1.74% | 6,412.01 | 2,056.59 | 1,468.03 | 1,716.17 | 1,688.61 | 4,038.88 | 7,698.00 | 2,015.06 | 1,459.97 | 1,727.93 | 1,573.80 | 5,074.00 | 8,021.00 | 2,107.32 | 1,459.97 | 1,870.50 | 2,175.70 | 5,714.00 |
| Total hip arthroplasty | 27130 | | 0.19% | 1.55% | 10,557.38 | 2,266.18 | 2,175.36 | 2,390.15 | 2,263.44 | 3,343.42 | 11,867.00 | 2,699.91 | 2,134.20 | 2,525.90 | 2,246.72 | 2,615.86 | 12,155.00 | 2,989.25 | 2,437.91 | 2,703.68 | 3,025.08 | 5,239.85 |
| Knee arthroscopy/surgery | 29877 | | 0.27% | 1.28% | 2,617.42 | 1,077.64 | 660.30 | 840.76 | 865.56 | 1,659.14 | 1,993.00 | 1,224.31 | 890.48 | 952.34 | 829.92 | 1,106.03 | 3,985.00 | 1,286.25 | 890.48 | 1,078.46 | 1,061.92 | 2,620.35 |
| Knee arthroscopy/surgery | 29880 | | 0.20% | 1.05% | 5,291.44 | 1,397.97 | 995.08 | 1,195.49 | 1,178.32 | 2,667.02 | 5,255.50 | 1,372.57 | 995.77 | 1,178.53 | 1,057.10 | 3,335.00 | 5,520.00 | 1,438.14 | 1,075.43 | 1,282.51 | 1,422.57 | 3,386.04 |
| Office/outpatient visit, new | 99202 | | 1.35% | 0.75% | 149.21 | 91.12 | 86.37 | 110.70 | 93.63 | 87.29 | 155.00 | 93.40 | 99.63 | 114.79 | 90.39 | 88.00 | 172.00 | 103.33 | 99.63 | 123.60 | 108.17 | 97.00 |
| Manual therapy | 97140 | | 2.18% | 0.75% | 119.79 | 39.28 | 49.43 | 57.57 | 43.86 | 60.99 | 112.10 | 28.47 | 40.76 | 44.08 | 28.44 | 50.00 | 180.00 | 56.94 | 61.35 | 79.16 | 56.80 | 90.00 |
| X-ray exam of knee, 3 | 73562 | | 1.87% | 0.56% | 158.96 | 60.24 | 46.01 | 55.63 | 51.96 | 73.18 | 186.00 | 61.37 | 52.65 | 60.72 | 53.23 | 71.61 | 193.00 | 64.88 | 52.65 | 67.68 | 61.62 | 97.00 |
| X-ray exam of shoulder | 73030 | 26 | 1.86% | 0.51% | 44.76 | 22.58 | 16.66 | 18.02 | 16.64 | 33.27 | 42.00 | 18.67 | 14.72 | 16.49 | 15.47 | 38.00 | 61.00 | 29.14 | 15.01 | 18.00 | 16.66 | 38.95 |
| X-ray exam, knee, 4 or more | 73564 | | 1.17% | 0.40% | 156.51 | 69.59 | 45.63 | 67.39 | 58.29 | 99.41 | 193.00 | 70.48 | 43.59 | 72.09 | 59.41 | 104.00 | 210.00 | 75.65 | 61.14 | 79.00 | 70.47 | 119.10 |
| X-ray exam of knee, 1 or 2 | 73560 | 26 | 1.53% | 0.39% | 37.59 | 20.00 | 15.08 | 16.94 | 15.62 | 26.33 | 33.00 | 17.44 | 13.59 | 16.00 | 14.88 | 31.00 | 54.00 | 23.20 | 14.68 | 17.10 | 15.95 | 31.00 |
| X-ray exam of ankle | 73610 | 26 | 1.41% | 0.38% | 45.98 | 21.95 | 15.72 | 17.10 | 15.19 | 30.45 | 45.00 | 17.96 | 13.59 | 16.01 | 14.60 | 34.00 | 61.00 | 30.50 | 14.38 | 17.28 | 15.86 | 35.00 |
| X-ray exam of foot | 73630 | | 1.25% | 0.34% | 113.88 | 53.11 | 36.28 | 49.93 | 44.52 | 73.15 | 105.00 | 56.48 | 33.40 | 54.37 | 45.34 | 75.00 | 154.86 | 58.37 | 46.99 | 59.33 | 54.60 | 94.00 |
| X-ray exam of wrist | 73110 | 26 | 1.08% | 0.31% | 41.24 | 21.59 | 16.71 | 17.46 | 15.58 | 33.24 | 37.00 | 17.96 | 13.59 | 16.01 | 14.65 | 38.00 | 57.00 | 29.00 | 15.85 | 17.28 | 16.08 | 38.95 |
| X-ray exam of wrist | 73100 | | 1.06% | 0.26% | 110.57 | 52.15 | 34.23 | 47.89 | 42.41 | 86.38 | 125.00 | 53.00 | 30.57 | 51.59 | 42.94 | 87.00 | 144.00 | 54.12 | 43.59 | 56.00 | 51.38 | 98.80 |
| X-ray exam of finger(s) | 73140 | | 1.02% | 0.25% | 96.52 | 45.13 | 34.06 | 42.98 | 38.28 | 61.20 | 109.00 | 48.70 | 42.55 | 47.57 | 40.01 | 57.50 | 124.00 | 50.64 | 44.16 | 55.00 | 47.31 | 73.00 |
| Electric stimulation therapy | 97014 | | 1.22% | 0.15% | 43.78 | 14.91 | 17.73 | 19.75 | 15.85 | 23.47 | 47.00 | 14.53 | 20.00 | 18.87 | 14.63 | 25.00 | 50.00 | 15.00 | 20.95 | 20.07 | 15.54 | 29.00 |
| Methylprednisolone 40 MG inj | J1030 | | 1.09% | 0.06% | 18.06 | 7.82 | 8.73 | 9.01 | 5.75 | 9.30 | 17.00 | 5.79 | 5.06 | 5.36 | 4.31 | 6.08 | 23.00 | 11.97 | 10.12 | 10.00 | 6.95 | 12.42 |
| Hot or cold packs therapy | 97010 | | 0.011073925 | 0.000486685 | 27.1046748 | 8.143092144 | 9.480886076 | 9.594641265 | 9.042416439 | 16.42080121 | 32 | 4.98 | 6.21 | 8.5 | 5.51 | 15 | 40 | 10.93 | 12 | 10.08 | 12.9 | 21.5 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-17
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Orthopedics

| | | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|-------------------------------|-----------------|-----------------|-------------|-------------|----------|-------------|-------------|-------------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|
| | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 13.31% | 7.16% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office/outpatient visit, new | 99203 | | 5.13% | 4.19% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Knee arthroscopy/surgery | 29881 | | 0.70% | 3.47% | Not Cred | 1,774.77 | 1,257.68 | 1,521.07 | 1,598.77 | 2,241.71 | Not Cred | 1,780.00 | 1,522.17 | 1,556.00 | 1,554.54 | 1,694.00 | Not Cred | 2,375.00 | 1,623.00 | 1,852.00 | 2,048.00 | 4,011.00 |
| Office/outpatient visit, est | 99214 | | 4.16% | 3.36% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Office consultation | 99243 | | 3.07% | 3.35% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Total knee arthroplasty | 27447 | | 0.32% | 2.93% | 8,294.36 | 3,906.99 | 4,104.48 | 4,120.43 | 4,446.71 | 5,388.93 | 8,752.00 | 4,391.00 | 3,920.96 | 4,290.00 | 4,245.00 | 4,235.00 | 9,500.00 | 5,400.00 | 5,441.00 | 4,845.00 | 5,781.00 | 8,886.00 |
| Drain/inject, joint/bursa | 20610 | | 3.80% | 2.39% | 274.73 | 146.86 | 130.14 | 167.04 | 163.20 | 162.33 | 281.00 | 150.00 | 129.00 | 173.50 | 161.00 | 161.00 | 305.00 | 200.00 | 183.57 | 211.00 | 201.00 | 204.00 |
| Therapeutic exercises | 97110 | | 5.27% | 2.37% | 64.21 | 35.07 | 47.83 | 50.70 | 47.75 | 39.57 | 65.00 | 35.00 | 48.00 | 52.00 | 48.00 | 40.00 | 81.00 | 40.00 | 50.00 | 59.00 | 55.00 | 50.00 |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 0.47% | 2.22% | 295.90 | 199.14 | 184.96 | 194.45 | 206.14 | 209.08 | 298.00 | 189.20 | 172.00 | 215.00 | 201.40 | 250.00 | 345.00 | 240.00 | 205.00 | 231.00 | 241.00 | 279.00 |
| Office/outpatient visit, new | 99204 | | 1.51% | 1.88% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Office consultation | 99244 | | 1.11% | 1.78% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Office/outpatient visit, est | 99212 | | 5.31% | 1.77% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Shoulder arthroscopy/surgery | 29826 | | 0.38% | 1.77% | Not Cred | 2,151.15 | Not Cred | 1,691.24 | 1,724.00 | Not Cred | Not Cred | 2,395.72 | Not Cred | 1,762.00 | 1,587.00 | Not Cred | Not Cred | 2,708.21 | Not Cred | 2,045.00 | 2,156.00 | Not Cred |
| Knee arthroscopy/surgery | 29888 | | 0.29% | 1.74% | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data |
| Total hip arthroplasty | 27130 | | 0.19% | 1.55% | Not Cred | 4,415.65 | 3,590.95 | 3,774.76 | 4,296.83 | 4,175.47 | Not Cred | 4,991.00 | 3,586.00 | 3,941.00 | 4,019.80 | 4,302.00 | Not Cred | 5,800.00 | 3,778.00 | 4,378.00 | 5,409.00 | 5,473.00 |
| Knee arthroscopy/surgery | 29877 | | 0.27% | 1.28% | No Data | Not Cred | No Data | Not Cred | No Data | 1,420.39 | Not Cred | No Data | Not Cred | No Data | 1,478.52 | Not Cred | No Data | Not Cred | Not Cred | No Data | 1,658.00 | Not Cred |
| Knee arthroscopy/surgery | 29880 | | 0.20% | 1.05% | Not Cred | 1,795.16 | Not Cred | 1,751.62 | 1,924.49 | Not Cred | Not Cred | 1,625.75 | Not Cred | 1,885.38 | 1,791.00 | Not Cred | Not Cred | 2,504.50 | Not Cred | 1,999.85 | 2,201.00 | Not Cred |
| Office/outpatient visit, new | 99202 | | 1.35% | 0.75% | 140.22 | 88.61 | 96.09 | 119.68 | 110.48 | 93.11 | 150.00 | 91.00 | 105.00 | 127.00 | 112.00 | 98.10 | 177.00 | 115.00 | 120.00 | 151.30 | 131.00 | 116.00 |
| Manual therapy | 97140 | | 2.18% | 0.75% | 61.95 | 35.68 | 47.24 | 49.82 | 45.33 | 38.27 | 64.00 | 35.51 | 46.25 | 50.00 | 45.00 | 40.00 | 70.00 | 44.00 | 55.00 | 57.75 | 50.00 | 50.00 |
| X-ray exam of knee, 3 | 73562 | | 1.87% | 0.56% | 179.43 | 83.98 | 74.97 | 76.82 | 80.18 | 90.42 | 193.00 | 86.00 | 70.52 | 76.88 | 74.00 | 73.00 | 203.75 | 100.00 | 80.00 | 97.00 | 89.38 | 145.00 |
| X-ray exam of shoulder | 73030 | 26 | 1.86% | 0.51% | 50.02 | 33.91 | 29.36 | 29.81 | 30.21 | 26.08 | 42.00 | 28.00 | 28.00 | 29.00 | 28.00 | 15.47 | 63.00 | 43.00 | 31.00 | 39.00 | 35.00 | 46.00 |
| X-ray exam, knee, 4 or more | 73564 | | 1.17% | 0.40% | 178.44 | 81.98 | 84.24 | 86.28 | 92.91 | 106.79 | 193.00 | 89.00 | 75.00 | 89.00 | 83.75 | 91.00 | 214.00 | 103.57 | 102.00 | 106.40 | 109.00 | 180.00 |
| X-ray exam of knee, 1 or 2 | 73560 | 26 | 1.53% | 0.39% | 35.08 | 29.23 | 27.24 | 26.13 | 28.43 | 28.79 | 33.00 | 26.00 | 29.00 | 29.00 | 27.50 | 28.00 | 44.00 | 37.00 | 34.00 | 30.00 | 34.00 | 40.24 |
| X-ray exam of ankle | 73610 | 26 | 1.41% | 0.38% | 47.75 | 28.79 | 27.66 | 27.10 | 27.53 | 25.41 | 45.00 | 26.00 | 28.00 | 28.25 | 26.00 | 32.00 | 63.00 | 39.00 | 34.00 | 31.00 | 32.00 | 38.00 |
| X-ray exam of foot | 73630 | | 1.25% | 0.34% | 101.43 | 67.56 | 59.72 | 66.60 | 69.23 | 70.46 | 115.00 | 70.35 | 64.78 | 65.80 | 65.00 | 65.00 | 159.00 | 90.58 | 66.00 | 90.00 | 80.00 | 107.90 |
| X-ray exam of wrist | 73110 | 26 | 1.08% | 0.31% | 49.13 | 31.58 | 31.96 | 26.25 | 29.47 | 23.73 | 55.00 | 26.00 | 32.00 | 28.00 | 26.00 | 22.75 | 66.60 | 37.00 | 39.00 | 32.00 | 36.00 | 37.00 |
| X-ray exam of wrist | 73100 | | 1.06% | 0.26% | 126.89 | 77.12 | No Data | 54.90 | 66.47 | Not Cred | 125.00 | 72.00 | No Data | 58.00 | 62.00 | Not Cred | 137.00 | 149.00 | No Data | 72.00 | 75.00 | Not Cred |
| X-ray exam of finger(s) | 73140 | | 1.02% | 0.25% | Not Cred | 62.83 | Not Cred | 51.80 | 66.04 | 89.36 | Not Cred | 66.38 | Not Cred | 55.00 | 61.00 | 59.00 | Not Cred | 80.09 | Not Cred | 66.00 | 76.03 | 80.00 |
| Electric stimulation therapy | 97014 | | 1.22% | 0.15% | 40.03 | 16.27 | 16.88 | 21.62 | 24.31 | 18.10 | 40.00 | 15.10 | 18.00 | 20.00 | 20.00 | 15.00 | 47.00 | 20.00 | 22.00 | 30.00 | 31.00 | 20.00 |
| Methylprednisolone 40 MG inj | 11030 | | 1.09% | 0.06% | 20.13 | 12.13 | 12.24 | 15.50 | 14.95 | 21.69 | 22.00 | 10.00 | 10.00 | 11.00 | 10.00 | 20.00 | 22.00 | 15.00 | 15.60 | 19.00 | 13.00 | 30.00 |
| Hot or cold packs therapy | 97010 | | 0.011073925 | 0.000486685 | 25.06521739 | 16.12978723 | Not Cred | 11.32696498 | 16.59119277 | 12.23248705 | 25 | 15 | Not Cred | 10 | 15 | 10 | 30 | 20 | Not Cred | 15 | 20 | 17.06 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-18
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Pediatrics

