

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
10004		A	ZZZ	N	N	D	N	N	\$ 29.40	\$ 34.70
10005		A	XXX	Y	N	D	N	N	\$ 49.89	\$ 88.69
10006		A	ZZZ	N	N	D	N	N	\$ 34.70	\$ 40.73
10007		A	XXX	Y	N	D	N	N	\$ 62.90	\$ 195.21
10008		A	ZZZ	N	N	D	N	N	\$ 40.01	\$ 104.35
10009		A	XXX	Y	N	D	N	N	\$ 76.64	\$ 297.15
10010		A	ZZZ	N	N	D	N	N	\$ 55.67	\$ 176.89
10011		C	XXX	Y	N	D	N	N	\$ -	\$ -
10012		C	ZZZ	N	N	D	N	N	\$ -	\$ -
10021		A	XXX	Y	N	D	N	N	\$ 38.08	\$ 67.24
10030		A	000	Y	N	D	N	N	\$ 93.27	\$ 415.24
10035		A	000	Y	Y	D	N	N	\$ 57.84	\$ 267.03
10036		A	ZZZ	N	N	D	N	N	\$ 29.64	\$ 226.54
10040		A	010	Y	N	N	N	N	\$ 35.43	\$ 74.71
10060		A	010	Y	N	N	N	N	\$ 67.48	\$ 80.25
10061		A	010	Y	N	N	N	N	\$ 121.22	\$ 139.30
10080		A	010	Y	N	N	N	N	\$ 69.17	\$ 155.45
10081		A	010	Y	N	N	N	N	\$ 116.40	\$ 218.59
10120		A	010	Y	N	N	N	N	\$ 68.20	\$ 98.33
10121		A	010	Y	N	N	N	N	\$ 124.36	\$ 177.62
10140		A	010	Y	N	N	N	N	\$ 78.57	\$ 111.58
10160		A	010	Y	N	N	N	N	\$ 62.90	\$ 84.59
10180		A	010	Y	N	N	N	N	\$ 119.78	\$ 172.56
11000		A	000	Y	N	N	N	N	\$ 19.28	\$ 37.36
11001		A	ZZZ	N	N	N	N	N	\$ 10.12	\$ 16.63
11004		A	000	Y	N	N	N	N	\$ 399.10	\$ 399.10
11005		A	000	N	N	D	N	N	\$ 547.55	\$ 547.55
11006		A	000	Y	N	N	N	N	\$ 491.88	\$ 491.88
11008		A	ZZZ	N	N	D	N	N	\$ 192.56	\$ 192.56
11010		A	010	Y	B	N	N	N	\$ 186.29	\$ 307.52
11011		A	000	Y	B	N	N	N	\$ 205.57	\$ 343.18
11012		A	000	Y	B	N	N	N	\$ 286.07	\$ 441.99
11042		A	000	Y	N	N	N	N	\$ 40.97	\$ 83.63
11043		A	000	Y	N	N	N	N	\$ 106.04	\$ 155.20
11044		A	000	Y	N	N	N	N	\$ 155.20	\$ 208.71
11045		A	ZZZ	N	N	D	N	N	\$ 18.32	\$ 27.47
11046		A	ZZZ	N	N	D	N	N	\$ 38.80	\$ 50.13
11047		A	ZZZ	N	N	D	N	N	\$ 67.96	\$ 83.15
11055		A	000	Y	N	N	N	N	\$ 11.33	\$ 43.86
11056		A	000	Y	N	N	N	N	\$ 15.42	\$ 50.61
11057		A	000	Y	N	N	N	N	\$ 20.00	\$ 55.91
11102		A	000	Y	N	N	N	N	\$ 25.31	\$ 65.79

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
11103		A	ZZZ	N	N	N	N	N	\$ 14.94	\$ 33.74
11104		A	000	Y	N	N	N	N	\$ 32.05	\$ 82.66
11105		A	ZZZ	N	N	N	N	N	\$ 17.35	\$ 39.04
11106		A	000	Y	N	N	N	N	\$ 39.04	\$ 100.98
11107		A	ZZZ	N	N	N	N	N	\$ 20.97	\$ 46.51
11200		A	010	Y	N	N	N	N	\$ 48.68	\$ 58.08
