

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
 DIVISION OF COST ACCOUNTING AND REIMBURSEMENT
 LOCAL HEALTH DEPARTMENT
 CLINIC SERVICES

EFFECTIVE

7/1/2019

LHD: Queen Anne's County Department of Health
 SCHEDULE OF CHARGES

<u>CPT CODE</u>	<u>SERVICE DESCRIPTION</u>	<u>Total # of Rates Below</u>
		52

FAMILY PLANNING, COLPOSCOPY & STD Clinic and other office visits

- 11981 INSERT DRUG IMPLANT DEVICE
- 11982 REMOVE DRUG IMPLANT DEVICE
- 11983 REMOVE/INSERT DRUG IMPLANT
- 17110 DESTRUCTION OF FLAT WARTS
- 46900 DESTRUCTION OF ANAL LESIONS - SIMPLE, CHEMICAL
- 54050 DESTRUCTION OF LESION, PENIS, SIMPLE, CHEMICAL
- 56501 DESTROY VULVA LESIONS SIMPLE
- 56515 DESTROY VULVA LESIONS EXTENSIVE, CHEMICAL
- 57061 DESTROY VAGINA LESIONS SIMPLE, CHEMICAL
- 57065 DESTROYT VAGINA LESIONS EXTENSIVE, CHEMICAL
- 57170 DIAPHRAGM/CAP FITTING
- 57452 COLPOSCOPY, NO BIOPSY
- 57454 COLPOSCOPY, WITH BIOPSY
- 57456 COLPOSCOPY, WITH ENDOCERVICAL CURRETTAGE
- 57500 BIOPIY OF CERVIX
- 57505 COLPOSCOPY, ENDOSERVICAL CURETTAGE
- 57511 CRYOSURGERY
- 58300 IUD INSERTION
- 58301 IUD REMOVAL
- 99201 OFFICE VISIT-NEW MINIMAL
- 99202 OFFICE VISIT-NEW MODERATE
- 99203 OFFICE VISIT-NEW EXTENDED
- 99204 OFFICE VISIT-NEW COMPREHENSIVE
- 99205 OFFICE VISIT-NEW COMPLEX
- 99211 OFFICE VISIT-ESTABLISHED MINIMAL
- 99212 OFFICE VISIT-ESTABLISHED MODERATE
- 99213 OFFICE VISIT-ESTABLISHED EXTENDED
- 99214 OFFICE VISIT-ESTABLISHED COMPREHENSIVE
- 99215 OFFICE VISIT-ESTABLISHED COMPLEX
- 99383 PREV. VISIT, NEW AGE 5-11
- 99384 PREV. VISIT, NEW AGE 12-17
- 99385 PREV. VISIT, NEW AGE 18-39
- 99386 PREV. VISIT, NEW AGE 40-64
- 99393 PREV. VISIT, EST AGE 5-11
- 99394 PREV. VISIT, EST AGE 12-17
- 99395 PREV. VISIT, EST AGE 18-39
- 99396 PREV. VISIT, EST AGE 40-64
- 99401 PREVENTIVE COUNSELING, IND 15 MIN

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<u>ADDICTIONS OUTPATIENT</u>			
90785	Interactive Complexity Add On		
90801/90791	ASSESSMENT (H0001)		
90804/90832	INDIVIDUAL COUNSELING (16-37 MIN.) (H0004) (\$53/15 min.)		
90806/90834	INDIVIDUAL COUNSELING (38-52 MIN.) (H0004) (\$53/15 min)		
90808/90837	INDIVIDUAL COUNSELING (53 plus MIN.) (H0004) (\$53/15 min)		
96153	INTENSIVE OUTPATIENT (PER 15 MIN SESSION) (H0015)		
90847	PSYCHOTHERAPY FAMILY WITH PATIENT (H0004) (\$53/15 min)		
90853	GROUP PSYCHOTHERAPY (H0005)		
99408	Screening for Alcohol/Substance Abuse 15-30 min (H0049&G0396)		
99409	Screening for Alcohol/Substance Abuse >30 min (H0049&G0397)		
80100	Drug Testing - at cost from Lab - varies \$6-\$23		
80101	Drug Testing - at cost from Lab - varies \$6-\$24		
<u>HIV Targeted Case Management</u>			
S0315	HIV Targeted Case Management - Initial	\$	218.00
S0316	HIV Targeted Case Management - Ongoing 15 minute increments	\$	18.00
<u>IMMUNIZATIONS ADMINISTRATIVE FEES</u>			
90471	Imm Administration by injection 1 vaccine (single or combination)		
90472	Imm Administration by injection each additional vaccine		
90473	Imm Administration by intranasal or oral 1 vaccine		
90474	Imm Administration by intranasal or oral; each additional vaccine		
90460	Imm Administration with Counseling thru age 18; 1 vaccine		
90461	Imm Administration with Counseling thru age 18; each additional vaccine		
	Imm Administrative VFC/VFA CPT w/SE Modifier		

