Annual HCPCS Attachment D(7) - TOS F Ambulatory Surgical Center (Proposed to be effective January 1, 2023)

						Current		1/1/2023		
TOS*	Procedure Code	Long Description	Age Range	Non-Facility (N)/ Facility (F)	Provider Type / Provider Specialty	Current Medicaid Fee	Current Adjusted Medicaid Fee	Medicaid Fee	Adjusted Medicaid Fee	Percent Change from Current Medicaid Fee
F	30469	**	0-999	F	51,52	$2,843.09	$2,843.09	$2,843.09	$2,843.09	0.00%
F	33900	**	0-999	F	51,52	$5,338.09	$5,338.09	$5,338.09	$5,338.09	0.00%
F	33901	**	0-999	F	51,52	$5,338.09	$5,338.09	$5,338.09	$5,338.09	0.00%
F	33902	**	0-999	F	51,52	$5,338.09	$5,338.09	$5,338.09	$5,338.09	0.00%
F	33903	**	0-999	F	51,52	$5,338.09	$5,338.09	$5,338.09	$5,338.09	0.00%
F	36836	**	0-999	F	51,52	$1,939.15	$1,939.15	$1,939.15	$1,939.15	0.00%
F	36837	**	0-999	F	51,52	$1,939.15	$1,939.15	$1,939.15	$1,939.15	0.00%
F	49591	**	0-999	F	51,52	$1,151.54	$1,151.54	$1,151.54	$1,151.54	0.00%
F	49592	**	0-999	F	51,52	$1,151.54	$1,151.54	$1,151.54	$1,151.54	0.00%
F	49593	**	0-999	F	51,52	$1,151.54	$1,151.54	$1,151.54	$1,151.54	0.00%
F	49594	**	0-999	F	51,52	$1,151.54	$1,151.54	$1,151.54	$1,151.54	0.00%
F	49595	**	0-999	F	51,52	$1,151.54	$1,151.54	$1,151.54	$1,151.54	0.00%
F	49613	**	0-999	F	51,52	$1,888.85	$1,888.85	$1,888.85	$1,888.85	0.00%
F	49614	**	0-999	F	51,52	$1,888.85	$1,888.85	$1,888.85	$1,888.85	0.00%
F	49615	**	0-999	F	51,52	$1,888.85	$1,888.85	$1,888.85	$1,888.85	0.00%
F	69728	**	0-999	F	51,52	$1,088.27	$1,088.27	$1,088.27	$1,088.27	0.00%
F	69729	**	0-999	F	51,52	$6,263.30	$6,263.30	$6,263.30	$6,263.30	0.00%
F	69730	**	0-999	F	51,52	$6,263.30	$6,263.30	$6,263.30	$6,263.30	0.00%

*Type of Service (TOS)	
F	Ambulatory Surgical Center
RVU	Relative Value Unit
Provider Type/Provider Specialty	
51	Ambulatory Surgical Center Freestanding/ Independent
52	Ambulatory Surgical Center Hospital Based

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