11201		A	ZZZ	N	N	N	N	N	\$ 11.33	\$ 12.53
11300		A	000	Y	N	D	N	N	\$ 22.65	\$ 65.07
11301		A	000	Y	N	D	N	N	\$ 34.70	\$ 79.53
11302		A	000	Y	N	D	N	N	\$ 40.73	\$ 90.86
11303		A	000	Y	N	D	N	N	\$ 48.20	\$ 100.50
11305		A	000	Y	N	D	N	N	\$ 26.03	\$ 68.93
11306		A	000	Y	N	D	N	N	\$ 33.74	\$ 80.25
11307		A	000	Y	N	D	N	N	\$ 43.14	\$ 93.03
11308		A	000	Y	N	D	N	N	\$ 49.65	\$ 99.53
11310		A	000	Y	N	D	N	N	\$ 31.09	\$ 75.67
11311		A	000	Y	N	D	N	N	\$ 42.90	\$ 90.13
11312		A	000	Y	N	D	N	N	\$ 50.61	\$ 102.91
11313		A	000	Y	N	D	N	N	\$ 64.83	\$ 119.78
11400		A	010	Y	N	N	N	N	\$ 53.98	\$ 82.42
11401		A	010	Y	N	N	N	N	\$ 68.69	\$ 100.98
11402		A	010	Y	N	N	N	N	\$ 76.16	\$ 111.82
11403		A	010	Y	N	N	N	N	\$ 97.61	\$ 129.42
11404		A	010	Y	N	N	N	N	\$ 108.45	\$ 147.73
11406		A	010	Y	N	N	N	N	\$ 167.01	\$ 212.56
11420		A	010	Y	N	N	N	N	\$ 53.74	\$ 82.90
11421		A	010	Y	N	N	N	N	\$ 71.82	\$ 104.11
11422		A	010	Y	N	N	N	N	\$ 88.69	\$ 117.61
11423		A	010	Y	N	N	N	N	\$ 102.67	\$ 134.48
11424		A	010	Y	N	N	N	N	\$ 118.09	\$ 155.20
11426		A	010	Y	N	N	N	N	\$ 184.85	\$ 224.85
11440		A	010	Y	N	N	N	N	\$ 67.00	\$ 92.06
11441		A	010	Y	N	N	N	N	\$ 85.80	\$ 113.03
11442		A	010	Y	N	N	N	N	\$ 95.20	\$ 125.80
11443		A	010	Y	N	N	N	N	\$ 117.61	\$ 150.14
11444		A	010	Y	N	N	N	N	\$ 150.63	\$ 188.46
11446		A	010	Y	N	N	N	N	\$ 215.45	\$ 258.83
11450		A	090	Y	Y	N	N	N	\$ 174.00	\$ 281.01
11451		A	090	Y	Y	D	N	N	\$ 222.44	\$ 347.04
11462		A	090	Y	Y	D	N	N	\$ 164.60	\$ 271.13
11463		A	090	Y	Y	D	N	N	\$ 223.17	\$ 350.17
11470		A	090	Y	N	N	N	N	\$ 190.87	\$ 296.91

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
11471		A	090	Y	N	D	N	N	\$ 236.42	\$ 359.81
11600		A	010	Y	N	N	N	N	\$ 80.98	\$ 129.66
11601		A	010	Y	N	N	N	N	\$ 98.33	\$ 149.90
11602		A	010	Y	N	N	N	N	\$ 106.52	\$ 160.27
11603		A	010	Y	N	N	N	N	\$ 127.73	\$ 182.92
11604		A	010	Y	N	N	N	N	\$ 142.19	\$ 204.85
11606		A	010	Y	N	N	N	N	\$ 214.25	\$ 296.19
11620		A	010	Y	N	N	N	N	\$ 81.22	\$ 130.14
11621		A	010	Y	N	N	N	N	\$ 98.57	\$ 150.38
11622		A	010	Y	N	N	N	N	\$ 111.34	\$ 165.33
11623		A	010	Y	N	N	N	N	\$ 139.54	\$ 195.21
11624		A	010	Y	N	N	N	N	\$ 159.06	\$ 222.44
11626		A	010	Y	N	N	N	N	\$ 198.10	\$ 270.88