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Medicare ⁽¹⁾ | | | | | | | | TRICARE ⁽²⁾ | | | | | | | |
|---------------------------------|-------|----------|--------------------|--------------------|-------------------------|---------|---------|---------|---------|---------|---------|---------|------------------------|---------|---------|---------|---------|---------|---------|---------|
| | | | | | Portland | | Rest Of | | Seattle | | Rest Of | | Portland | | Rest of | | Seattle | | Rest of | |
| | | | | | OR | WA | OR | WA | WA | WA | WY | AK | ID | ND | OR | OR | WA | WA | WY | |
| Office/outpatient visit, est | 99213 | | 20.03% | 26.40% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 |
| Office/outpatient visit, est | 99214 | | 5.44% | 10.74% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 |
| Prev visit, est, age 1-4 | 99392 | | 3.24% | 5.71% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 156.60 | 83.64 | 82.47 | 86.55 | 84.38 | 90.46 | 85.85 | 83.54 |
| Per pm reeval, est pat, inf | 99391 | | 3.31% | 5.23% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 139.73 | 75.09 | 74.02 | 77.85 | 75.80 | 81.45 | 77.14 | 74.91 |
| Pneumococcal vacc, ped <5, IM | 90669 | | 2.52% | 4.38% | 95.48 | 95.48 | 95.48 | 95.48 | 95.48 | 95.48 | 95.48 | 95.48 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Prev visit, est, age 5-11 | 99393 | | 1.97% | 3.44% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 156.04 | 83.29 | 82.13 | 86.18 | 84.02 | 90.06 | 85.48 | 83.20 |
| Immunization admin | 90471 | | 6.76% | 3.07% | 27.44 | 21.99 | 22.92 | 23.24 | 22.40 | 24.81 | 22.87 | 23.12 | 36.58 | 20.72 | 20.35 | 21.80 | 21.02 | 23.02 | 21.47 | 20.52 |
| Prev visit, est, age 12-17 | 99394 | | 1.27% | 2.43% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 172.58 | 91.64 | 90.44 | 94.70 | 92.42 | 98.82 | 93.94 | 91.51 |
| Chicken pox vaccine, sc | 90716 | | 1.16% | 1.95% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Dtap vaccine, <7 yo, im | 90700 | | 2.39% | 1.67% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Office/outpatient visit, est | 99212 | | 1.74% | 1.42% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 |
| Office/outpatient visit, est | 99215 | | 0.50% | 1.33% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 |
| Hep a vacc, ped/adol, 2 dose | 90633 | | 2.19% | 1.29% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Immune admin 1 inj, <8 yrs | 90465 | | 2.46% | 1.12% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 36.58 | 20.72 | 20.35 | 21.80 | 21.02 | 23.02 | 21.47 | 20.52 |
| Poliovirus, ipv, sc/im | 90713 | | 1.90% | 1.08% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Strep a assay w/optic | 87880 | | 2.37% | 0.85% | 16.88 | 16.40 | 16.88 | 16.88 | 16.88 | 16.88 | 16.88 | 16.88 | 20.66 | 15.74 | 15.42 | 15.61 | 15.61 | 14.33 | 14.44 | 15.76 |
| Immunization admin, each add | 90472 | | 3.69% | 0.85% | 14.54 | 11.06 | 11.37 | 11.51 | 11.20 | 12.18 | 11.42 | 11.57 | 19.82 | 10.59 | 10.43 | 10.95 | 10.68 | 11.47 | 10.88 | 10.61 |
| Immune admin addl inj, <8 y | 90466 | | 1.83% | 0.40% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 19.82 | 10.59 | 10.43 | 10.95 | 10.68 | 11.47 | 10.88 | 10.61 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.21% | 0.35% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Visual acuity screen | 99173 | | 3.27% | 0.19% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 15.95 | 9.82 | 9.38 | 10.40 | 9.91 | 11.43 | 10.49 | 10.17 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-18
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Pediatrics

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|---------------------------------|-------|----------|------------|------------|-------------------|---------|---------|---------|---------|---------|-------------------------|---------|---------|---------|---------|---------|--------------------------------------|----------|----------|---------------|-------------|-----|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 20.03% | 26.40% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 | \$112.89 | N/A |
| Office/outpatient visit, est | 99214 | | 5.44% | 10.74% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A |
| Prev visit, est, age 1-4 | 99392 | | 3.24% | 5.71% | 227.40 | N/A | N/A | N/A | N/A | N/A | 139.24 | 102.99 | 119.50 | 65.66 | 71.35 | N/A | 171.92 | 169.91 | 160.42 | 177.08 | Not Covered | N/A |
| Per pm reeval, est pat, inf | 99391 | | 3.31% | 5.23% | 203.38 | N/A | N/A | N/A | N/A | N/A | 124.24 | 89.46 | 107.23 | 58.98 | 62.30 | N/A | 161.80 | 152.71 | 144.32 | 159.99 | Not Covered | N/A |
| Pneumococcal vacc, ped <5, IM | 90669 | | 2.52% | 4.38% | 52.19 | 95.48 | 95.48 | 95.48 | 95.48 | 95.48 | N/A | 78.80 | N/A | N/A | N/A | N/A | 126.91 | N/A | N/A | 80% of billed | 89.78 | N/A |
| Prev visit, est, age 5-11 | 99393 | | 1.97% | 3.44% | 224.33 | N/A | N/A | N/A | N/A | N/A | 138.74 | 102.60 | 118.97 | 65.38 | 75.34 | N/A | 187.09 | 169.27 | 159.81 | 176.39 | Not Covered | N/A |
| Immunization admin | 90471 | | 6.76% | 3.07% | 10.39 | 21.99 | 22.92 | 23.24 | 24.81 | 23.12 | 32.51 | 19.07 | 13.90 | 16.41 | 13.12 | 10.00 | 35.87 | 30.42 | 42.12 | 43.22 | 38.18 | N/A |
| Prev visit, est, age 12-17 | 99394 | | 1.27% | 2.43% | 248.31 | N/A | N/A | N/A | N/A | N/A | 153.75 | 116.24 | 130.71 | 71.78 | 82.58 | N/A | 202.26 | 185.43 | 174.67 | 193.49 | Not Covered | N/A |
| Chicken pox vaccine, sc | 90716 | | 1.16% | 1.95% | 183.18 | N/A | N/A | N/A | N/A | N/A | N/A | 77.33 | N/A | 92.57 | N/A | N/A | 146.91 | N/A | N/A | 80% of billed | 89.66 | N/A |
| Dtap vaccine, < 7 yo, im | 90700 | | 2.39% | 1.67% | 66.52 | N/A | N/A | N/A | N/A | N/A | N/A | 17.58 | N/A | N/A | N/A | N/A | 48.29 | N/A | N/A | 80% of billed | Not Covered | N/A |
| Office/outpatient visit, est | 99212 | | 1.74% | 1.42% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A |
| Office/outpatient visit, est | 99215 | | 0.50% | 1.33% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A |
| Hep a vacc, ped/adol, 2 dose | 90633 | | 2.19% | 1.29% | 88.01 | N/A | N/A | N/A | N/A | N/A | N/A | 25.15 | N/A | N/A | N/A | N/A | 67.60 | N/A | N/A | 80% of billed | Not Covered | N/A |
| Immune admin 1 inj, < 8 yrs | 90465 | | 2.46% | 1.12% | 69.45 | N/A | N/A | N/A | N/A | N/A | 32.51 | 19.07 | 13.90 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Poliovirus, ipv, sc/im | 90713 | | 1.90% | 1.08% | 69.59 | N/A | N/A | N/A | N/A | N/A | N/A | 26.52 | 26.29 | 28.13 | N/A | N/A | 63.46 | N/A | N/A | 80% of billed | 53.30 | N/A |
| Strep a assay w/optic | 87880 | | 2.37% | 0.85% | 50.15 | 16.40 | 16.88 | 16.88 | 16.88 | 16.88 | 17.18 | 16.28 | 17.18 | 12.71 | 13.06 | N/A | 89.05 | TBD | 42.20 | 80% of billed | 23.63 | N/A |
| Immunization admin, each add | 90472 | | 3.69% | 0.85% | 15.40 | 11.06 | 11.37 | 11.51 | 12.18 | 11.57 | 17.63 | 9.75 | 11.02 | 8.35 | 6.67 | N/A | 35.87 | 15.30 | 21.06 | 21.61 | 18.82 | N/A |
| Immune admin addl inj, < 8 y | 90466 | | 1.83% | 0.40% | 41.11 | N/A | N/A | N/A | N/A | N/A | 17.63 | 7.52 | 11.02 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.21% | 0.35% | 14.46 | N/A | N/A | N/A | N/A | N/A | 15.56 | 13.22 | 11.34 | 11.36 | N/A | N/A | 18.61 | N/A | N/A | 80% of billed | 22.10 | N/A |
| Visual acuity screen | 99173 | | 3.27% | 0.19% | 26.83 | N/A | N/A | N/A | N/A | N/A | 3.30 | 26.32 | 3.20 | 1.95 | Bundled | N/A | 53.44 | 4.91 | 4.96 | 5.08 | Bundled | N/A |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-18
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Pediatrics

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|--------------------|--------------------|-----------------------------------|---------|---------|----------|---------|---------|----------|---------|---------|----------|---------|---------|-----------------|----------|---------|----------|----------|---------|
| | | | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | |
| | | | | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 20.03% | 26.40% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Office/outpatient visit, est | 99214 | | 5.44% | 10.74% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Prev visit, est, age 1-4 | 99392 | | 3.24% | 5.71% | 178.30 | 123.31 | 112.75 | 151.48 | 127.82 | 114.55 | 183.00 | 120.96 | 115.41 | 149.44 | 120.96 | 116.57 | 195.00 | 133.82 | 115.41 | 158.01 | 146.72 | 125.00 |
| Per pm reeval, est pat, inf | 99391 | | 3.31% | 5.23% | 170.54 | 110.09 | 100.73 | 135.60 | 114.81 | 105.25 | 180.00 | 107.80 | 103.53 | 134.07 | 109.03 | 108.51 | 189.15 | 119.26 | 103.53 | 141.08 | 131.72 | 120.00 |
| Pneumococcal vacc, ped <5, IM | 90669 | | 2.52% | 4.38% | 47.19 | 27.72 | 85.09 | 98.00 | 12.52 | 37.16 | 18.89 | 0.01 | 88.96 | 95.48 | 5.96 | 14.31 | 99.84 | 86.69 | 88.96 | 116.00 | 15.60 | 95.48 |
| Prev visit, est, age 5-11 | 99393 | | 1.97% | 3.44% | 174.56 | 121.04 | 110.09 | 151.03 | 127.10 | 112.03 | 188.00 | 119.95 | 114.92 | 149.44 | 120.64 | 114.00 | 195.00 | 132.70 | 114.92 | 158.92 | 146.28 | 128.00 |
| Immunization admin | 90471 | | 6.76% | 3.07% | 26.62 | 21.70 | 23.10 | 31.49 | 23.59 | 17.23 | 26.00 | 19.00 | 24.63 | 35.00 | 25.00 | 14.31 | 32.00 | 30.14 | 24.63 | 41.62 | 30.45 | 22.90 |
| Prev visit, est, age 12-17 | 99394 | | 1.27% | 2.43% | 155.91 | 117.79 | 98.70 | 162.96 | 135.21 | 98.63 | 188.10 | 130.38 | 118.95 | 163.48 | 131.76 | 110.00 | 210.00 | 144.90 | 126.31 | 176.90 | 159.25 | 136.80 |
| Chicken pox vaccine, sc | 90716 | | 1.16% | 1.95% | 72.34 | 31.51 | 86.14 | 89.94 | 14.45 | 36.31 | 85.00 | 0.01 | 91.58 | 90.49 | 5.96 | 14.31 | 105.00 | 89.49 | 93.98 | 98.91 | 15.60 | 90.21 |
| Dtap vaccine, < 7 yo, im | 90700 | | 2.39% | 1.67% | 13.77 | 8.53 | 19.35 | 26.18 | 8.55 | 16.04 | 15.00 | 0.01 | 19.73 | 23.58 | 6.38 | 14.00 | 27.00 | 22.99 | 20.29 | 31.45 | 15.60 | 25.00 |
| Office/outpatient visit, est | 99212 | | 1.74% | 1.42% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Office/outpatient visit, est | 99215 | | 0.50% | 1.33% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Hep a vacc, ped/adol, 2 dose | 90633 | | 2.19% | 1.29% | 31.65 | 10.59 | 26.53 | 33.46 | 9.45 | 18.46 | 30.77 | 0.01 | 28.80 | 31.49 | 6.00 | 14.31 | 41.14 | 31.04 | 29.41 | 34.86 | 15.60 | 34.69 |
| Immune admin 1 inj, < 8 yrs | 90465 | | 2.46% | 1.12% | 28.19 | 23.76 | 23.73 | 35.70 | 23.83 | 15.04 | 30.00 | 27.76 | 24.63 | 37.00 | 27.00 | 14.31 | 32.00 | 30.00 | 24.63 | 42.09 | 30.22 | 14.31 |
| Poliovirus, ipv, sc/im | 90713 | | 1.90% | 1.08% | 31.76 | 11.73 | 27.64 | 30.91 | 10.06 | 16.02 | 32.96 | 0.01 | 30.88 | 29.65 | 8.00 | 14.00 | 49.00 | 28.85 | 32.40 | 33.15 | 15.60 | 28.51 |
| Strep a assay w/optic | 87880 | | 2.37% | 0.85% | 44.87 | 23.63 | 33.38 | 22.42 | 18.79 | 26.55 | 49.00 | 23.12 | 34.34 | 23.46 | 17.52 | 27.00 | 64.00 | 24.85 | 34.34 | 24.13 | 20.11 | 35.00 |
| Immunization admin, each add | 90472 | | 3.69% | 0.85% | 22.91 | 13.41 | 12.81 | 18.65 | 15.10 | 14.25 | 25.00 | 14.34 | 12.31 | 19.32 | 15.24 | 14.31 | 26.00 | 16.00 | 12.31 | 20.16 | 16.40 | 14.31 |
| Immune admin addl inj, < 8 y | 90466 | | 1.83% | 0.40% | 21.99 | 14.06 | 13.51 | 19.04 | 15.21 | 14.43 | 20.50 | 15.00 | 12.31 | 19.43 | 14.98 | 14.03 | 27.00 | 16.14 | 12.56 | 20.01 | 15.66 | 14.31 |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.21% | 0.35% | 20.88 | 13.71 | 14.06 | 15.34 | 13.55 | 15.07 | 20.00 | 13.88 | 12.29 | 14.21 | 14.21 | 13.94 | 28.00 | 16.00 | 15.00 | 16.53 | 15.58 | 19.74 |
| Visual acuity screen | 99173 | | 3.27% | 0.19% | 13.36 | 5.01 | 5.66 | 6.03 | 4.57 | 4.99 | 15.00 | 3.38 | 3.58 | 4.83 | 3.92 | 3.01 | 16.00 | 4.00 | 14.00 | 5.67 | 4.37 | 5.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-18
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Pediatrics

