

ATTACHMENT 1 - Comprehensive Care Program Provider

TOS*	Procedure Code	Long Description	Age Range	Current Medicaid Fee	Proposed Medicaid RVU**	Proposed Medicaid Con-version Factor	Proposed Medicaid Fee
1	97802	***	0-999	\$17.18	0.78	\$27.276	\$21.28
1	97803	***	0-999	\$14.32	0.67	\$27.276	\$18.27
1	97804	***	0-999	\$9.74	0.36	\$27.276	\$9.82

*Type of Service (TOS)

1	Medical Services
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** Relative Value Unit

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