11640		A	010	Y	N	N	N	N	\$ 83.39	\$ 133.03
11641		A	010	Y	N	N	N	N	\$ 102.67	\$ 155.20
11642		A	010	Y	N	N	N	N	\$ 120.50	\$ 175.93
11643		A	010	Y	N	N	N	N	\$ 152.07	\$ 208.47
11644		A	010	Y	N	N	N	N	\$ 189.91	\$ 257.87
11646		A	010	Y	N	N	N	N	\$ 264.62	\$ 338.12
11719		A	000	Y	N	N	N	N	\$ 5.06	\$ 9.16
11720		A	000	N	N	N	N	N	\$ 10.36	\$ 21.45
11721		A	000	N	N	N	N	N	\$ 16.63	\$ 29.16
11730		A	000	Y	N	N	N	N	\$ 36.87	\$ 75.19
11732		A	ZZZ	N	N	N	N	N	\$ 12.29	\$ 22.41
11740		A	000	Y	N	N	N	N	\$ 20.49	\$ 35.67
11750		A	010	Y	N	N	N	N	\$ 67.72	\$ 105.32
11755		A	000	Y	N	D	N	N	\$ 41.93	\$ 82.18
11760		A	010	Y	N	N	N	N	\$ 75.92	\$ 126.04
11762		A	010	Y	N	N	N	N	\$ 127.73	\$ 193.28
11765		A	010	Y	N	N	N	N	\$ 60.73	\$ 108.21
11770		A	010	Y	N	N	N	N	\$ 127.49	\$ 227.99
11771		A	090	Y	N	N	N	N	\$ 303.42	\$ 416.45
11772		A	090	Y	N	N	N	N	\$ 395.96	\$ 512.61
11900		A	000	Y	N	N	N	N	\$ 20.24	\$ 36.39
11901		A	000	Y	N	N	N	N	\$ 31.33	\$ 46.03
11920		Not Covered	000	Y	N	D	N	N	\$ 74.23	\$ 125.32
11921		Not Covered	000	Y	N	D	N	N	\$ 88.21	\$ 143.15
11922		Not Covered	ZZZ	N	N	D	N	N	\$ 20.24	\$ 39.04
11950		Not Covered	000	Y	N	D	N	N	\$ 35.67	\$ 52.78
11951		Not Covered	000	Y	N	D	N	N	\$ 49.89	\$ 70.61
11952		Not Covered	000	Y	N	D	N	N	\$ 70.61	\$ 95.20
11954		Not Covered	000	Y	N	D	N	N	\$ 77.60	\$ 104.84

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
11960		A	090	Y	N	N	N	N	\$ 675.28	\$ 675.28
11970		A	090	Y	Y	N	N	N	\$ 377.65	\$ 377.65
11971		A	090	Y	Y	D	N	N	\$ 366.56	\$ 366.56
11976		A	000	Y	N	D	N	N	\$ 64.59	\$ 96.40
11980		A	000	Y	N	N	N	N	\$ 38.56	\$ 62.42
11981		A	000	Y	N	D	N	N	\$ 44.34	\$ 68.69
11982		A	000	Y	N	D	N	N	\$ 52.06	\$ 77.84
11983		A	000	Y	N	D	N	N	\$ 71.82	\$ 97.12
12001		A	000	Y	N	N	N	N	\$ 31.09	\$ 61.21
12002		A	000	Y	N	N	N	N	\$ 41.21	\$ 74.71
12004		A	000	Y	N	N	N	N	\$ 51.33	\$ 87.24
12005		A	000	Y	N	N	N	N	\$ 67.96	\$ 117.37
12006		A	000	Y	N	N	N	N	\$ 82.90	\$ 137.13
12007		A	000	Y	N	N	D	N	\$ 103.15	\$ 157.13
12011		A	000	Y	N	N	N	N	\$ 39.04	\$ 74.47
12013		A	000	Y	N	N	N	N	\$ 41.45	\$ 77.84
12014		A	000	Y	N	N	N	N	\$ 53.26	\$ 95.44
12015		A	000	Y	N	N	N	N	\$ 67.48	\$ 115.44
12016		A	000	Y	N	N	N	N	\$ 91.58	\$ 147.49