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|---------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 20.03% | 26.40% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Office/outpatient visit, est | 99214 | | 5.44% | 10.74% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Prev visit, est, age 1-4 | 99392 | | 3.24% | 5.71% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Per pm reeval, est pat, inf | 99391 | | 3.31% | 5.23% | No Data | No Data | No Data | No Cred | No Data | No Data | No Data | No Data | No Data | No Cred | No Data | No Data | No Data | No Data | No Data | No Cred | No Data | No Data |
| Pneumococcal vacc, ped <5, IM | 90669 | | 2.52% | 4.38% | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data |
| Prev visit, est, age 5-11 | 99393 | | 1.97% | 3.44% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Immunization admin | 90471 | | 6.76% | 3.07% | 27.07 | 27.47 | 31.90 | 34.76 | 32.20 | 23.54 | 25.00 | 30.00 | 32.00 | 38.00 | 32.00 | 22.50 | 36.00 | 36.25 | 38.00 | 46.50 | 42.00 | 28.15 |
| Prev visit, est, age 12-17 | 99394 | | 1.27% | 2.43% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Chicken pox vaccine, sc | 90716 | | 1.16% | 1.95% | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data | No Data | No Data | No Data | Not Cred | Not Cred | No Data |
| Dtap vaccine, < 7 yo, im | 90700 | | 2.39% | 1.67% | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data |
| Office/outpatient visit, est | 99212 | | 1.74% | 1.42% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Office/outpatient visit, est | 99215 | | 0.50% | 1.33% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Hep a vacc, ped/adol, 2 dose | 90633 | | 2.19% | 1.29% | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred | No Data | No Data | Not Cred |
| Immune admin 1 inj, < 8 yrs | 90465 | | 2.46% | 1.12% | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data |
| Poliovirus, ipv, sc/im | 90713 | | 1.90% | 1.08% | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data | No Data | Not Cred | No Data | Not Cred | No Data | No Data | No Data | Not Cred | No Data | Not Cred | Not Cred | No Data |
| Strep a assay w/optic | 87880 | | 2.37% | 0.85% | Not Cred | 32.88 | 41.83 | 29.23 | 37.17 | 30.74 | Not Cred | 30.00 | 46.50 | 29.00 | 35.30 | 29.10 | Not Cred | 45.00 | 50.00 | 36.00 | 51.00 | 35.00 |
| Immunization admin, each add | 90472 | | 3.69% | 0.85% | Not Cred | 18.02 | 16.10 | 19.99 | 20.97 | Not Cred | Not Cred | 18.13 | 18.00 | 21.00 | 19.50 | Not Cred | Not Cred | 21.50 | 20.00 | 25.00 | 25.00 | Not Cred |
| Immune admin addl inj, < 8 y | 90466 | | 1.83% | 0.40% | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Flu vaccine age 3 yo & over, im | 90658 | | 1.21% | 0.35% | 16.04 | 15.50 | 14.66 | 16.15 | 16.31 | 14.83 | 13.22 | 13.50 | 13.55 | 13.25 | 13.22 | 13.21 | 23.05 | 20.00 | 16.00 | 20.00 | 20.00 | 18.00 |
| Visual acuity screen | 99173 | | 3.27% | 0.19% | No Data | Not Cred | No Data | Not Cred | 24.59 | Not Cred | No Data | Not Cred | No Data | Not Cred | 20.00 | Not Cred | No Data | Not Cred | No Data | Not Cred | 45.00 | Not Cred |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-19
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Radiology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | |
|------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | WA | WA | WY | AK | ID | ND | Portland | Rest of | Seattle | Rest of | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | |
| Mri brain w/o & w/dye | 70553 | 26 | 1.22% | 6.64% | \$159.35 | \$113.98 | \$115.30 | \$116.49 | \$114.66 | \$121.71 | \$116.51 | \$118.15 | \$233.34 | \$118.21 | \$117.00 | \$120.37 | \$118.62 | \$124.45 | \$120.18 | \$118.82 | |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 1.27% | 5.24% | 91.78 | 65.75 | 66.43 | 67.18 | 66.13 | 70.34 | 67.34 | 68.47 | 133.88 | 67.86 | 67.10 | 69.06 | 68.06 | 71.50 | 69.06 | 68.38 | |
| Mammogram, screening | 77057 | 26 | 6.70% | 4.55% | 47.32 | 33.85 | 34.25 | 34.60 | 34.06 | 36.14 | 34.59 | 35.07 | 69.29 | 35.10 | 34.74 | 35.75 | 35.22 | 36.96 | 35.69 | 35.29 | |
| Mri lumbar spine w/o dye | 72148 | 26 | 1.14% | 4.48% | 100.26 | 71.77 | 72.55 | 73.33 | 72.19 | 76.71 | 73.44 | 74.58 | 146.76 | 74.39 | 73.59 | 75.74 | 74.63 | 78.37 | 75.67 | 74.87 | |
| Ct pelvis w/dye | 72193 | 26 | 2.23% | 3.10% | 78.47 | 56.15 | 56.80 | 57.39 | 56.49 | 59.97 | 57.41 | 58.22 | 115.12 | 58.36 | 57.76 | 59.44 | 58.57 | 61.47 | 59.35 | 58.67 | |
| Ct abdomen w/dye | 74160 | 26 | 2.11% | 3.10% | 85.93 | 61.49 | 62.23 | 62.86 | 61.87 | 65.65 | 62.83 | 63.66 | 125.89 | 63.81 | 63.18 | 65.00 | 64.05 | 67.19 | 64.86 | 64.09 | |
| Mri neck spine w/o dye | 72141 | 26 | 0.71% | 2.69% | 108.23 | 77.45 | 78.33 | 79.15 | 77.91 | 82.74 | 79.20 | 80.36 | 158.31 | 80.21 | 79.38 | 81.67 | 80.48 | 84.45 | 81.56 | 80.65 | |
| Screeningmammographydigital | G0202 | 26 | 2.43% | 2.58% | 47.32 | 33.85 | 34.25 | 34.60 | 34.06 | 36.14 | 34.59 | 35.07 | 68.71 | 34.75 | 34.40 | 35.37 | 34.87 | 36.56 | 35.32 | 34.95 | |
| Mri joint upr extrem w/o dye | 73221 | 26 | 0.57% | 2.34% | 92.15 | 66.07 | 66.77 | 67.52 | 66.46 | 70.72 | 67.68 | 68.81 | 133.88 | 67.86 | 67.10 | 69.06 | 68.06 | 71.50 | 69.06 | 68.38 | |
| Ct abdomen w/o & w/dye | 74170 | 26 | 0.81% | 2.10% | 94.63 | 67.70 | 68.50 | 69.20 | 68.12 | 72.29 | 69.19 | 70.13 | 139.10 | 70.54 | 69.82 | 71.86 | 70.79 | 74.31 | 71.74 | 70.91 | |
| Ct head/brain w/o dye | 70450 | 26 | 2.23% | 1.81% | 57.19 | 40.87 | 41.39 | 41.79 | 41.13 | 43.58 | 41.71 | 42.20 | 84.27 | 42.71 | 42.31 | 43.53 | 42.88 | 44.97 | 43.40 | 42.85 | |
| Mri brain w/o dye | 70551 | 26 | 0.52% | 1.77% | 99.82 | 71.38 | 72.24 | 72.97 | 71.82 | 76.18 | 72.92 | 73.87 | 146.43 | 74.19 | 73.45 | 75.56 | 74.46 | 78.10 | 75.42 | 74.54 | |
| Ct thorax w/dye | 71260 | 26 | 1.07% | 1.71% | 84.03 | 60.15 | 60.88 | 61.50 | 60.52 | 64.24 | 61.47 | 62.30 | 123.00 | 62.36 | 61.74 | 63.53 | 62.59 | 65.67 | 63.39 | 62.64 | |
| Ct abdomen w/o dye | 74150 | 26 | 1.40% | 1.70% | 80.37 | 57.49 | 58.16 | 58.76 | 57.84 | 61.39 | 58.76 | 59.58 | 118.01 | 59.82 | 59.21 | 60.93 | 60.04 | 63.00 | 60.82 | 60.12 | |
| Chest x-ray | 71020 | 26 | 8.15% | 1.67% | 14.77 | 10.55 | 10.69 | 10.79 | 10.62 | 11.25 | 10.77 | 10.89 | 21.87 | 11.09 | 10.97 | 11.30 | 11.13 | 11.69 | 11.28 | 11.16 | |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.91% | 1.65% | 77.01 | 55.08 | 55.81 | 56.34 | 55.44 | 58.75 | 56.20 | 56.83 | 112.69 | 57.08 | 56.55 | 58.16 | 57.31 | 60.07 | 58.00 | 57.27 | |
| Ct pelvis w/o dye | 72192 | 26 | 1.37% | 1.59% | 73.35 | 52.42 | 53.09 | 53.60 | 52.76 | 55.90 | 53.49 | 54.11 | 108.25 | 54.89 | 54.37 | 55.94 | 55.11 | 57.80 | 55.79 | 55.09 | |
| Us exam, pelvic, complete | 76856 | 26 | 1.76% | 1.51% | 46.59 | 33.32 | 33.76 | 34.08 | 33.53 | 35.53 | 33.99 | 34.37 | 68.17 | 34.53 | 34.23 | 35.20 | 34.68 | 36.32 | 35.06 | 34.59 | |
| Us exam, abdom, complete | 76700 | 26 | 1.51% | 1.48% | 54.41 | 38.87 | 39.35 | 39.73 | 39.11 | 41.45 | 39.68 | 40.16 | 80.05 | 40.55 | 40.16 | 41.31 | 40.70 | 42.67 | 41.20 | 40.70 | |
| Mri lumbar spine w/o & w/dye | 72158 | 26 | 0.23% | 1.37% | 159.79 | 114.37 | 115.60 | 116.86 | 115.03 | 122.24 | 117.03 | 118.86 | 234.01 | 118.61 | 117.29 | 120.72 | 118.97 | 124.97 | 120.69 | 119.48 | |
| Us exam, breast(s) | 76645 | 26 | 2.02% | 1.33% | 36.56 | 26.17 | 26.44 | 26.73 | 26.32 | 27.99 | 26.80 | 27.25 | 53.49 | 27.11 | 26.80 | 27.58 | 27.18 | 28.57 | 27.60 | 27.34 | |
| Transvaginal us, non-ob | 76830 | 26 | 1.51% | 1.28% | 46.59 | 33.32 | 33.76 | 34.08 | 33.53 | 35.53 | 33.99 | 34.37 | 67.61 | 34.18 | 33.89 | 34.82 | 34.32 | 35.92 | 34.70 | 34.25 | |
| Mammogram, both breasts | 77056 | 26 | 1.22% | 1.04% | 58.80 | 42.07 | 42.56 | 43.00 | 42.32 | 44.91 | 42.99 | 43.58 | 86.13 | 43.65 | 43.18 | 44.44 | 43.79 | 45.97 | 44.39 | 43.91 | |
| Mammogram, one breast | 77055 | 26 | 1.03% | 0.67% | 47.32 | 33.85 | 34.25 | 34.60 | 34.06 | 36.14 | 34.59 | 35.07 | 69.29 | 35.10 | 34.74 | 35.75 | 35.22 | 36.96 | 35.69 | 35.29 | |
| Chest x-ray | 71010 | 26 | 4.61% | 0.58% | 11.99 | 8.55 | 8.65 | 8.73 | 8.60 | 9.12 | 8.73 | 8.85 | 17.65 | 8.92 | 8.82 | 9.07 | 8.95 | 9.39 | 9.08 | 9.00 | |
| Comp screen mammogram add-on | 77052 | 26 | 4.46% | 0.47% | 4.02 | 2.87 | 2.87 | 2.92 | 2.88 | 3.09 | 2.97 | 3.08 | 6.10 | 3.11 | 3.04 | 3.14 | 3.10 | 3.31 | 3.20 | 3.22 | |
| X-ray exam of foot | 73630 | | 1.40% | 0.27% | 36.93 | 30.19 | 31.57 | 32.05 | 30.81 | 34.40 | 31.55 | 31.97 | 49.84 | 28.90 | 28.31 | 30.58 | 29.36 | 32.48 | 30.09 | 28.65 | |
| Computer dx mammogram add-on | 77051 | 26 | 2.21% | 0.24% | 4.02 | 2.87 | 2.87 | 2.92 | 2.88 | 3.09 | 2.97 | 3.08 | 6.10 | 3.11 | 3.04 | 3.14 | 3.10 | 3.31 | 3.20 | 3.22 | |
| X-ray exam of ankle | 73610 | 26 | 1.22% | 0.22% | 11.48 | 8.21 | 8.31 | 8.39 | 8.26 | 8.77 | 8.39 | 8.51 | 16.87 | 8.55 | 8.45 | 8.70 | 8.58 | 9.02 | 8.71 | 8.63 | |
| X-ray exam of abdomen | 74000 | 26 | 1.28% | 0.20% | 11.99 | 8.55 | 8.65 | 8.73 | 8.60 | 9.12 | 8.73 | 8.85 | 17.65 | 8.92 | 8.82 | 9.07 | 8.95 | 9.39 | 9.08 | 9.00 | |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-19
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Radiology

