HCPCS ATT 11 TOS 4 - HOSPITAL OUTPATIENT RADIOLOGY
(proposed to be effective January 1, 2018)

TOS*	Procedure code	Modifier**	Long Description **	Age Range	Current Fee	***Proposed Medicaid Fee
4	71045		**	0-999	Not a Benefit	$21.39
4	71046		**	0-999	Not a Benefit	$26.40
4	71047		**	0-999	Not a Benefit	$30.74
4	71048		**	0-999	Not a Benefit	$39.43
4	74018		**	0-999	Not a Benefit	$20.80
4	74019		**	0-999	Not a Benefit	$32.39
4	74021		**	0-999	Not a Benefit	$35.41

*Type of Service (TOS)	
4	Radiology

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