12017		A	000	Y	N	D	N	N	\$ 108.93	\$ 108.93
12018		A	000	Y	N	Y	N	N	\$ 123.63	\$ 123.63
12020		A	010	Y	N	N	N	N	\$ 127.01	\$ 197.14
12021		A	010	Y	N	N	N	N	\$ 93.75	\$ 115.68
12031		A	010	Y	N	N	N	N	\$ 99.77	\$ 169.91
12032		A	010	Y	N	N	N	N	\$ 124.36	\$ 198.10
12034		A	010	Y	N	N	N	N	\$ 137.13	\$ 218.35
12035		A	010	Y	N	N	N	N	\$ 163.40	\$ 259.56
12036		A	010	Y	N	N	N	N	\$ 192.80	\$ 288.72
12037		A	010	Y	N	D	D	N	\$ 224.61	\$ 324.63
12041		A	010	Y	N	N	N	N	\$ 96.64	\$ 170.87
12042		A	010	Y	N	N	N	N	\$ 129.42	\$ 201.24
12044		A	010	Y	N	N	N	N	\$ 143.15	\$ 248.71
12045		A	010	Y	N	N	N	N	\$ 180.99	\$ 267.99
12046		A	010	Y	N	D	N	N	\$ 216.18	\$ 333.79
12047		A	010	Y	N	Y	D	N	\$ 241.72	\$ 366.32
12051		A	010	Y	N	N	N	N	\$ 111.58	\$ 183.40
12052		A	010	Y	N	N	N	N	\$ 132.31	\$ 205.09
12053		A	010	Y	N	N	N	N	\$ 143.88	\$ 239.55
12054		A	010	Y	N	N	N	N	\$ 147.97	\$ 254.01
12055		A	010	Y	N	N	N	N	\$ 202.20	\$ 332.34
12056		A	010	Y	N	D	N	N	\$ 259.08	\$ 383.43
12057		A	010	Y	N	Y	D	N	\$ 284.62	\$ 408.01

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
13100		A	010	Y	N	N	N	N	\$ 134.24	\$ 224.85
13101		A	010	Y	N	N	N	N	\$ 165.57	\$ 262.21
13102		A	ZZZ	N	N	N	N	N	\$ 49.41	\$ 78.57
13120		A	010	Y	N	N	N	N	\$ 154.96	\$ 234.01
13121		A	010	Y	N	N	N	N	\$ 172.56	\$ 281.49
13122		A	ZZZ	N	N	N	N	N	\$ 56.64	\$ 85.56
13131		A	010	Y	N	N	N	N	\$ 162.43	\$ 256.67
13132		A	010	Y	N	N	N	N	\$ 202.20	\$ 311.61
13133		A	ZZZ	N	N	N	N	N	\$ 85.56	\$ 113.51
13151		A	010	Y	N	N	N	N	\$ 186.78	\$ 280.28
13152		A	010	Y	N	N	N	N	\$ 225.58	\$ 330.89
13153		A	ZZZ	N	N	N	N	N	\$ 93.75	\$ 125.08
13160		A	090	Y	N	N	N	N	\$ 542.01	\$ 542.01
14000		A	090	Y	N	N	N	N	\$ 331.13	\$ 414.04
14001		A	090	Y	N	N	N	N	\$ 434.28	\$ 531.65
14020		A	090	Y	N	N	N	N	\$ 370.66	\$ 455.97
14021		A	090	Y	N	N	N	N	\$ 467.78	\$ 565.87
14040		A	090	Y	N	N	N	N	\$ 410.91	\$ 495.50
14041		A	090	Y	N	N	N	N	\$ 503.45	\$ 603.95
14060		A	090	Y	N	N	N	N	\$ 437.17	\$ 503.21
14061		A	090	Y	N	N	N	N	\$ 540.08	\$ 649.98
14301		A	090	Y	N	Y	N	N	\$ 581.77	\$ 717.22
14302		A	ZZZ	N	N	Y	N	N	\$ 148.94	\$ 148.94
14350		A	090	Y	N	D	N	N	\$ 457.42	\$ 457.42
15002		A	000	N	N	D	N	N	\$ 151.35	\$ 234.01