| Description | HCPCS | Modifier | VA ⁽³⁾ | | | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|------------------------------|-------|----------|-------------------|------------|----------|----------|----------|----------|----------|----------|----------|-------------------------|----------|---------|---------|------|----------|--------------------------------------|----------|----------|-------------|-----|--|
| | | | % of | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Mri brain w/o & w/dye | 70553 | 26 | 1.22% | 6.64% | \$394.10 | \$113.98 | \$115.30 | \$116.49 | \$121.71 | \$118.15 | \$207.98 | \$100.14 | \$160.89 | \$91.81 | \$72.47 | N/A | \$826.63 | \$294.28 | \$214.93 | \$219.48 | \$192.03 | N/A | |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 1.27% | 5.24% | 314.48 | 65.75 | 66.43 | 67.18 | 70.34 | 68.47 | 119.04 | 66.40 | 93.02 | 52.86 | 41.79 | N/A | 425.65 | 169.76 | 124.50 | 127.40 | 111.23 | N/A | |
| Mammogram, screening | 77057 | 26 | 6.70% | 4.55% | 83.03 | 33.85 | 34.25 | 34.60 | 36.14 | 35.07 | 61.59 | 31.92 | 47.93 | 27.26 | 21.56 | N/A | N/A | 87.40 | 63.80 | 64.96 | 57.00 | N/A | |
| Mri lumbar spine w/o dye | 72148 | 26 | 1.14% | 4.48% | 320.70 | 71.77 | 72.55 | 73.33 | 76.71 | 74.58 | 130.49 | 72.79 | 101.56 | 57.87 | 45.79 | N/A | 569.15 | 185.30 | 135.65 | 138.12 | 121.19 | N/A | |
| Ct pelvis w/dye | 72193 | 26 | 2.23% | 3.10% | 253.32 | 56.15 | 56.80 | 57.39 | 59.97 | 58.22 | 102.36 | 57.11 | 79.26 | 45.35 | 35.79 | N/A | 309.54 | 144.97 | 105.92 | 107.85 | 94.63 | N/A | |
| Ct abdomen w/dye | 74160 | 26 | 2.11% | 3.10% | 255.73 | 61.49 | 62.23 | 62.86 | 65.65 | 63.66 | 111.94 | 65.33 | 86.85 | 49.52 | 39.12 | N/A | 342.38 | 158.76 | 115.83 | 117.94 | 103.49 | N/A | |
| Mri neck spine w/o dye | 72141 | 26 | 0.71% | 2.69% | 336.56 | 77.45 | 78.33 | 79.15 | 82.74 | 80.36 | 141.05 | 78.48 | 109.63 | 62.32 | 49.13 | N/A | 549.18 | 199.96 | 146.18 | 148.85 | 130.60 | N/A | |
| Screeningmammographydigital | G0202 | 26 | 2.43% | 2.58% | 95.87 | 33.85 | 34.25 | 34.60 | 36.14 | 35.07 | N/A | 32.84 | N/A | 26.99 | 21.34 | N/A | N/A | 68.25 | 63.80 | N/A | 57.00 | N/A | |
| Mri joint upr extrem w/o dye | 73221 | 26 | 0.57% | 2.34% | 176.77 | 66.07 | 66.77 | 67.52 | 70.72 | 68.81 | 119.04 | 66.40 | 93.50 | 52.86 | 41.79 | N/A | 404.37 | 170.59 | 125.12 | 127.40 | 111.79 | N/A | |
| Ct abdomen w/o & w/dye | 74170 | 26 | 0.81% | 2.10% | 185.60 | 67.70 | 68.50 | 69.20 | 72.29 | 70.13 | 123.68 | 71.82 | 95.87 | 54.81 | 43.35 | N/A | 410.46 | 174.80 | 127.60 | 129.92 | 114.00 | N/A | |
| Ct head/brain w/o dye | 70450 | 26 | 2.23% | 1.81% | 112.92 | 40.87 | 41.39 | 41.79 | 43.58 | 42.20 | 75.22 | 41.79 | 57.90 | 33.11 | 26.23 | N/A | 276.04 | 105.52 | 76.81 | 78.21 | 68.62 | N/A | |
| Mri brain w/o dye | 70551 | 26 | 0.52% | 1.77% | 340.22 | 71.38 | 72.24 | 72.97 | 76.18 | 73.87 | 130.19 | 72.59 | 101.09 | 57.59 | 45.57 | N/A | 598.79 | 184.30 | 134.41 | 136.86 | 120.09 | N/A | |
| Ct thorax w/o dye | 71260 | 26 | 1.07% | 1.71% | 163.53 | 60.15 | 60.88 | 61.50 | 64.24 | 62.30 | 109.37 | 61.02 | 84.95 | 48.41 | 38.24 | N/A | 328.40 | 155.30 | 113.35 | 115.42 | 101.27 | N/A | |
| Ct abdomen w/o dye | 74150 | 26 | 1.40% | 1.70% | 156.83 | 57.49 | 58.16 | 58.76 | 61.39 | 59.58 | 104.93 | 50.53 | 81.16 | 46.46 | 36.68 | N/A | 297.44 | 148.43 | 108.40 | 110.37 | 96.85 | N/A | |
| Chest x-ray | 71020 | 26 | 8.15% | 1.67% | 31.08 | 10.55 | 10.69 | 10.79 | 11.25 | 10.89 | 19.45 | 10.85 | 14.71 | 8.62 | 6.89 | 7.88 | 71.76 | 27.24 | 19.82 | 20.18 | 17.71 | N/A | |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.91% | 1.65% | 151.16 | 55.08 | 55.81 | 56.34 | 58.75 | 56.83 | 100.19 | 58.94 | 77.83 | 44.23 | 35.12 | N/A | 292.10 | 142.21 | 103.44 | 105.33 | 92.42 | N/A | |
| Ct pelvis w/o dye | 72192 | 26 | 1.37% | 1.59% | 144.47 | 52.42 | 53.09 | 53.60 | 55.90 | 54.11 | 96.54 | 53.71 | 74.04 | 42.56 | 33.79 | N/A | 268.93 | 135.35 | 98.48 | 100.91 | 87.99 | N/A | |
| Us exam, pelvic, complete | 76856 | 26 | 1.76% | 1.51% | 91.87 | 33.32 | 33.76 | 34.08 | 35.53 | 34.37 | 60.90 | 41.59 | 46.99 | 26.71 | 21.12 | N/A | 225.59 | 86.02 | 62.56 | 63.70 | 55.89 | N/A | |
| Us exam, abdom, complete | 76700 | 26 | 1.51% | 1.48% | 108.18 | 38.87 | 39.35 | 39.73 | 41.45 | 40.16 | 71.17 | 44.71 | 55.05 | 31.44 | 24.90 | N/A | 224.47 | 100.36 | 73.09 | 74.42 | 65.30 | N/A | |
| Mri lumbar spine w/o & w/dye | 72158 | 26 | 0.23% | 1.37% | 313.90 | 114.37 | 115.60 | 116.86 | 122.24 | 118.86 | 208.07 | 116.06 | 161.36 | 92.36 | 72.91 | N/A | 785.49 | 295.28 | 216.17 | 220.11 | 192.58 | N/A | |
| Us exam, breast(s) | 76645 | 26 | 2.02% | 1.33% | 71.79 | 26.17 | 26.44 | 26.73 | 27.99 | 27.25 | 47.57 | 33.23 | 37.02 | 21.14 | 16.67 | N/A | 149.39 | 67.57 | 49.55 | 50.46 | 44.27 | N/A | |
| Transvaginal us, non-ob | 76830 | 26 | 1.51% | 1.28% | 91.87 | 33.32 | 33.76 | 34.08 | 35.53 | 34.37 | 60.11 | 41.46 | 46.99 | 26.43 | 20.90 | N/A | 257.81 | 86.02 | 62.56 | 63.70 | 55.89 | N/A | |
| Mammogram, both breasts | 77056 | 26 | 1.22% | 1.04% | 102.81 | 42.07 | 42.56 | 43.00 | 44.91 | 43.58 | 76.60 | 41.13 | 59.33 | 33.94 | 26.90 | N/A | N/A | 108.60 | 79.28 | 80.73 | 70.84 | N/A | |
| Mammogram, one breast | 77055 | 26 | 1.03% | 0.67% | 83.03 | 33.85 | 34.25 | 34.60 | 36.14 | 35.07 | 61.59 | 33.32 | 47.93 | 27.26 | 21.56 | N/A | N/A | 87.40 | 63.80 | 64.96 | 57.00 | N/A | |
| Chest x-ray | 71010 | 26 | 4.61% | 0.58% | 23.93 | 8.55 | 8.65 | 8.73 | 9.12 | 8.85 | 15.69 | 8.73 | 11.87 | 6.96 | 5.56 | N/A | 61.88 | 22.08 | 16.10 | 16.40 | 14.39 | N/A | |
| Comp screen mammogram add-on | 77052 | 26 | 4.46% | 0.47% | 7.55 | 2.87 | 2.87 | 2.92 | 3.09 | 3.08 | 5.43 | 3.04 | 3.80 | 2.50 | 2.00 | N/A | N/A | 7.42 | 5.57 | 5.68 | Not Covered | N/A | |
| X-ray exam of foot | 73630 | | 1.40% | 0.27% | 103.98 | 30.19 | 31.57 | 32.05 | 34.40 | 31.97 | 44.32 | 27.30 | 41.08 | 23.09 | 18.45 | N/A | 181.81 | 77.96 | 15.49 | 59.29 | 52.57 | N/A | |
| Computer dx mammogram add-on | 77051 | 26 | 2.21% | 0.24% | 7.55 | 2.87 | 2.87 | 2.92 | 3.09 | 3.08 | 5.43 | 3.04 | 3.80 | 2.50 | 2.00 | N/A | N/A | 7.42 | 5.57 | 5.68 | Not Covered | N/A | |
| X-ray exam of ankle | 73610 | 26 | 1.22% | 0.22% | 28.62 | 8.21 | 8.31 | 8.39 | 8.77 | 8.51 | 15.00 | 8.74 | 11.39 | 6.68 | 5.34 | N/A | 72.72 | 21.20 | 15.49 | 15.77 | 13.84 | N/A | |
| X-ray exam of abdomen | 74000 | 26 | 1.28% | 0.20% | 23.93 | 8.55 | 8.65 | 8.73 | 9.12 | 8.85 | 15.69 | 8.73 | 11.87 | 6.96 | 5.56 | N/A | 60.80 | 22.08 | 16.10 | 16.40 | 14.39 | N/A | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-19
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Radiology

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------|-----------------|-----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|
| | | | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | |
| | | | | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Mri brain w/o & w/dye | 70553 | 26 | 1.22% | 6.64% | \$407.64 | \$285.48 | \$226.64 | \$223.92 | \$204.41 | \$360.82 | \$441.00 | \$244.51 | \$188.51 | \$213.53 | \$203.31 | \$379.76 | \$461.00 | \$404.58 | \$204.98 | \$229.43 | \$214.00 | \$495.90 |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 1.27% | 5.24% | 283.63 | 155.22 | 119.56 | 126.44 | 116.51 | 252.78 | 298.00 | 139.45 | 107.56 | 122.30 | 113.05 | 279.00 | 298.00 | 192.00 | 113.17 | 133.21 | 123.42 | 300.00 |
| Mammogram, screening | 77057 | 26 | 6.70% | 4.55% | 82.01 | 62.98 | 56.62 | 64.68 | 56.91 | 66.07 | 91.00 | 70.92 | 56.04 | 64.99 | 56.69 | 52.00 | 96.00 | 74.35 | 57.16 | 67.42 | 63.75 | 83.00 |
| Mri lumbar spine w/o dye | 72148 | 26 | 1.14% | 4.48% | 315.31 | 174.76 | 133.52 | 140.13 | 129.81 | 264.60 | 298.00 | 153.51 | 118.31 | 134.79 | 128.01 | 276.16 | 365.00 | 200.00 | 130.57 | 146.88 | 135.13 | 333.00 |
| Ct pelvis w/dye | 72193 | 26 | 2.23% | 3.10% | 223.47 | 141.94 | 106.49 | 111.53 | 102.01 | 179.32 | 226.00 | 123.17 | 92.84 | 105.46 | 99.82 | 204.09 | 246.80 | 173.05 | 101.30 | 115.02 | 105.66 | 225.00 |
| Ct abdomen w/dye | 74160 | 26 | 2.11% | 3.10% | 246.69 | 158.75 | 118.15 | 122.26 | 112.66 | 205.24 | 250.00 | 135.71 | 102.46 | 115.94 | 111.01 | 223.84 | 288.00 | 206.64 | 110.69 | 123.90 | 116.74 | 257.00 |
| Mri neck spine w/o dye | 72141 | 26 | 0.71% | 2.69% | 324.62 | 188.63 | 145.29 | 153.57 | 138.63 | 262.31 | 312.00 | 165.69 | 127.37 | 144.76 | 137.50 | 276.16 | 389.00 | 232.50 | 134.48 | 156.63 | 145.31 | 333.00 |
| Screeningmammographydigital | G0202 | 26 | 2.43% | 2.58% | 115.21 | 68.16 | 57.41 | 64.10 | 59.58 | 54.36 | 129.00 | 63.00 | 54.91 | 64.00 | 60.24 | 48.72 | 129.00 | 74.35 | 56.70 | 69.60 | 63.83 | 70.00 |
| Mri joint upr extrem w/o dye | 73221 | 26 | 0.57% | 2.34% | 312.73 | 161.71 | 125.83 | 126.44 | 117.94 | 244.33 | 323.00 | 139.45 | 107.56 | 124.18 | 113.18 | 279.00 | 388.29 | 217.86 | 125.51 | 133.21 | 124.50 | 296.00 |
| Ct abdomen w/o & w/dye | 74170 | 26 | 0.81% | 2.10% | 253.03 | 160.79 | 130.11 | 145.34 | 123.76 | 250.28 | 273.00 | 145.45 | 112.09 | 130.07 | 123.90 | 271.63 | 289.00 | 178.20 | 121.08 | 140.65 | 129.33 | 281.20 |
| Ct head/brain w/o dye | 70450 | 26 | 2.23% | 1.81% | 174.25 | 103.71 | 77.37 | 83.73 | 74.72 | 147.53 | 183.00 | 88.35 | 68.50 | 77.59 | 73.13 | 160.00 | 199.00 | 131.00 | 74.28 | 84.49 | 77.34 | 187.00 |
| Mri brain w/o dye | 70551 | 26 | 0.52% | 1.77% | 295.17 | 178.21 | 150.27 | 137.97 | 127.38 | 244.34 | 298.00 | 153.51 | 118.32 | 134.28 | 127.50 | 240.63 | 322.00 | 244.50 | 130.93 | 142.43 | 135.56 | 333.00 |
| Ct thorax w/o dye | 71260 | 26 | 1.07% | 1.71% | 257.23 | 149.90 | 120.14 | 119.54 | 108.96 | 215.55 | 263.00 | 128.35 | 99.07 | 112.20 | 108.65 | 225.95 | 263.00 | 189.27 | 117.52 | 122.41 | 113.52 | 267.00 |
| Ct abdomen w/o dye | 74150 | 26 | 1.40% | 1.70% | 220.78 | 144.27 | 112.66 | 111.42 | 103.96 | 204.89 | 231.00 | 123.73 | 95.10 | 108.08 | 101.17 | 215.00 | 248.00 | 192.00 | 110.98 | 117.86 | 108.08 | 243.00 |
| Chest x-ray | 71020 | 26 | 8.15% | 1.67% | 43.55 | 26.15 | 19.52 | 21.06 | 19.22 | 38.25 | 43.00 | 22.50 | 17.55 | 19.65 | 18.83 | 42.00 | 54.00 | 32.00 | 17.90 | 21.30 | 19.94 | 45.60 |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.91% | 1.65% | 203.07 | 130.98 | 103.45 | 104.92 | 96.85 | 179.15 | 221.00 | 117.73 | 91.14 | 102.84 | 97.50 | 199.70 | 221.00 | 145.37 | 106.34 | 109.35 | 103.12 | 225.00 |
| Ct pelvis w/o dye | 72192 | 26 | 1.37% | 1.59% | 204.82 | 131.62 | 98.07 | 104.32 | 94.52 | 181.83 | 213.00 | 113.11 | 87.75 | 99.28 | 92.22 | 206.00 | 233.00 | 162.00 | 95.05 | 108.63 | 99.15 | 208.00 |
| Us exam, pelvic, complete | 76856 | 26 | 1.76% | 1.51% | 143.64 | 85.39 | 59.31 | 61.91 | 60.96 | 117.88 | 135.00 | 71.25 | 54.91 | 62.23 | 59.61 | 131.40 | 167.00 | 121.50 | 56.74 | 68.42 | 64.99 | 139.00 |
| Us exam, abdom, complete | 76700 | 26 | 1.51% | 1.48% | 154.66 | 101.34 | 68.65 | 76.33 | 72.26 | 132.42 | 158.00 | 83.83 | 64.54 | 73.36 | 70.28 | 166.00 | 160.00 | 152.80 | 64.54 | 80.50 | 74.45 | 169.10 |
| Mri lumbar spine w/o & w/dye | 72158 | 26 | 0.23% | 1.37% | 473.30 | 279.86 | 209.75 | 227.55 | 199.89 | 435.40 | 447.00 | 244.51 | 187.95 | 213.53 | 203.31 | 414.00 | 461.00 | 442.40 | 198.38 | 236.16 | 214.00 | 520.00 |
| Us exam, breast(s) | 76645 | 26 | 2.02% | 1.33% | 106.87 | 71.64 | 49.02 | 50.71 | 47.29 | 97.38 | 107.00 | 57.18 | 43.02 | 48.47 | 46.44 | 117.00 | 107.00 | 102.40 | 43.88 | 51.83 | 48.88 | 121.00 |
| Transvaginal us, non-ob | 76830 | 26 | 1.51% | 1.28% | 154.38 | 84.86 | 58.77 | 64.84 | 61.90 | 119.04 | 135.00 | 72.18 | 54.35 | 62.23 | 59.61 | 134.62 | 225.00 | 129.60 | 55.44 | 67.68 | 66.00 | 149.00 |
| Mammogram, both breasts | 77056 | 26 | 1.22% | 1.04% | 107.53 | 80.62 | 72.62 | 75.60 | 61.85 | 89.89 | 121.00 | 85.77 | 69.63 | 76.56 | 64.31 | 83.00 | 129.79 | 92.04 | 73.19 | 83.08 | 74.40 | 89.00 |
| Mammogram, one breast | 77055 | 26 | 1.03% | 0.67% | 83.93 | 66.80 | 58.22 | 65.87 | 55.77 | 67.50 | 92.00 | 70.92 | 56.04 | 64.99 | 57.76 | 49.00 | 102.51 | 74.35 | 57.16 | 67.50 | 63.05 | 122.40 |
| Chest x-ray | 71010 | 26 | 4.61% | 0.58% | 36.84 | 21.70 | 16.94 | 17.94 | 16.01 | 25.00 | 37.00 | 18.67 | 14.15 | 16.45 | 15.69 | 27.09 | 44.00 | 27.00 | 15.30 | 17.99 | 16.56 | 35.00 |
| Comp screen mammogram add-on | 77052 | 26 | 4.46% | 0.47% | 11.77 | 6.65 | 5.36 | 6.97 | 6.13 | 9.30 | 12.00 | 4.00 | 5.10 | 6.08 | 5.40 | 7.00 | 12.00 | 7.18 | 5.33 | 6.66 | 6.03 | 10.78 |
| X-ray exam of foot | 73630 | | 1.40% | 0.27% | 113.88 | 53.11 | 36.28 | 49.93 | 44.52 | 73.15 | 105.00 | 56.48 | 33.40 | 54.37 | 45.34 | 75.00 | 154.86 | 58.37 | 46.99 | 59.33 | 54.60 | 94.00 |
| Computer dx mammogram add-on | 77051 | 26 | 2.21% | 0.24% | 13.15 | 12.03 | 5.35 | 7.46 | 7.28 | 8.83 | 12.00 | 9.21 | 5.10 | 6.03 | 5.25 | 7.00 | 12.00 | 12.00 | 5.20 | 6.57 | 6.48 | 10.44 |
| X-ray exam of ankle | 73610 | 26 | 1.22% | 0.22% | 45.98 | 21.95 | 15.72 | 17.10 | 15.19 | 30.45 | 45.00 | 17.96 | 13.59 | 16.01 | 14.60 | 34.00 | 61.00 | 30.50 | 14.38 | 17.28 | 15.86 | 35.00 |
| X-ray exam of abdomen | 74000 | 26 | 1.28% | 0.20% | 38.50 | 21.37 | 17.77 | 17.25 | 16.09 | 25.81 | 39.00 | 18.67 | 14.15 | 16.44 | 15.63 | 27.09 | 39.00 | 23.50 | 15.30 | 17.75 | 16.51 | 35.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-19
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Radiology

| | | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|-------------------------------|-----------------|-----------------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| | | Mean | | | | | Median | | | | | 80th Percentile | | | | | | | | | | | |
| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| Mri brain w/o & w/dye | 70553 | 26 | 1.22% | 6.64% | \$529.07 | \$384.67 | \$325.34 | \$334.06 | \$379.68 | \$298.17 | \$461.00 | \$359.00 | \$342.00 | \$362.00 | \$384.00 | \$334.50 | \$632.00 | \$553.00 | \$342.00 | \$400.00 | \$423.00 | \$442.00 | \$442.00 |
| Mri jnt of lwr extre w/o dye | 73721 | 26 | 1.27% | 5.24% | 295.90 | 199.14 | 184.96 | 194.45 | 206.14 | 209.08 | 298.00 | 189.20 | 172.00 | 215.00 | 201.40 | 250.00 | 345.00 | 240.00 | 205.00 | 231.00 | 241.00 | 241.00 | 279.00 |
| Mammogram, screening | 77057 | 26 | 6.70% | 4.55% | 97.07 | 73.76 | 66.85 | 80.39 | 79.68 | 52.08 | 96.00 | 80.00 | 66.00 | 75.00 | 77.00 | 37.00 | 107.36 | 90.00 | 74.00 | 97.00 | 93.00 | 93.00 | 56.00 |
| Mri lumbar spine w/o dye | 72148 | 26 | 1.14% | 4.48% | 327.69 | 230.46 | 207.25 | 228.17 | 232.23 | 217.83 | 298.00 | 215.00 | 215.00 | 246.03 | 226.00 | 242.00 | 374.00 | 257.00 | 224.00 | 281.00 | 265.00 | 265.00 | 303.00 |
| Ct pelvis w/dye | 72193 | 26 | 2.23% | 3.10% | 250.61 | 194.59 | 157.20 | 167.94 | 184.60 | 141.54 | 226.00 | 169.00 | 164.00 | 175.00 | 180.00 | 167.80 | 307.00 | 272.00 | 166.00 | 197.50 | 207.00 | 207.00 | 208.00 |
| Ct abdomen w/dye | 74160 | 26 | 2.11% | 3.10% | 273.97 | 215.80 | 180.32 | 191.74 | 201.83 | 162.10 | 250.00 | 188.60 | 180.00 | 203.21 | 199.50 | 183.50 | 327.00 | 299.00 | 191.00 | 217.00 | 218.40 | 218.40 | 252.00 |
| Mri neck spine w/o dye | 72141 | 26 | 0.71% | 2.69% | 370.34 | 263.70 | 211.59 | 232.67 | 257.72 | 213.12 | 362.50 | 251.00 | 219.00 | 246.00 | 259.50 | 238.00 | 458.27 | 313.00 | 233.20 | 284.00 | 281.00 | 281.00 | 296.00 |
| Screeningmammographydigital | G0202 | 26 | 2.43% | 2.58% | 109.61 | 82.22 | 79.11 | 86.33 | 97.25 | 67.84 | 124.00 | 79.00 | 82.45 | 91.00 | 98.00 | 74.00 | 129.00 | 88.00 | 94.00 | 111.00 | 111.00 | 111.00 | 82.45 |
| Mri joint upr extrem w/o dye | 73221 | 26 | 0.57% | 2.34% | 314.37 | 201.55 | 181.36 | 200.45 | 192.07 | 184.26 | 323.00 | 200.00 | 173.00 | 219.00 | 188.00 | 232.50 | 398.00 | 253.00 | 187.00 | 225.00 | 227.00 | 227.00 | 279.00 |
| Ct abdomen w/o & w/dye | 74170 | 26 | 0.81% | 2.10% | 299.24 | 250.87 | 183.41 | 196.75 | 210.04 | 168.21 | 289.00 | 220.19 | 180.00 | 194.00 | 202.30 | 165.00 | 360.00 | 271.00 | 210.00 | 238.56 | 240.00 | 244.50 | 244.50 |
| Ct head/brain w/o dye | 70450 | 26 | 2.23% | 1.81% | 212.20 | 146.34 | 126.55 | 131.91 | 137.17 | 121.69 | 183.00 | 133.00 | 119.00 | 139.00 | 137.02 | 136.30 | 273.00 | 200.00 | 154.00 | 150.00 | 150.00 | 150.00 | 175.50 |
| Mri brain w/o dye | 70551 | 26 | 0.52% | 1.77% | 341.13 | 244.48 | 211.60 | 234.65 | 229.40 | 165.57 | 298.00 | 232.00 | 205.00 | 244.00 | 236.00 | 75.96 | 374.00 | 324.00 | 230.00 | 281.00 | 255.00 | 255.00 | 260.00 |
| Ct thorax w/dye | 71260 | 26 | 1.07% | 1.71% | 282.00 | 214.71 | 177.77 | 182.41 | 200.05 | 152.05 | 263.00 | 194.00 | 166.00 | 193.00 | 202.00 | 133.00 | 325.00 | 291.00 | 216.00 | 220.00 | 227.00 | 227.00 | 231.00 |
| Ct abdomen w/o dye | 74150 | 26 | 1.40% | 1.70% | 259.14 | 193.99 | 164.43 | 173.24 | 184.16 | 146.72 | 248.00 | 174.00 | 164.00 | 184.00 | 181.00 | 155.19 | 297.00 | 234.00 | 178.50 | 203.00 | 204.00 | 204.00 | 215.00 |
| Chest x-ray | 71020 | 26 | 8.15% | 1.67% | 49.09 | 37.03 | 30.04 | 32.45 | 33.55 | 28.99 | 43.00 | 32.50 | 26.00 | 34.00 | 33.00 | 32.00 | 56.00 | 49.28 | 36.00 | 38.00 | 37.20 | 37.20 | 43.00 |
| Ct maxillofacial w/o dye | 70486 | 26 | 0.91% | 1.65% | 198.44 | 183.31 | 143.45 | 149.90 | 174.32 | 157.76 | 221.00 | 165.00 | 159.00 | 148.00 | 175.00 | 192.00 | 221.00 | 250.00 | 163.00 | 185.00 | 194.40 | 194.40 | 219.53 |
| Ct pelvis w/o dye | 72192 | 26 | 1.37% | 1.59% | 239.65 | 177.29 | 145.22 | 158.27 | 166.77 | 132.19 | 233.00 | 159.00 | 151.00 | 164.00 | 167.00 | 153.50 | 281.00 | 216.00 | 156.00 | 186.00 | 187.20 | 187.20 | 191.00 |
| Us exam, pelvic, complete | 76856 | 26 | 1.76% | 1.51% | 140.50 | 113.11 | 99.28 | 106.85 | 105.78 | 106.14 | 135.00 | 100.73 | 99.00 | 112.00 | 106.00 | 120.00 | 197.00 | 124.00 | 117.00 | 128.00 | 117.60 | 117.60 | 166.00 |
| Us exam, abdom, complete | 76700 | 26 | 1.51% | 1.48% | 174.73 | 134.39 | 94.88 | 116.87 | 124.91 | 101.58 | 160.00 | 121.00 | 88.00 | 119.75 | 125.00 | 100.00 | 160.00 | 191.00 | 112.00 | 140.00 | 138.00 | 138.00 | 177.69 |
| Mri lumbar spine w/o & w/dye | 72158 | 26 | 0.23% | 1.37% | 534.09 | 373.31 | 310.19 | 348.06 | 366.11 | 293.30 | 461.00 | 333.30 | 292.67 | 387.00 | 361.00 | 328.00 | 461.00 | 438.00 | 400.00 | 406.00 | 402.00 | 402.00 | 414.00 |
| Us exam, breast(s) | 76645 | 26 | 2.02% | 1.33% | 122.33 | 94.22 | 73.89 | 78.90 | 89.07 | 74.68 | 112.00 | 92.00 | 68.00 | 83.00 | 91.20 | 83.00 | 121.00 | 128.00 | 98.00 | 98.00 | 98.00 | 98.00 | 117.00 |
| Transvaginal us, non-ob | 76830 | 26 | 1.51% | 1.28% | Not Cred | 108.74 | 94.48 | 108.97 | 108.04 | 100.11 | Not Cred | 100.00 | 77.00 | 114.00 | 98.00 | 92.00 | Not Cred | 137.00 | 140.00 | 142.00 | 121.00 | 121.00 | 166.00 |
| Mammogram, both breasts | 77056 | 26 | 1.22% | 1.04% | Not Cred | 112.00 | 87.07 | 97.74 | 89.07 | 67.58 | Not Cred | 107.50 | 87.00 | 100.66 | 88.00 | 50.69 | Not Cred | 147.00 | 94.00 | 119.00 | 99.00 | 99.00 | 85.00 |
| Mammogram, one breast | 77055 | 26 | 1.03% | 0.67% | Not Cred | 78.84 | 69.41 | 76.35 | 77.01 | 49.63 | Not Cred | 75.00 | 68.00 | 75.00 | 75.00 | 48.76 | Not Cred | 90.00 | 74.00 | 88.00 | 93.00 | 93.00 | 65.00 |
| Chest x-ray | 71010 | 26 | 4.61% | 0.58% | 44.30 | 30.08 | 26.18 | 27.43 | 28.29 | 22.60 | 37.00 | 27.00 | 23.00 | 30.00 | 28.25 | 25.00 | Not Cred | 52.00 | 40.00 | 31.00 | 32.00 | 31.20 | 35.00 |
| Comp screen mammogram add-on | 77052 | 26 | 4.46% | 0.47% | 14.04 | 10.51 | 7.90 | 10.09 | 12.64 | 8.48 | 12.00 | 9.50 | 7.00 | 9.50 | 10.00 | 9.00 | 12.00 | 16.00 | 9.00 | 11.25 | 15.50 | 15.50 | 12.00 |
| X-ray exam of foot | 73630 | | 1.40% | 0.27% | 101.43 | 67.56 | 59.72 | 66.60 | 69.23 | 70.46 | 115.00 | 70.35 | 64.78 | 65.80 | 65.00 | 65.00 | 159.00 | 90.58 | 66.00 | 90.00 | 80.00 | 80.00 | 107.90 |
| Computer dx mammogram add-on | 77051 | 26 | 2.21% | 0.24% | 14.88 | 17.18 | 8.65 | 10.98 | 12.97 | 8.61 | 12.00 | 15.00 | 7.00 | 10.00 | 10.80 | 10.90 | 24.00 | 16.00 | 10.00 | 13.00 | 15.00 | 15.00 | 11.00 |
| X-ray exam of ankle | 73610 | 26 | 1.22% | 0.22% | 47.75 | 28.79 | 27.66 | 27.10 | 27.53 | 25.41 | 45.00 | 26.00 | 28.00 | 28.25 | 26.00 | 32.00 | 63.00 | 39.00 | 34.00 | 31.00 | 32.00 | 32.00 | 38.00 |
| X-ray exam of abdomen | 74000 | 26 | 1.28% | 0.20% | 49.00 | 31.04 | 26.27 | 27.66 | 29.08 | 21.65 | 39.00 | 27.00 | 25.00 | 29.03 | 28.25 | 24.25 | 63.00 | 40.00 | 32.00 | 32.00 | 36.00 | 33.00 | 33.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-20
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Urology