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<u>IMMUNIZATIONS - Prices vary - Current cost listed as of 1/1/19</u>			
90620	MenB	\$	152.00
90702SE	DT - no current cost, only VFC, bill adm fee with this CPT		\$21.00
90700SE	DTaP - no current cost, only VFC, bill adm fee with this CPT		\$21.00
90723SE	DTaP-HepB-IPV - no current cost, only VFC, bill adm fee with this CPT		\$21.00
90698SE	DTaP-HIB-IPV -no current cost, only VFC, bill adm fee with this CPT		\$21.00
90632	Hep A	\$	43.00
90633SE	Hep A - (Pediatric) no current cost, only VFC, bill adm fee with CPT		\$21.00
90633	Hep A - (Pediatric) no current cost, non-VFC		\$27.00
90636	Hep A & B Combination	\$	81.00
90746	Hep B	\$	44.00
90744 SE	Hep B (Pediatric), only VFC, bill adm fee with CPT	\$	21.00
90648SE	HIB -no current cost, only VFC, bill adm fee with this CPT		\$21.00
90649	4vHPV -Gardasil, not used lately, no updated cost		\$154.00
90651	9vHPV-Gardasil		\$193.00
90713	IPV	\$	31.00
90734	Menactra	\$	112.00
90733	Menomune, not used lately, no updated cost	\$	114.00
90734SE	Menveo, no current cost, only VFA, bill adm fee with this CPT	\$	21.00
90707	MMR	\$	74.00
90710SE	MMR Varicella -no current cost, only VFC, bill adm fee with this CPT		\$21.00
90670	Pevnar 13 Valent - Pneumococcal - non-VFC		\$177.00
90669SE	Pevnar 13 Valent -Pneumococcal -VFC, bill adm fee with this CPT		\$21.00
90732	Pneumovax Polyvalent 23 - Pneumococcal	\$	91.00
90375	Rabies ImmGlo, no updated costs	\$	701.00
90675	Rabies PreExp, Booster, & PostEx	\$	284.00
90680SE	Rotavirus - no current cost, only VFC, bill adm fee with this CPT		\$21.00
90750	Shingles (Zostavax) non-VFC	\$	145.00
90714	Td	\$	32.00
90715	Tdap (adacel)	\$	35.00
90716	Varicella	\$	127.00
60660	FluMist - live, intranasal	\$	-
90654	Flu - Influenza vac, preservative free, intradermal age 18-64	\$	-
90655	Flu - Influenza vac, trivalent, preservative free age 6-35 months, intramuscular	\$	-
90656	Flu - Influenza vac, trivalent, preservative free, 3 yrs and older, intramuscular	\$	-
90657	Flu - Influenza vac, trivalent, 6-35 months, intramuscular	\$	-
90658	Flu - Influenza vac, trivalent, 3 years and older, intramuscular	\$	-
90662	Flu - Influenza vac, preservative free, Enhanced, HighDose intramuscular	\$	-
90672	FluMist - quadrivalent, intranasal	\$	-
90685	Flu - Influenza vac, quadrivalent, preservative free, 6-35 months, intramuscular	\$	-
90686	Flu - Influenza vac, quadrivalent, preservative free, 3 yrs and older, intramuscul	\$	-
90687	Flu - Influenza vac, quadrivalent, 6-35 months, intramuscular	\$	-
90688	Flu - Influenza vac, quadrivalent, 3 years and older, intramuscular	\$	-

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<u>DRUGS AND MEDICATIONS</u>			
J1050	Depo-Provera	\$	7.00
J7300	IUD-Paragard-Special Contraceptive	\$	195.00
J7302	IUD-Mirena-Special Contraceptive	\$	298.00
J7303	NuvaRing (per NuvaRing)	\$	15.00
J7307	Implanon, no current cost as not used	\$	285.00
J7307	Nexplanon	\$	391.00
99070	Supplies and Materials provided during visit by provider-to specify - at costs		\$0.00
99071	Educational Materials provided by provider-to specify - at costs		\$0.00

ALL LAB, VACCINES, AND DRUGS CHARGED ACCORDING TO COSTS TO LHD VARIES BY COSTS

Labs below charged for in-house services not in clinic and/or not related to TB contract case investigation

- 36415 Venipuncture (blood draws including titers)
- 81000 Urinalysis-by dipstick or tablet reagent (glucose & total protein)
- 81025 Pregnancy Test - (Urine HCG)
- 82565 Serum Creatinine
- 82575 Calculated Creatinine Clearance
- 83986 pH test of a body fluid
- 85018 Blood Count-Hemoglobin
- 86580 Tuberculin Skin Test - PPD (not related to active TB Diagnosis and Treatment)
- 86592 STD Test (Lab Blood Draw)
- 86694 Herpes Antibodies
- 87205 Smear with interpretation
- 87210 Smear-wet mount
- 87491 Chlamydia, DNA/RNA; direct/amplified
- 87591 Gonorrhea, DNA/RNA; direct/amplified/quantification
- 87621 HPV Test - at cost from LAB
- 88076 Hepatic Functions (Liver func) - at cost from LAB
- 88142 Pap-Thin Prep Smear - at cost from LAB
- 80076 Hepatic Functions (Liver Function)