15003		A	ZZZ	N	N	D	N	N	\$ 31.57	\$ 47.96
15004		A	000	N	N	D	N	N	\$ 179.30	\$ 265.58
15005		A	ZZZ	N	N	D	N	N	\$ 63.14	\$ 81.22
15040		A	000	N	N	N	N	N	\$ 85.31	\$ 176.17
15050		A	090	Y	N	N	N	N	\$ 306.79	\$ 391.63
15100		A	090	Y	N	N	N	N	\$ 482.24	\$ 580.33
15101		A	ZZZ	N	N	N	N	N	\$ 76.88	\$ 126.04
15110		A	090	Y	N	N	N	N	\$ 479.11	\$ 555.51
15111		A	ZZZ	N	N	N	N	N	\$ 71.34	\$ 78.08
15115		A	090	Y	N	N	N	N	\$ 471.64	\$ 545.62
15116		A	ZZZ	N	N	N	D	N	\$ 103.39	\$ 112.31
15120		A	090	Y	N	N	N	N	\$ 464.41	\$ 564.18
15121		A	ZZZ	N	N	N	D	N	\$ 92.54	\$ 141.47
15130		A	090	Y	N	N	N	N	\$ 398.13	\$ 479.59
15131		A	ZZZ	N	N	N	D	N	\$ 61.94	\$ 66.52
15135		A	090	Y	N	N	N	N	\$ 505.14	\$ 582.50
15136		A	ZZZ	N	N	N	D	N	\$ 61.94	\$ 65.79

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
15150		A	090	Y	N	N	N	N	\$ 441.27	\$ 485.62
15151		A	ZZZ	N	N	N	N	N	\$ 77.36	\$ 83.39
15152		A	ZZZ	N	N	N	N	N	\$ 97.36	\$ 102.91
15155		A	090	Y	N	N	N	N	\$ 492.36	\$ 536.71
15156		A	ZZZ	N	N	N	D	N	\$ 107.00	\$ 112.79
15157		A	ZZZ	N	N	N	D	N	\$ 116.89	\$ 125.08
15200		A	090	Y	N	N	N	N	\$ 448.74	\$ 554.30
15201		A	ZZZ	N	N	N	N	N	\$ 53.50	\$ 96.40
15220		A	090	Y	N	N	N	N	\$ 403.19	\$ 504.17
15221		A	ZZZ	N	N	N	N	N	\$ 47.96	\$ 88.45
15240		A	090	Y	N	N	N	N	\$ 523.69	\$ 609.73
15241		A	ZZZ	N	N	N	N	N	\$ 72.30	\$ 116.89
15260		A	090	Y	N	N	N	N	\$ 555.99	\$ 653.11
15261		A	ZZZ	N	N	N	N	N	\$ 92.54	\$ 137.37
15271		A	000	Y	N	N	N	N	\$ 57.60	\$ 100.98
15272		A	ZZZ	N	N	N	N	N	\$ 11.81	\$ 16.87
15273		A	000	Y	N	N	N	N	\$ 137.37	\$ 210.88
15274		A	ZZZ	N	N	N	N	N	\$ 31.33	\$ 54.47
15275		A	000	Y	N	N	N	N	\$ 64.59	\$ 105.08
15276		A	ZZZ	N	N	N	N	N	\$ 17.35	\$ 21.93
15277		A	000	Y	N	N	D	N	\$ 155.69	\$ 230.88
15278		A	ZZZ	N	N	N	D	N	\$ 39.28	\$ 64.11
15570		A	090	Y	N	N	N	N	\$ 493.09	\$ 606.60
15572		A	090	Y	N	N	N	N	\$ 491.88	\$ 582.02
15574		A	090	Y	N	N	N	N	\$ 492.85	\$ 582.74
15576		A	090	Y	N	N	N	N	\$ 436.45	\$ 522.25
15600		A	090	Y	N	D	N	N	\$ 136.89	\$ 216.90
15610		A	090	Y	N	D	N	N	\$ 158.82	\$ 237.14
15620		A	090	Y	N	N	N	N	\$ 213.53	\$ 289.44
15630		A	090	Y	N	N	N	N	\$ 223.65	\$ 298.60
15650		A	090	Y	N	D	N	N	\$ 250.16	\$ 330.17