| Description | HCPCS | Modifier | Medicare ⁽¹⁾ | | | | | | | | | | TRICARE ⁽²⁾ | | | | | | | | | | |
|-------------------------------|-------|----------|-------------------------|------------|----------|----------|----------|----------|----------|----------|----------|----------|------------------------|----------|----------|----------|----------|----------|----------|----------|---------|----|----|
| | | | % of | | AK | ID | ND | OR | Rest Of | Seattle | WA | Rest Of | WA | WY | AK | ID | ND | Portland | Rest of | Seattle | Rest of | WA | WY |
| | | | Total Util | Total RVUs | | | | | | | | | | | | | | | | | | | |
| Office/outpatient visit, est | 99213 | | 13.79% | 7.96% | \$87.71 | \$66.04 | \$67.67 | \$68.52 | \$66.81 | \$72.42 | \$68.12 | \$69.10 | \$121.23 | \$64.21 | \$63.34 | \$66.28 | \$64.72 | \$69.17 | \$65.82 | \$64.23 | | | |
| Removal of sperm duct(s) | 55250 | | 1.54% | 6.77% | 510.71 | 407.35 | 423.33 | 429.53 | 414.61 | 459.11 | 424.15 | 430.04 | 727.55 | 412.18 | 404.76 | 433.71 | 418.14 | 458.31 | 427.31 | 408.91 | | | |
| Office consultation | 99244 | | 3.29% | 5.66% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 349.48 | 182.66 | 180.28 | 187.72 | 183.81 | 195.50 | 186.85 | 183.17 | | | |
| Office/outpatient visit, est | 99214 | | 6.06% | 5.26% | 130.96 | 98.08 | 100.41 | 101.63 | 99.18 | 107.25 | 101.06 | 102.45 | 182.64 | 96.32 | 95.07 | 99.31 | 97.05 | 103.52 | 98.63 | 96.32 | | | |
| Cystoscopy | 52000 | | 2.62% | 4.97% | 260.82 | 202.95 | 209.44 | 212.44 | 205.97 | 226.30 | 210.74 | 214.12 | 371.91 | 205.14 | 201.60 | 214.10 | 207.46 | 225.43 | 211.89 | 204.62 | | | |
| Office consultation | 99243 | | 3.84% | 4.51% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 232.06 | 122.65 | 120.81 | 126.37 | 123.48 | 132.09 | 125.83 | 123.16 | | | |
| Fragmenting of kidney stone | 50590 | | 0.78% | 4.22% | 1,087.25 | 841.26 | 867.09 | 879.29 | 853.31 | 935.46 | 872.64 | 886.42 | 1,650.32 | 911.68 | 896.16 | 952.13 | 922.32 | 1,002.42 | 941.71 | 908.55 | | | |
| Repair bladder defect | 57288 | | 0.27% | 1.77% | 931.10 | 683.01 | 691.09 | 701.21 | 687.75 | 742.21 | 705.92 | 723.45 | 1,338.95 | 693.47 | 681.88 | 708.42 | 695.47 | 740.43 | 710.68 | 703.30 | | | |
| Complex cystometrogram | 51726 | | 0.53% | 1.76% | 357.66 | 291.77 | 305.01 | 309.60 | 297.70 | 332.03 | 304.64 | 308.47 | 520.73 | 302.70 | 296.96 | 320.89 | 307.92 | 340.31 | 314.94 | 298.93 | | | |
| Biopsy of prostate | 55700 | | 0.82% | 1.75% | 286.73 | 221.83 | 228.59 | 231.83 | 224.99 | 246.69 | 230.15 | 233.88 | 412.05 | 226.08 | 222.27 | 235.61 | 228.53 | 247.83 | 233.32 | 225.65 | | | |
| Office/outpatient visit, new | 99203 | | 1.86% | 1.63% | 129.99 | 98.07 | 100.35 | 101.71 | 99.17 | 107.79 | 101.40 | 103.20 | 180.25 | 95.71 | 94.25 | 98.75 | 96.40 | 103.31 | 98.27 | 96.05 | | | |
| Office/outpatient visit, new | 99204 | | 1.17% | 1.56% | 203.11 | 151.11 | 154.06 | 156.09 | 152.58 | 164.96 | 155.92 | 158.74 | 284.41 | 148.94 | 146.76 | 152.99 | 149.78 | 159.69 | 152.59 | 149.84 | | | |
| Prostatic microwave thermotx | 53850 | | 0.05% | 1.55% | 2,691.53 | 2,223.55 | 2,332.09 | 2,367.70 | 2,271.90 | 2,543.59 | 2,324.98 | 2,352.24 | 3,904.67 | 2,299.88 | 2,254.98 | 2,446.92 | 2,342.58 | 2,599.87 | 2,397.28 | 2,266.46 | | | |
| Office/outpatient visit, est | 99212 | | 4.28% | 1.53% | 51.32 | 39.51 | 40.71 | 41.26 | 40.07 | 43.82 | 40.92 | 41.52 | 70.24 | 38.10 | 37.50 | 39.59 | 38.48 | 41.53 | 39.23 | 38.04 | | | |
| Laparo radical prostatectomy | 55866 | | 0.14% | 1.46% | 2,355.82 | 1,714.02 | 1,735.19 | 1,757.63 | 1,725.71 | 1,851.35 | 1,764.07 | 1,799.91 | 3,455.23 | 1,777.18 | 1,752.14 | 1,814.51 | 1,783.25 | 1,888.68 | 1,815.90 | 1,794.89 | | | |
| Cystouretero w/lithotripsy | 52353 | | 0.33% | 1.33% | 578.98 | 420.43 | 425.53 | 430.93 | 423.24 | 453.56 | 432.43 | 441.00 | 844.91 | 434.34 | 428.30 | 443.44 | 435.84 | 461.42 | 443.70 | 438.53 | | | |
| Extensive prostate surgery | 55845 | | 0.13% | 1.30% | 2,230.33 | 1,619.54 | 1,638.58 | 1,659.70 | 1,630.18 | 1,747.59 | 1,666.38 | 1,700.45 | 3,252.75 | 1,671.79 | 1,648.18 | 1,706.40 | 1,677.29 | 1,776.07 | 1,708.10 | 1,688.94 | | | |
| Cystoscopy and treatment | 52332 | | 0.80% | 1.25% | 579.38 | 474.34 | 496.32 | 503.83 | 484.18 | 540.61 | 495.48 | 501.61 | 815.26 | 472.24 | 463.29 | 500.06 | 480.16 | 530.15 | 491.14 | 466.79 | | | |
| Echo guide for biopsy | 76942 | 26 | 0.81% | 1.21% | 45.42 | 32.51 | 32.89 | 33.23 | 32.71 | 34.73 | 33.24 | 33.71 | 66.39 | 33.64 | 33.29 | 34.26 | 33.76 | 35.43 | 34.21 | 33.84 | | | |
| Leuprolide acetate suspension | J9217 | | 0.19% | 1.18% | 209.11 | 209.11 | 209.11 | 209.11 | 209.11 | 209.11 | 209.11 | 209.11 | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | |
| Electro-uroflowmetry, first | 51741 | | 1.41% | 1.12% | 49.17 | 40.77 | 42.78 | 43.44 | 41.66 | 46.72 | 42.66 | 43.19 | 153.85 | 82.49 | 81.30 | 85.45 | 83.24 | 89.39 | 84.73 | 82.37 | | | |
| Urine voiding pressure study | 51795 | 26 | 0.34% | 1.08% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | | | |
| Cystoscopy and treatment | 52310 | | 0.48% | 1.07% | 311.73 | 241.12 | 248.41 | 251.95 | 244.54 | 268.15 | 250.20 | 254.32 | 449.11 | 246.43 | 242.26 | 256.81 | 249.10 | 270.16 | 254.34 | 246.00 | | | |
| Office consultation | 99245 | | 0.49% | 1.04% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 428.34 | 223.13 | 220.20 | 229.02 | 224.42 | 238.44 | 228.17 | 224.00 | | | |
| Cystoscopy and treatment | 52281 | | 0.37% | 1.02% | 352.53 | 278.46 | 288.54 | 292.76 | 283.08 | 312.56 | 289.68 | 294.03 | 527.66 | 295.04 | 289.82 | 309.20 | 298.84 | 326.19 | 305.33 | 293.51 | | | |
| Office/outpatient visit, est | 99215 | | 0.86% | 1.00% | 177.40 | 132.08 | 135.00 | 136.62 | 133.47 | 144.01 | 135.96 | 137.85 | 248.30 | 130.18 | 128.52 | 133.96 | 131.08 | 139.50 | 133.18 | 130.32 | | | |
| Us urine capacity measure | 51798 | | 2.81% | 0.57% | 21.37 | 18.46 | 19.52 | 19.86 | 18.93 | 21.53 | 19.45 | 19.72 | 29.02 | 17.91 | 17.48 | 19.26 | 18.30 | 20.66 | 18.83 | 17.64 | | | |
| Urinalysis, nonauto w/scope | 81000 | | 10.02% | 0.43% | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 3.60 | 5.46 | 4.16 | 4.08 | 4.12 | 4.12 | 3.79 | 3.82 | | | |
| Assay of psa, total | 84153 | | 1.40% | 0.35% | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 31.68 | 24.14 | 23.65 | 23.94 | 23.94 | 21.98 | 22.14 | 24.17 | | | |
| X-ray exam of abdomen | 74000 | 26 | 1.18% | 0.30% | 11.99 | 8.55 | 8.65 | 8.73 | 8.60 | 9.12 | 8.73 | 8.85 | 17.65 | 8.92 | 8.82 | 9.07 | 8.95 | 9.39 | 9.08 | 9.00 | | | |
| Urinalysis, auto w/scope | 81001 | | 2.92% | 0.12% | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 4.45 | 5.46 | 4.16 | 4.08 | 4.12 | 4.12 | 3.79 | 3.82 | 4.16 | | | |
| Urinalysis nonauto w/o scope | 81002 | | 3.03% | 0.10% | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 3.60 | 2.89 | 4.40 | 3.35 | 3.28 | 3.32 | 3.32 | 3.05 | 3.08 | 3.36 | | | |
| Assay of urine creatinine | 82570 | | 1.34% | 0.09% | 7.28 | 7.28 | 7.28 | 7.28 | 7.28 | 7.28 | 7.28 | 7.28 | 8.92 | 6.79 | 6.66 | 6.74 | 6.74 | 6.19 | 6.23 | 6.80 | | | |
| Urinalysis, auto, w/o scope | 81003 | | 2.88% | 0.09% | 3.16 | 3.16 | 3.16 | 3.16 | 3.16 | 3.16 | 3.16 | 2.89 | 3.88 | 2.95 | 2.89 | 2.93 | 2.93 | 2.69 | 2.71 | 2.96 | | | |
| Routine venipuncture | 36415 | | 2.59% | 0.08% | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | | | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-20
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Urology

| Description | HCPCS | Modifier | % of | | VA ⁽³⁾ | | | | | | | Medicaid ⁽⁴⁾ | | | | | | Workers' Compensation ⁽⁴⁾ | | | | | |
|-------------------------------|-------|----------|------------------------------|------------|-------------------|----------|----------|----------|----------|----------|----------|-------------------------|----------|----------|----------|---------|-----------|--------------------------------------|----------|---------------|-------------|----------|----------|
| | | | Total Util | Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | |
| | | | Office/outpatient visit, est | 99213 | | 13.79% | 7.96% | \$103.12 | \$66.04 | \$67.67 | \$68.52 | \$72.42 | \$69.10 | \$108.29 | \$57.45 | \$91.76 | \$50.35 | \$38.21 | \$67.36 | \$149.22 | \$133.13 | \$125.74 | \$138.79 |
| Removal of sperm duct(s) | 55250 | | 1.54% | 6.77% | 1,116.08 | 407.35 | 423.33 | 429.53 | 459.11 | 430.04 | 647.60 | 403.30 | 585.78 | 644.98 | 260.76 | N/A | 1,000.62 | 1,051.68 | 782.92 | 1,003.11 | Not Covered | N/A | |
| Office consultation | 99244 | | 3.29% | 5.66% | 338.76 | N/A | N/A | N/A | N/A | N/A | 310.73 | N/A | 103.88 | N/A | 113.15 | N/A | 476.45 | 342.09 | N/A | 355.52 | 288.32 | N/A | |
| Office/outpatient visit, est | 99214 | | 6.06% | 5.26% | 150.83 | 98.08 | 100.41 | 101.63 | 107.25 | 102.45 | 163.18 | 86.45 | 137.64 | 75.39 | 57.10 | 95.57 | 216.25 | 197.74 | 186.44 | 206.48 | 167.13 | N/A | |
| Cystoscopy | 52000 | | 2.62% | 4.97% | 423.35 | 202.95 | 209.44 | 212.44 | 226.30 | 214.12 | 330.89 | 193.42 | 291.82 | 235.19 | 128.93 | N/A | 883.60 | 523.96 | 389.60 | 516.66 | 350.30 | N/A | |
| Office consultation | 99243 | | 3.84% | 4.51% | 242.81 | N/A | N/A | N/A | N/A | N/A | 206.34 | N/A | 74.86 | N/A | 76.25 | N/A | 364.35 | 230.14 | N/A | 240.66 | 194.80 | N/A | |
| Fragmenting of kidney stone | 50590 | | 0.78% | 4.22% | 2,000.26 | 841.26 | 867.09 | 879.29 | 935.46 | 886.42 | 1,468.81 | 827.86 | 1,296.41 | 1,325.58 | 573.31 | N/A | 5,015.77 | 2,171.92 | 1,612.92 | 2,065.56 | 1,449.91 | N/A | |
| Repair bladder defect | 57288 | | 0.27% | 1.77% | 1,920.62 | 683.01 | 691.09 | 701.21 | 742.21 | 723.45 | 1,190.15 | 678.54 | 986.44 | 548.33 | 429.93 | N/A | 4,770.74 | 1,763.33 | 1,313.75 | 1,681.09 | 1,165.46 | N/A | |
| Complex cystometrogram | 51726 | | 0.53% | 1.76% | 888.18 | 291.77 | 305.01 | 309.60 | 332.03 | 308.47 | 464.60 | 296.19 | 429.47 | 112.70 | 192.51 | N/A | 935.30 | 753.28 | 561.80 | 745.11 | 509.13 | N/A | |
| Biopsy of prostate | 55700 | | 0.82% | 1.75% | 514.72 | 221.83 | 228.59 | 231.83 | 246.69 | 233.88 | 366.58 | 220.34 | 321.70 | 364.97 | 142.05 | N/A | 1,016.09 | 572.71 | 425.53 | 563.33 | 382.40 | N/A | |
| Office/outpatient visit, new | 99203 | | 1.86% | 1.63% | 161.06 | 98.07 | 100.35 | 101.71 | 107.79 | 103.20 | 160.27 | 86.54 | 136.58 | 75.39 | 56.88 | 99.86 | 223.86 | 197.71 | 187.68 | 207.84 | 168.23 | N/A | |
| Office/outpatient visit, new | 99204 | | 1.17% | 1.56% | 221.51 | 151.11 | 154.06 | 156.09 | 164.96 | 158.74 | 252.60 | 133.19 | 212.33 | 117.12 | 88.06 | N/A | 319.81 | 304.65 | 288.64 | 319.29 | 257.88 | N/A | |
| Prostatic microwave thermotx | 53850 | | 0.05% | 1.55% | 7,415.69 | 2,223.55 | 2,332.09 | 2,367.70 | 2,543.59 | 2,352.24 | 3,477.98 | 2,250.37 | 3,262.89 | N/A | 1,467.40 | N/A | BR | 5,740.71 | 4,285.01 | 5,493.40 | Not Covered | N/A | |
| Office/outpatient visit, est | 99212 | | 4.28% | 1.53% | 75.92 | 39.51 | 40.71 | 41.26 | 43.82 | 41.52 | 62.46 | 35.18 | 54.42 | 30.05 | 22.84 | 40.33 | 116.78 | 79.66 | 75.57 | 83.41 | 68.07 | N/A | |
| Laparo radical prostatectomy | 55866 | | 0.14% | 1.46% | 4,208.80 | 1,714.02 | 1,735.19 | 1,757.63 | 1,851.35 | 1,799.91 | 3,070.86 | 1,584.42 | N/A | 1,395.17 | 1,097.94 | N/A | 10,567.28 | 4,425.11 | 3,271.05 | 4,184.13 | Not Covered | N/A | |
| Cystouretero w/lithotripsy | 52533 | | 0.33% | 1.33% | 1,092.64 | 420.43 | 425.53 | 430.93 | 453.56 | 441.00 | 751.77 | 390.62 | 619.93 | 990.66 | 268.32 | N/A | 6,744.75 | 1,085.43 | 801.50 | 1,061.16 | 713.33 | N/A | |
| Extensive prostate surgery | 55845 | | 0.13% | 1.30% | 4,179.80 | 1,619.54 | 1,638.58 | 1,659.70 | 1,747.59 | 1,700.45 | 2,890.62 | 1,492.50 | 2,384.75 | 1,312.55 | 1,032.58 | N/A | 13,818.75 | 4,181.18 | 3,090.19 | 3,952.34 | Not Covered | N/A | |
| Cystoscopy and treatment | 52332 | | 0.80% | 1.25% | 1,959.40 | 474.34 | 496.32 | 503.83 | 540.61 | 501.61 | 726.10 | 401.78 | 670.08 | 698.79 | 300.33 | N/A | 1,821.08 | 1,224.65 | 913.62 | 1,092.28 | 827.89 | N/A | |
| Echo guide for biopsy | 76942 | 26 | 0.81% | 1.21% | 90.06 | 32.51 | 32.89 | 33.23 | 34.73 | 33.71 | 59.03 | 62.16 | 46.04 | 26.15 | 20.67 | N/A | 210.39 | 83.94 | 61.32 | 62.44 | 54.79 | N/A | |
| Leuprolide acetate suspension | J9217 | | 0.19% | 1.18% | 1,809.32 | 209.11 | 209.11 | 209.11 | 209.11 | 209.11 | 648.26 | 242.79 | 206.52 | 215.01 | N/A | N/A | 1,702.47 | N/A | N/A | N/A | 443.88 | N/A | |
| Electro-uroflowmetry, first | 51741 | | 1.41% | 1.12% | 196.37 | 40.77 | 42.78 | 43.44 | 46.72 | 43.19 | 137.60 | 74.55 | 117.90 | 64.82 | 51.35 | N/A | 498.82 | 105.25 | 78.66 | 104.81 | 71.39 | N/A | |
| Urine voiding pressure study | 51795 | 26 | 0.34% | 1.08% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | 689.00 | N/A | N/A | N/A | N/A | N/A | |
| Cystoscopy and treatment | 52310 | | 0.48% | 1.07% | 763.27 | 241.12 | 248.41 | 251.95 | 268.15 | 254.32 | 399.02 | 241.13 | 350.51 | 485.82 | 154.72 | N/A | 1,188.03 | 622.52 | 462.69 | 613.28 | 415.60 | N/A | |
| Office consultation | 99245 | | 0.49% | 1.04% | 371.13 | N/A | N/A | N/A | N/A | N/A | 380.86 | N/A | N/A | 138.05 | N/A | N/A | 601.64 | 418.17 | N/A | 434.83 | 351.96 | N/A | |
| Cystoscopy and treatment | 52281 | | 0.37% | 1.02% | 1,102.10 | 278.46 | 288.54 | 292.76 | 312.56 | 294.03 | 469.38 | 288.69 | 419.33 | 494.77 | 186.07 | N/A | 1,069.24 | 718.90 | 535.16 | 709.90 | 482.56 | N/A | |
| Office/outpatient visit, est | 99215 | | 0.86% | 1.00% | 303.55 | 132.08 | 135.00 | 136.62 | 144.01 | 137.85 | 221.58 | 117.01 | 186.19 | 101.82 | 76.86 | 136.28 | 346.00 | 266.29 | 250.86 | 277.58 | 225.23 | N/A | |
| Us urine capacity measure | 51798 | | 2.81% | 0.57% | 169.22 | 18.46 | 19.52 | 19.86 | 21.53 | 19.72 | 25.81 | 17.20 | 25.07 | 14.47 | 11.56 | N/A | 935.30 | 47.65 | 35.93 | 47.49 | 32.65 | N/A | |
| Urinalysis, nonauto w/scope | 81000 | | 10.02% | 0.43% | 21.17 | 4.45 | 4.45 | 4.45 | 4.45 | 3.60 | 4.54 | 4.43 | 4.54 | 3.36 | 3.45 | N/A | 36.49 | TBD | 11.12 | 80% of billed | 6.23 | N/A | |
| Assay of psa, total | 84153 | | 1.40% | 0.35% | 66.02 | 25.89 | 25.89 | 25.89 | 25.89 | 25.89 | 26.34 | 25.70 | 26.34 | 19.49 | 20.02 | N/A | 140.35 | TBD | 64.72 | 80% of billed | 36.25 | N/A | |
| X-ray exam of abdomen | 74000 | 26 | 1.18% | 0.30% | 23.93 | 8.55 | 8.65 | 8.73 | 9.12 | 8.85 | 15.69 | 8.73 | 11.87 | 6.96 | 5.56 | N/A | 60.80 | 22.08 | 16.10 | 16.40 | 14.39 | N/A | |
| Urinalysis, auto w/scope | 81001 | | 2.92% | 0.12% | 32.35 | 4.45 | 4.45 | 4.45 | 4.45 | 3.60 | 4.54 | 4.43 | 4.54 | 3.36 | 3.45 | N/A | 36.49 | TBD | 11.12 | 80% of billed | 6.23 | N/A | |
| Urinalysis nonauto w/o scope | 81002 | | 3.03% | 0.10% | 20.10 | 3.60 | 3.60 | 3.60 | 3.60 | 2.89 | 3.66 | 3.57 | 3.66 | 2.71 | 2.78 | N/A | 28.57 | TBD | 9.00 | 80% of billed | 5.04 | N/A | |
| Assay of urine creatinine | 82570 | | 1.34% | 0.09% | 33.17 | 7.28 | 7.28 | 7.28 | 7.28 | 7.28 | 7.41 | 7.23 | 7.41 | 5.48 | 5.63 | N/A | 58.08 | TBD | 18.20 | 19.00 | 10.19 | N/A | |
| Urinalysis, auto, w/o scope | 81003 | | 2.88% | 0.09% | 17.97 | 3.16 | 3.16 | 3.16 | 3.16 | 2.89 | 3.22 | 3.14 | 3.22 | 2.38 | 2.45 | N/A | 28.57 | TBD | 7.90 | 15.00 | 4.42 | N/A | |
| Routine venipuncture | 36415 | | 2.59% | 0.08% | 11.76 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.00 | 3.88 | 2.22 | 2.28 | 2.70 | 29.03 | N/A | 7.50 | 80% of billed | 4.20 | N/A | |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-20
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Urology

