

HCPCS Attachment 4 - TOS 4 Hospital Diagnostic Imaging (Proposed to be effective January 1,2021)

|      |                   |                  |          |           |   |  | CURRENT                 |                                     | 1/1/2021                 |                                      | Percent<br>Change<br>from<br>Current<br>Medicaid<br>Fee |
|------|-------------------|------------------|----------|-----------|---|--|-------------------------|-------------------------------------|--------------------------|--------------------------------------|---|
| TOS* | Procedure<br>Code | Long Description | Modifier | Age Range | Non-<br>Facility<br>(N)/<br>Facility<br>(F) | Provider<br>Type/<br>Provider<br>Specialty | Current<br>Medicaid Fee | Current<br>Adjusted<br>Medicaid Fee | Proposed<br>Medicaid Fee | Proposed<br>Adjusted<br>Medicaid Fee |   |
| 4    | 71271             | **               |          | 0-999     | F   | HOSP                                       | Not a Benefit           | Not a Benefit                       | \$80.90                  | \$80.90                              | 100.00%   |
| 4    | 71271             | **               | RHMG     | 0-999     | F   | HOSP                                       | Not a Benefit           | Not a Benefit                       | \$51.94                  | \$51.94                              | 100.00%   |

| *Type of Service (TOS) |                        |
|------------------------|------------------------|
| 4                      | Radiology              |
| Provider Type          |                        |
| HOSP                   | Hospital               |
| Modifier Group         |                        |
| RHMG                   | Rural Hospital Imaging |

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