15730		A	090	Y	N	N	D	N	\$ 610.94	\$ 965.21
15731		A	090	Y	N	D	N	N	\$ 667.81	\$ 746.86
15733		A	090	Y	N	N	D	N	\$ 698.42	\$ 698.42
15734		A	090	Y	N	Y	D	N	\$ 1,030.76	\$ 1,030.76
15736		A	090	Y	N	N	D	N	\$ 824.22	\$ 824.22
15738		A	090	Y	N	Y	D	N	\$ 873.14	\$ 873.14
15740		A	090	Y	N	N	N	N	\$ 557.43	\$ 662.03
15750		A	090	Y	N	Y	N	N	\$ 626.12	\$ 626.12
15756		A	090	Y	N	Y	Y	N	\$ 1,555.17	\$ 1,555.17
15757		A	090	Y	N	Y	Y	N	\$ 1,547.70	\$ 1,547.70
15758		A	090	Y	N	Y	Y	N	\$ 1,552.28	\$ 1,552.28

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
15760		A	090	Y	N	N	N	N	\$ 466.34	\$ 557.92
15769		A	090	Y	N	N	N	N	\$ 323.18	\$ 323.18
15770		A	090	Y	N	Y	D	N	\$ 445.13	\$ 445.13
15771		A	090	Y	N	N	N	N	\$ 321.25	\$ 381.02
15772		A	ZZZ	N	N	N	N	N	\$ 96.64	\$ 121.22
15773		Not Covered	090	Y	N	N	N	N	\$ 324.39	\$ 384.15
15774		Not Covered	ZZZ	N	N	N	N	N	\$ 92.79	\$ 117.37
15775		Not Covered	000	Y	N	D	N	N	\$ 174.00	\$ 249.92
15776		Not Covered	000	Y	N	D	N	N	\$ 239.07	\$ 340.05
15777		A	ZZZ	N	Y	N	N	N	\$ 148.22	\$ 148.22
15780		Not Covered	090	Y	N	D	N	N	\$ 435.97	\$ 560.33
15781		Not Covered	090	Y	N	N	N	N	\$ 282.93	\$ 357.16
15782		Not Covered	090	Y	N	D	N	N	\$ 247.03	\$ 330.17
15783		Not Covered	090	Y	N	D	N	N	\$ 231.60	\$ 295.47
15786		Not Covered	010	Y	N	N	N	N	\$ 88.69	\$ 154.24
15787		Not Covered	ZZZ	N	N	N	N	N	\$ 11.57	\$ 23.14
15788		Not Covered	090	Y	N	N	N	N	\$ 142.19	\$ 261.97
15789		Not Covered	090	Y	N	N	N	N	\$ 266.06	\$ 346.56
15792		Not Covered	090	Y	N	D	N	N	\$ 140.26	\$ 228.95
15793		Not Covered	090	Y	N	D	N	N	\$ 229.43	\$ 307.52
15819		A	090	Y	N	D	N	N	\$ 535.02	\$ 535.02
15820		Not Covered	090	Y	Y	D	N	N	\$ 334.03	\$ 373.31
15821		Not Covered	090	Y	Y	D	N	N	\$ 358.37	\$ 401.27
15822		Not Covered	090	Y	Y	N	N	N	\$ 259.56	\$ 298.60
15823		A	090	Y	Y	N	N	N	\$ 359.09	\$ 402.71
15824		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15825		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15826		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15828		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15829		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15830		A	090	Y	N	Y	D	N	\$ 796.51	\$ 796.51