| Description | HCPCS | Modifier | % of Total Util | % of Total RVUs | Commercial Allowed ⁽⁵⁾ | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-----------------|-----------------|-----------------------------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|
| | | | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | |
| | | | | | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 13.79% | 7.96% | \$134.15 | \$89.05 | \$92.87 | \$108.87 | \$90.19 | \$79.88 | \$140.00 | \$89.93 | \$96.24 | \$112.52 | \$86.74 | \$83.00 | \$150.00 | \$100.77 | \$96.24 | \$120.96 | \$101.79 | \$86.00 |
| Removal of sperm duct(s) | 55250 | | 1.54% | 6.77% | 1,005.81 | 784.27 | 698.12 | 836.18 | 729.58 | 793.68 | 959.50 | 832.89 | 694.60 | 840.50 | 718.12 | 825.00 | 1,264.00 | 875.00 | 701.99 | 944.70 | 822.09 | 905.00 |
| Office consultation | 99244 | | 3.29% | 5.66% | 427.48 | 270.95 | 289.59 | 334.30 | 280.32 | 253.98 | 450.00 | 274.61 | 289.28 | 339.02 | 271.46 | 242.00 | 490.00 | 303.80 | 294.77 | 367.92 | 316.60 | 303.50 |
| Office/outpatient visit, est | 99214 | | 6.06% | 5.26% | 194.83 | 133.62 | 140.11 | 164.90 | 140.23 | 117.70 | 205.00 | 136.59 | 144.92 | 171.00 | 135.16 | 118.47 | 220.00 | 151.91 | 144.92 | 182.40 | 161.20 | 130.00 |
| Cystoscopy | 52000 | | 2.62% | 4.97% | 721.72 | 334.98 | 333.36 | 385.05 | 316.38 | 337.29 | 750.00 | 372.60 | 337.40 | 391.95 | 312.69 | 335.00 | 813.00 | 380.28 | 338.75 | 446.96 | 378.00 | 354.62 |
| Office consultation | 99243 | | 3.84% | 4.51% | 317.30 | 187.75 | 196.04 | 230.37 | 195.82 | 184.07 | 340.00 | 184.48 | 195.87 | 231.82 | 190.67 | 190.00 | 353.00 | 204.09 | 198.00 | 253.13 | 222.30 | 205.87 |
| Fragmenting of kidney stone | 50590 | | 0.78% | 4.22% | 4,714.96 | 1,227.63 | 1,058.97 | 1,344.22 | 1,127.18 | 3,548.51 | 4,500.00 | 1,011.51 | 913.69 | 1,156.00 | 832.14 | 4,088.00 | 7,455.00 | 1,590.96 | 1,030.98 | 1,577.52 | 1,248.25 | 5,700.00 |
| Repair bladder defect | 57288 | | 0.27% | 1.77% | 3,610.06 | 1,158.11 | 1,065.94 | 1,232.74 | 1,046.88 | 2,132.25 | 4,150.00 | 1,413.80 | 1,105.59 | 1,340.00 | 1,115.36 | 1,984.00 | 4,500.00 | 1,438.28 | 1,105.59 | 1,565.28 | 1,316.99 | 3,180.60 |
| Complex cystometrogram | 51726 | | 0.53% | 1.76% | 957.08 | 573.79 | 509.33 | 606.15 | 520.20 | 580.68 | 1,145.00 | 576.10 | 510.62 | 604.34 | 503.77 | 551.90 | 1,226.00 | 617.30 | 510.62 | 720.00 | 570.40 | 783.75 |
| Biopsy of prostate | 55700 | | 0.82% | 1.75% | 765.48 | 425.41 | 316.85 | 423.31 | 374.64 | 310.62 | 800.00 | 431.52 | 365.82 | 438.85 | 354.59 | 304.00 | 865.00 | 445.00 | 378.22 | 499.50 | 434.92 | 390.56 |
| Office/outpatient visit, new | 99203 | | 1.86% | 1.63% | 201.36 | 131.99 | 135.08 | 162.64 | 139.59 | 123.76 | 219.00 | 136.88 | 144.36 | 168.30 | 133.76 | 128.74 | 240.00 | 151.43 | 144.36 | 180.34 | 161.28 | 134.00 |
| Office/outpatient visit, new | 99204 | | 1.17% | 1.56% | 285.42 | 204.47 | 210.35 | 245.77 | 207.42 | 176.24 | 313.00 | 212.03 | 222.48 | 256.11 | 200.72 | 176.36 | 340.00 | 234.58 | 222.48 | 275.66 | 239.81 | 195.16 |
| Prostatic microwave thermotx | 53850 | | 0.05% | 1.55% | No Data | Not Cred | No Data | Not Cred | 4,654.56 | Not Cred | No Data | Not Cred | No Data | Not Cred | 4,543.75 | Not Cred | No Data | Not Cred | No Data | Not Cred | 4,715.09 | Not Cred |
| Office/outpatient visit, est | 99212 | | 4.28% | 1.53% | 101.12 | 55.61 | 56.69 | 66.49 | 56.13 | 56.92 | 106.00 | 54.77 | 58.31 | 67.47 | 53.30 | 56.00 | 115.00 | 60.60 | 58.31 | 73.00 | 64.23 | 61.75 |
| Laparo radical prostatectomy | 55866 | | 0.14% | 1.46% | 5,540.49 | 2,826.40 | Not Cred | 3,417.64 | 2,551.80 | Not Cred | 6,115.72 | 3,181.51 | Not Cred | 3,362.06 | 2,581.38 | Not Cred | 7,855.52 | 3,231.50 | Not Cred | 3,830.49 | 2,991.08 | Not Cred |
| Cystouretero w/lithotripsy | 52353 | | 0.33% | 1.33% | 4,456.78 | 821.52 | Not Cred | 811.07 | 657.52 | 1,995.07 | 5,500.00 | 796.74 | Not Cred | 817.89 | 613.74 | 2,112.00 | 5,781.00 | 842.87 | Not Cred | 945.27 | 724.66 | 2,166.82 |
| Extensive prostate surgery | 55845 | | 0.13% | 1.30% | Not Cred | Not Cred | Not Cred | 3,031.66 | 2,591.07 | Not Cred | Not Cred | Not Cred | Not Cred | 3,163.74 | 2,428.52 | Not Cred | Not Cred | Not Cred | Not Cred | 3,524.95 | 2,904.32 | Not Cred |
| Cystoscopy and treatment | 52332 | | 0.80% | 1.25% | 654.61 | 455.60 | 227.31 | 417.71 | 248.36 | 473.51 | 622.00 | 332.67 | 257.01 | 304.18 | 165.51 | 293.50 | 904.75 | 665.18 | 257.01 | 695.20 | 307.92 | 587.00 |
| Echo guide for biopsy | 76942 | 26 | 0.81% | 1.21% | 163.47 | 108.79 | 64.22 | 65.71 | 60.02 | 95.19 | 153.00 | 71.30 | 53.78 | 63.65 | 57.73 | 88.00 | 208.00 | 142.20 | 70.76 | 67.43 | 61.13 | 139.00 |
| Leuprolide acetate suspnsion | J9217 | | 0.19% | 1.18% | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A | N/A |
| Electro-uroflowmetry, first | 51741 | | 1.41% | 1.12% | 305.72 | 103.06 | 172.06 | 111.67 | 102.91 | 101.32 | 310.00 | 110.88 | 136.43 | 95.76 | 112.86 | 98.00 | 382.24 | 146.81 | 139.16 | 165.82 | 120.06 | 151.00 |
| Urine voiding pressure study | 51795 | 26 | 0.34% | 1.08% | Not Cred | Not Cred | Not Cred | 80.64 | 81.56 | Not Cred | Not Cred | Not Cred | Not Cred | 73.04 | 71.44 | Not Cred | Not Cred | Not Cred | Not Cred | 86.18 | 133.30 | Not Cred |
| Cystoscopy and treatment | 52310 | | 0.48% | 1.07% | 1,064.20 | 484.42 | 479.29 | 495.81 | 408.19 | 479.13 | 1,160.00 | 477.83 | 408.72 | 483.74 | 393.37 | 469.00 | 1,200.00 | 526.45 | 412.20 | 567.64 | 487.15 | 554.00 |
| Office consultation | 99245 | | 0.49% | 1.04% | 512.68 | 334.98 | 374.53 | 411.96 | 347.70 | 325.66 | 575.00 | 335.00 | 355.51 | 410.94 | 333.92 | 314.15 | 640.00 | 375.00 | 392.00 | 453.13 | 396.43 | 367.81 |
| Cystoscopy and treatment | 52281 | | 0.37% | 1.02% | No Data | Not Cred | Not Cred | 502.64 | 444.81 | 510.64 | No Data | Not Cred | Not Cred | 567.77 | 495.92 | 503.00 | No Data | Not Cred | Not Cred | 601.95 | 553.32 | 554.97 |
| Office/outpatient visit, est | 99215 | | 0.86% | 1.00% | 290.64 | 182.16 | 192.46 | 216.11 | 183.24 | 162.55 | 315.00 | 182.70 | 195.87 | 224.67 | 176.00 | 161.46 | 338.10 | 200.00 | 197.10 | 243.53 | 212.17 | 187.00 |
| Us urine capacity measure | 51798 | | 2.81% | 0.57% | 135.00 | 32.52 | 38.87 | 39.75 | 31.17 | 35.38 | 120.00 | 31.62 | 33.97 | 39.88 | 30.80 | 34.00 | 218.50 | 33.73 | 35.18 | 47.63 | 33.55 | 50.00 |
| Urinalysis, nonauto w/scope | 81000 | | 10.02% | 0.43% | 21.33 | 8.11 | 9.27 | 6.59 | 5.12 | 14.93 | 20.00 | 6.47 | 9.08 | 6.38 | 4.43 | 17.00 | 30.00 | 7.20 | 9.08 | 6.67 | 5.27 | 19.00 |
| Assay of psa, total | 84153 | | 1.40% | 0.35% | 75.92 | 34.49 | 55.96 | 34.50 | 28.20 | 48.84 | 82.24 | 34.86 | 52.66 | 34.80 | 26.83 | 40.28 | 110.00 | 36.49 | 53.71 | 37.01 | 30.84 | 72.25 |
| X-ray exam of abdomen | 74000 | 26 | 1.18% | 0.30% | 38.50 | 21.37 | 17.77 | 17.25 | 16.09 | 25.81 | 39.00 | 18.67 | 14.15 | 16.44 | 15.63 | 27.09 | 39.00 | 23.50 | 15.30 | 17.75 | 16.51 | 35.00 |
| Urinalysis, auto w/scope | 81001 | | 2.92% | 0.12% | 23.55 | 7.37 | 10.17 | 7.97 | 6.16 | 11.33 | 30.00 | 6.47 | 9.08 | 6.38 | 4.63 | 9.33 | 36.00 | 6.78 | 9.08 | 8.55 | 5.56 | 17.00 |
| Urinalysis nonauto w/o scope | 81002 | | 3.03% | 0.10% | 18.49 | 6.15 | 8.07 | 5.31 | 3.98 | 10.09 | 21.62 | 5.05 | 7.31 | 5.00 | 3.57 | 10.00 | 26.00 | 5.08 | 7.31 | 5.14 | 3.74 | 12.35 |
| Assay of urine creatinine | 82570 | | 1.34% | 0.09% | 34.69 | 10.83 | 15.18 | 10.48 | 8.59 | 13.41 | 37.50 | 9.77 | 14.81 | 10.12 | 7.56 | 9.76 | 55.00 | 10.45 | 14.81 | 12.60 | 8.68 | 21.25 |
| Urinalysis, auto, w/o scope | 81003 | | 2.88% | 0.09% | 19.29 | 5.37 | 7.03 | 4.93 | 3.87 | 10.32 | 25.00 | 4.43 | 6.44 | 4.40 | 3.28 | 7.00 | 29.00 | 4.46 | 6.44 | 4.72 | 3.77 | 19.27 |
| Routine venipuncture | 36415 | | 2.59% | 0.08% | 18.08 | 9.10 | 6.81 | 6.34 | 5.69 | 14.42 | 15.00 | 8.54 | 6.15 | 3.60 | 3.00 | 13.44 | 31.45 | 9.34 | 6.27 | 7.68 | 5.42 | 20.00 |

