

HCPCS Attachment 2 - TOS 1 Non-Drugs - (Proposed to be effective January 1, 2021)

TOS*	Procedure Code	Long Description	Age Range	Non-Facility (N)/ Facility (F)	Provider Type/ Provider Specialty	CURRENT		1/1/2021		Percent Change from Current Medicaid Fee
						Current Medicaid Fee	Current Adjusted Medicaid Fee	Proposed Medicaid Fee	Proposed Adjusted Medicaid Fee	
1	92229	**	0-20	N/F		Not a Benefit	Not a Benefit	\$13.47	\$13.47	100.00%
1	92229	**	21-999	N/F		Not a Benefit	Not a Benefit	\$12.83	\$12.83	100.00%
1	99417	**	0-20	N		Not a Benefit	Not a Benefit	\$13.74	\$13.74	100.00%
1	99417	**	0-20	F		Not a Benefit	Not a Benefit	\$12.39	\$12.39	100.00%
1	99417	**	21-999	N		Not a Benefit	Not a Benefit	\$13.74	\$13.74	100.00%
1	99417	**	21-999	F		Not a Benefit	Not a Benefit	\$12.39	\$12.39	100.00%

*Type of Service (TOS)	
1	Medical Services

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