15832		Not Covered	090	Y	Y	Y	D	N	\$ 619.37	\$ 619.37
15833		Not Covered	090	Y	Y	D	N	N	\$ 588.76	\$ 588.76
15834		Not Covered	090	Y	Y	D	N	N	\$ 599.61	\$ 599.61
15835		Not Covered	090	Y	N	D	N	N	\$ 627.32	\$ 627.32
15836		Not Covered	090	Y	Y	D	N	N	\$ 513.09	\$ 513.09
15837		Not Covered	090	Y	N	D	N	N	\$ 481.04	\$ 575.27
15838		Not Covered	090	Y	N	D	N	N	\$ 431.87	\$ 431.87
15839		Not Covered	090	Y	N	D	N	N	\$ 499.35	\$ 594.79
15840		A	090	Y	N	N	N	N	\$ 680.34	\$ 680.34
15841		A	090	Y	N	Y	D	N	\$ 1,205.72	\$ 1,205.72
15842		A	090	Y	N	Y	D	N	\$ 1,838.59	\$ 1,838.59

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
15845		A	090	Y	N	Y	N	N	\$ 667.33	\$ 667.33
15847		Not Covered	YYY	N	N	Y	D	N	\$ -	\$ -
15850		B	XXX	N	N	N	N	N	\$ 26.51	\$ 59.53
15851		A	000	Y	N	N	N	N	\$ 31.33	\$ 69.41
15852		A	000	Y	N	N	N	N	\$ 32.29	\$ 32.29
15860		A	000	Y	N	D	N	N	\$ 73.99	\$ 73.99
15876		Not Covered	000	Y	N	D	N	N	\$ -	\$ -
15877		Not Covered	000	Y	N	D	N	N	\$ -	\$ -
15878		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15879		Not Covered	000	Y	Y	D	N	N	\$ -	\$ -
15920		A	090	Y	N	D	N	N	\$ 426.33	\$ 426.33
15922		A	090	Y	N	Y	D	N	\$ 532.61	\$ 532.61
15931		A	090	Y	N	N	N	N	\$ 482.72	\$ 482.72
15933		A	090	Y	N	D	N	N	\$ 588.52	\$ 588.52
15934		A	090	Y	N	N	N	N	\$ 645.88	\$ 645.88
15935		A	090	Y	N	Y	D	N	\$ 776.74	\$ 776.74
15936		A	090	Y	N	N	D	N	\$ 617.68	\$ 617.68
15937		A	090	Y	N	N	D	N	\$ 710.95	\$ 710.95
15940		A	090	Y	N	N	N	N	\$ 481.04	\$ 481.04
15941		A	090	Y	N	D	N	N	\$ 625.88	\$ 625.88
15944		A	090	Y	N	D	N	N	\$ 620.33	\$ 620.33
15945		A	090	Y	N	D	N	N	\$ 684.44	\$ 684.44
15946		A	090	Y	N	N	D	N	\$ 1,103.78	\$ 1,103.78
15950		A	090	Y	N	N	N	N	\$ 414.52	\$ 414.52
15951		A	090	Y	N	D	D	N	\$ 601.30	\$ 601.30
15952		A	090	Y	N	Y	D	N	\$ 615.03	\$ 615.03
15953		A	090	Y	N	N	D	N	\$ 677.45	\$ 677.45
15956		A	090	Y	N	N	D	N	\$ 794.82	\$ 794.82
15958		A	090	Y	N	N	D	N	\$ 803.98	\$ 803.98
15999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
16000		A	000	Y	N	N	N	N	\$ 31.57	\$ 49.41
16020		A	000	Y	N	N	N	N	\$ 36.87	\$ 55.19
16025		A	000	Y	N	N	N	N	\$ 74.71	\$ 102.67
16030		A	000	Y	N	N	N	N	\$ 89.17	\$ 128.45
