

471-000-505 Nebraska Medicaid Practitioner Fee Schedule for Chiropractic Services

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CODE	MOD	PA	COMMENTS	COPAY	NON-FACILITY RATE	FACILITY RATE
000Q0487						
00072010					\$58.32	
00072010	52		SINGLE VIEW		\$29.16	
00072040					\$31.86	
00072040	52		SINGLE VIEW		\$15.93	
00072070					\$31.86	
00072070	52		SINGLE VIEW		\$15.93	
00072100					\$33.89	
00072100	52		SINGLE VIEW		\$16.95	
00098940				X	\$27.19	\$22.95
00098940	22		INITIAL VISIT ONLY		\$33.24	\$28.05
00098941				X	\$27.19	\$24.12

CODE	MOD	PA	COMMENTS	COPAY	NON-FACILITY RATE	FACILITY RATE
00098941	22		INITIAL VISIT ONLY		\$33.24	\$29.48
00098942				X	\$27.19	\$24.85
00098942	22		INITIAL VISIT ONLY		\$33.24	\$30.38