

0AREA 03 DESCRIPTION
 SPEC 00
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0	NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE	EHR LIMITING CHARGE**	PQRS LIMITING CHARGE***	EHR/2014 eRx LIMITING CHARGE**	EHR + PQRS LIMITING CHARGE****	EHR/2014 eRx + PQRS LIMITING CHARGE****
	#	G0460		208.28	197.87	227.55	220.72	223.00		216.30	
		G0460		137.24	130.38	149.94	145.44	146.94		142.53	
		71045		23.08	21.93	25.22	24.46	24.71		23.97	
		71045	TC	13.40	12.73	14.64	14.20	14.35		13.92	

0 ** END OF REPORT **
 0 # - THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING.
 0 ** - LIMITING CHARGE REDUCED BASED ON THE EHR NEGATIVE ADJUSTMENT PROGRAM.
 0 *** - LIMITING CHARGE REDUCED BASED ON THE PQRS NEGATIVE ADJUSTMENT PROGRAM.
 0 **** - LIMITING CHARGE REDUCED FOR EPS THAT ARE SUBJECT TO BOTH EHR AND PQRS
 NEGATIVE ADJUSTMENT PROGRAMS.
 0 LIMITING CHARGE APPLIES TO UNASSIGNED CLAIMS BY NON-PARTICIPATING PROVIDERS.
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0	NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE	EHR LIMITING CHARGE**	PQRS LIMITING CHARGE***	EHR/2014 eRx LIMITING CHARGE**	EHR + PQRS LIMITING CHARGE****	EHR/2014 eRx + PQRS LIMITING CHARGE****
		G0460		219.46	208.49	239.76	232.58	234.97		227.93	
	#	G0460		147.23	139.87	160.85	156.02	157.63		152.90	
		71045		23.89	22.70	26.11	25.32	25.59		24.82	
		71045	TC	13.89	13.20	15.18	14.72	14.88		14.42	

0 ** END OF REPORT **
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0AREA 99 UNKNOWN
 SPEC 00
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0	NOTE	PROCEDURE	MOD	PAR AMOUNT	NON-PAR AMOUNT	LIMITING CHARGE	EHR LIMITING CHARGE**	PQRS LIMITING CHARGE***	EHR/2014 eRx LIMITING CHARGE**	EHR + PQRS LIMITING CHARGE****	EHR/2014 eRx + PQRS LIMITING CHARGE****
	#	G0460		196.67	186.84	214.87	208.41	210.57		204.25	
		G0460		129.84	123.35	141.85	137.60	139.01		134.85	
		71045		21.85	20.76	23.87	23.16	23.39		22.70	
		71045	TC	12.48	11.86	13.64	13.23	13.36		12.96	

0 ** END OF REPORT **
 0 # - THESE AMOUNTS APPLY WHEN SERVICE IS PERFORMED IN A FACILITY SETTING.
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