- (1) Medicare fees are from CY2011 schedule.
- (2) TRICARE fees are from the current schedules effective 8/1/2010.
- (3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
- (4) Medicaid and workers' compensation fees are current as of 8/3/2011.
- (5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim

Appendix A-20
Summary of Professional Provider Allowed Amounts by Payer
Alaska and Comparison States
Urology

| Description | HCPCS | Modifier | Billed Charges ⁽⁵⁾ | | | | | | | | | | | | | | | | | | | |
|------------------------------|-------|----------|-------------------------------|-----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|-----------------|----------|----------|----------|----------|----------|----------|----------|
| | | | Mean | | | | | | Median | | | | | | 80th Percentile | | | | | | | |
| | | | % of Total Util | % of Total RVUs | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY | AK | ID | ND | OR | WA | WY |
| Office/outpatient visit, est | 99213 | | 13.79% | 7.96% | \$134.60 | \$84.31 | \$94.91 | \$119.82 | \$107.32 | \$88.42 | \$145.00 | \$83.00 | \$98.00 | \$125.00 | \$107.00 | \$87.00 | \$152.25 | \$110.00 | \$114.00 | \$145.00 | \$128.00 | \$106.70 |
| Removal of sperm duct(s) | 55250 | | 1.54% | 6.77% | No Data | No Data | No Data | Not Cred | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data | No Data |
| Office consultation | 99244 | | 3.29% | 5.66% | 434.24 | 283.55 | 294.68 | 397.81 | 343.92 | 301.79 | 450.00 | 299.17 | 318.00 | 399.00 | 345.15 | 305.00 | 510.50 | 343.90 | 362.00 | 473.00 | 399.00 | 363.34 |
| Office/outpatient visit, est | 99214 | | 6.06% | 5.26% | 196.23 | 131.45 | 144.89 | 184.32 | 165.49 | 132.65 | 208.00 | 138.00 | 150.00 | 190.00 | 163.00 | 130.00 | 220.00 | 166.00 | 171.00 | 221.00 | 200.00 | 156.00 |
| Cystoscopy | 52000 | | 2.62% | 4.97% | 606.69 | 388.82 | 436.17 | 491.84 | 430.78 | 371.02 | 675.00 | 400.00 | 410.00 | 500.00 | 440.00 | 364.00 | 819.00 | 600.00 | 507.00 | 606.00 | 479.00 | 575.61 |
| Office consultation | 99243 | | 3.84% | 4.51% | 328.70 | 199.94 | 207.88 | 271.75 | 237.14 | 215.50 | 349.00 | 210.00 | 215.00 | 273.00 | 240.00 | 220.00 | 366.84 | 239.00 | 246.96 | 329.00 | 276.00 | 279.17 |
| Fragmenting of kidney stone | 50590 | | 0.78% | 4.22% | Not Cred | 1,532.35 | Not Cred | 1,747.66 | 1,735.75 | Not Cred | Not Cred | 1,517.34 | Not Cred | 1,945.50 | 1,650.00 | Not Cred | Not Cred | 2,200.00 | Not Cred | 2,627.50 | 2,300.00 | Not Cred |
| Repair bladder defect | 57288 | | 0.27% | 1.77% | Not Cred | 1,620.08 | Not Cred | 1,715.93 | 1,669.26 | Not Cred | Not Cred | 1,532.00 | Not Cred | 1,918.00 | 1,619.00 | Not Cred | Not Cred | 2,127.50 | Not Cred | 2,226.00 | 1,907.00 | Not Cred |
| Complex cystometrogram | 51726 | | 0.53% | 1.76% | Not Cred | 507.27 | Not Cred | 752.42 | 649.77 | Not Cred | Not Cred | 560.00 | Not Cred | 812.00 | 666.80 | Not Cred | Not Cred | 710.00 | Not Cred | 909.00 | 750.00 | Not Cred |
| Biopsy of prostate | 55700 | | 0.82% | 1.75% | 583.77 | 381.50 | 448.91 | 529.73 | 459.29 | 366.99 | 480.00 | 259.00 | 449.00 | 540.00 | 470.00 | 348.00 | 800.00 | 568.00 | 557.00 | 643.00 | 535.00 | 653.46 |
| Office/outpatient visit, new | 99203 | | 1.86% | 1.63% | 198.02 | 136.30 | 148.65 | 183.25 | 169.23 | 143.50 | 209.30 | 145.00 | 163.00 | 191.00 | 171.00 | 141.00 | 240.00 | 171.00 | 181.00 | 224.00 | 196.00 | 175.00 |
| Office/outpatient visit, new | 99204 | | 1.17% | 1.56% | 294.64 | 212.66 | 232.15 | 285.33 | 249.37 | 204.24 | 318.00 | 220.00 | 249.00 | 295.00 | 251.00 | 200.00 | 350.00 | 265.00 | 271.00 | 363.00 | 297.00 | 249.00 |
| Prostatic microwave thermotx | 53850 | | 0.05% | 1.55% | Not Cred | Not Cred | No Data | Not Cred | 6,134.70 | No Data | Not Cred | Not Cred | No Data | Not Cred | 6,061.00 | No Data | Not Cred | Not Cred | No Data | Not Cred | 7,244.00 | No Data |
| Office/outpatient visit, est | 99212 | | 4.28% | 1.53% | 92.50 | 53.09 | 56.30 | 72.57 | 68.63 | 55.45 | 102.00 | 55.00 | 60.00 | 75.75 | 70.00 | 55.00 | 117.00 | 70.00 | 70.00 | 90.00 | 80.00 | 74.00 |
| Laparo radical prostatectomy | 55866 | | 0.14% | 1.46% | No Data | Not Cred | No Data | Not Cred | 4,355.29 | Not Cred | No Data | Not Cred | No Data | Not Cred | 4,102.00 | Not Cred | No Data | Not Cred | No Data | Not Cred | 5,670.00 | Not Cred |
| Cystouretero w/lithotripsy | 52353 | | 0.33% | 1.33% | No Data | Not Cred | Not Cred | 1,378.41 | 1,064.17 | Not Cred | No Data | Not Cred | Not Cred | 1,195.00 | 925.25 | Not Cred | No Data | Not Cred | Not Cred | 1,964.75 | 1,136.00 | Not Cred |
| Extensive prostate surgery | 55845 | | 0.13% | 1.30% | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data | No Data | Not Cred | Not Cred | Not Cred | Not Cred | No Data |
| Cystoscopy and treatment | 52332 | | 0.80% | 1.25% | Not Cred | 628.85 | Not Cred | 1,128.93 | 1,014.81 | Not Cred | Not Cred | 718.00 | Not Cred | 1,205.00 | 1,139.20 | Not Cred | Not Cred | 965.00 | Not Cred | 1,549.00 | 1,448.32 | Not Cred |
| Echo guide for biopsy | 76942 | 26 | 0.81% | 1.21% | 170.17 | 146.24 | 91.15 | 116.59 | 116.11 | 116.06 | 153.00 | 132.00 | 77.00 | 95.70 | 104.00 | 103.24 | 208.00 | 202.50 | 124.00 | 115.90 | 128.00 | 156.00 |
| Leuprolide acetate suspnsion | J9217 | | 0.19% | 1.18% | Not Cred | 368.63 | 661.02 | 504.35 | 552.47 | 379.24 | Not Cred | 300.00 | 453.00 | 400.00 | 600.00 | 224.74 | Not Cred | 550.00 | 1,224.00 | 657.00 | 753.00 | 660.00 |
| Electro-uroflowmetry, first | 51741 | | 1.41% | 1.12% | Not Cred | 166.47 | 215.11 | 202.49 | 168.92 | 150.89 | Not Cred | 162.00 | 192.00 | 212.00 | 165.00 | 150.00 | Not Cred | 254.50 | 261.00 | 245.31 | 185.00 | 182.00 |
| Urine voiding pressure study | 51795 | 26 | 0.34% | 1.08% | Not Cred | Not Cred | 146.68 | 198.98 | 164.59 | No Data | Not Cred | Not Cred | 161.00 | 178.00 | 147.50 | No Data | Not Cred | Not Cred | 178.00 | 239.00 | 236.40 | No Data |
| Cystoscopy and treatment | 52310 | | 0.48% | 1.07% | Not Cred | Not Cred | 509.59 | 681.49 | 619.08 | 467.70 | Not Cred | Not Cred | 496.50 | 705.00 | 596.00 | 500.00 | Not Cred | Not Cred | 782.00 | 821.00 | 664.00 | 750.00 |
| Office consultation | 99245 | | 0.49% | 1.04% | 544.53 | 398.49 | 382.16 | 496.39 | 443.42 | 395.48 | 563.00 | 392.00 | 420.00 | 500.00 | 450.00 | 400.00 | 660.00 | 455.00 | 452.00 | 591.00 | 503.00 | 487.00 |
| Cystoscopy and treatment | 52281 | | 0.37% | 1.02% | Not Cred | Not Cred | Not Cred | 699.92 | 765.71 | Not Cred | Not Cred | Not Cred | Not Cred | 788.00 | 762.00 | Not Cred | Not Cred | Not Cred | Not Cred | 865.00 | 815.00 | Not Cred |
| Office/outpatient visit, est | 99215 | | 0.86% | 1.00% | 290.58 | 191.08 | 207.14 | 248.24 | 220.97 | 180.40 | 320.00 | 200.00 | 232.00 | 259.00 | 221.00 | 186.00 | 342.00 | 230.00 | 232.00 | 299.07 | 270.00 | 231.00 |
| Us urine capacity measure | 51798 | | 2.81% | 0.57% | 91.11 | 40.97 | 42.22 | 54.70 | 55.17 | 45.89 | 120.00 | 36.00 | 38.00 | 56.00 | 47.00 | 50.00 | 120.00 | 46.00 | 48.00 | 67.00 | 63.60 | 54.00 |
| Urinalysis, nonauto w/scope | 81000 | | 10.02% | 0.43% | 24.27 | 11.20 | 20.05 | 15.78 | 14.04 | 20.49 | 25.00 | 12.00 | 19.00 | 15.50 | 14.00 | 24.00 | 32.00 | 14.00 | 27.00 | 20.00 | 18.00 | 25.00 |
| Assay of psa, total | 84153 | | 1.40% | 0.35% | 65.76 | 58.92 | 75.35 | 60.17 | 66.33 | 80.63 | 54.00 | 50.00 | 80.00 | 51.40 | 55.10 | 71.50 | 115.00 | 75.00 | 80.00 | 72.00 | 89.00 | 114.00 |
| X-ray exam of abdomen | 74000 | 26 | 1.18% | 0.30% | 49.00 | 31.04 | 26.27 | 27.66 | 29.08 | 21.65 | 39.00 | 27.00 | 25.00 | 29.03 | 28.25 | 24.25 | 63.00 | 40.00 | 32.00 | 32.00 | 36.00 | 33.00 |
| Urinalysis, auto w/scope | 81001 | | 2.92% | 0.12% | 23.70 | 21.11 | 19.60 | 18.93 | 24.62 | 20.94 | 24.00 | 19.00 | 21.00 | 18.50 | 20.00 | 20.50 | 38.00 | 36.63 | 21.00 | 24.00 | 37.55 | 26.00 |
| Urinalysis nonauto w/o scope | 81002 | | 3.03% | 0.10% | 20.82 | 10.52 | 13.41 | 11.81 | 12.72 | 10.69 | 21.00 | 10.00 | 12.00 | 11.00 | 11.00 | 10.00 | 25.00 | 13.00 | 17.00 | 15.00 | 16.00 | 18.00 |
| Assay of urine creatinine | 82570 | | 1.34% | 0.09% | 35.32 | 25.13 | 25.46 | 21.81 | 26.78 | 27.95 | 30.00 | 24.00 | 25.00 | 18.22 | 25.00 | 25.00 | 44.15 | 35.74 | 25.00 | 25.00 | 35.74 | 39.00 |
| Urinalysis, auto, w/o scope | 81003 | | 2.88% | 0.09% | 12.77 | 13.76 | 13.72 | 16.47 | 14.73 | 16.96 | 3.28 | 13.50 | 13.00 | 14.00 | 11.00 | 17.50 | 24.00 | 20.00 | 13.00 | 31.00 | 22.96 | 24.09 |
| Routine venipuncture | 36415 | | 2.59% | 0.08% | 17.65 | 13.79 | 12.44 | 13.34 | 16.15 | 14.06 | 17.00 | 14.00 | 14.56 | 13.00 | 15.38 | 13.00 | 24.00 | 19.50 | 16.00 | 17.00 | 19.65 | 18.00 |

(1) Medicare fees are from CY2011 schedule.
(2) TRICARE fees are from the current schedules effective 8/1/2010.
(3) Alaska VA fees are from the 2010 schedule. All other states' VA fees are equal to Medicare (2011).
(4) Medicaid and workers' compensation fees are current as of 8/3/2011.
(5) Commercial allowed and billed are based off of CY2009 data.

For fee schedules that adjust payment based on place of service, payment is based on a non-facility claim