16035		A	000	Y	N	N	N	N	\$ 134.48	\$ 134.48
16036		A	ZZZ	N	N	N	N	N	\$ 54.71	\$ 54.71
17000		A	010	Y	N	N	N	N	\$ 34.70	\$ 42.42
17003		A	ZZZ	N	N	N	N	N	\$ 1.45	\$ 4.10
17004		A	010	N	N	N	N	N	\$ 64.59	\$ 106.04
17106		A	090	Y	N	N	N	N	\$ 180.27	\$ 222.68
17107		A	090	Y	N	N	N	N	\$ 234.98	\$ 291.61
17108		A	090	Y	N	D	N	N	\$ 347.28	\$ 415.97

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
17110		A	010	Y	N	N	N	N	\$ 42.42	\$ 71.82
17111		A	010	Y	N	N	N	N	\$ 52.78	\$ 84.83
17250		A	000	Y	N	N	N	N	\$ 24.10	\$ 56.64
17260		A	010	Y	N	N	N	N	\$ 46.27	\$ 64.11
17261		A	010	Y	N	N	N	N	\$ 57.36	\$ 95.20
17262		A	010	Y	N	N	N	N	\$ 72.54	\$ 114.96
17263		A	010	Y	N	N	N	N	\$ 80.49	\$ 124.60
17264		A	010	Y	N	N	N	N	\$ 86.52	\$ 134.00
17266		A	010	Y	N	N	N	N	\$ 101.94	\$ 153.04
17270		A	010	Y	N	N	N	N	\$ 62.66	\$ 96.64
17271		A	010	Y	N	N	N	N	\$ 69.41	\$ 107.25
17272		A	010	Y	N	N	N	N	\$ 80.01	\$ 121.95
17273		A	010	Y	N	N	N	N	\$ 91.10	\$ 135.92
17274		A	010	Y	N	N	N	N	\$ 111.34	\$ 159.78
17276		A	010	Y	N	N	N	N	\$ 134.48	\$ 186.05
17280		A	010	Y	N	N	N	N	\$ 57.36	\$ 90.86
17281		A	010	Y	N	N	N	N	\$ 77.84	\$ 116.16
17282		A	010	Y	N	N	N	N	\$ 90.62	\$ 133.76
17283		A	010	Y	N	N	N	N	\$ 113.51	\$ 159.06
17284		A	010	Y	N	N	N	N	\$ 132.79	\$ 181.71
17286		A	010	Y	N	N	N	N	\$ 181.23	\$ 234.98
17311		A	000	Y	N	N	N	N	\$ 240.28	\$ 435.25
17312		A	ZZZ	N	N	N	N	N	\$ 127.49	\$ 262.45
17313		A	000	Y	N	N	N	N	\$ 215.21	\$ 407.29
17314		A	ZZZ	N	N	N	N	N	\$ 118.33	\$ 250.64
17315		A	ZZZ	N	N	N	N	N	\$ 33.98	\$ 50.61
17340		A	010	Y	N	N	N	N	\$ 33.02	\$ 34.95
17360		A	010	Y	N	N	N	N	\$ 61.46	\$ 80.98
17380		Not Covered	000	Y	N	D	N	N	\$ -	\$ -
17999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
19000		A	000	Y	N	N	N	N	\$ 29.88	\$ 69.17
19001		A	ZZZ	N	N	N	N	N	\$ 14.70	\$ 18.08
19020		A	090	Y	Y	N	N	N	\$ 210.15	\$ 314.99
19030		A	000	Y	Y	N	N	N	\$ 52.06	\$ 109.41
19081		A	000	Y	Y	D	N	N	\$ 113.03	\$ 362.71
19082		A	ZZZ	N	N	D	N	N	\$ 56.64	\$ 286.31
19083		A	000	Y	Y	D	N	N	\$ 107.00	\$ 362.46
19084		A	ZZZ	N	N	D	N	N	\$ 53.26	\$ 281.01
19085		A	000	Y	Y	D	N	N	\$ 123.63	\$ 551.41
19086		A	ZZZ	N	N	D	N	N	\$ 61.94	\$ 432.60
19100		A	000	Y	Y	N	N	N	\$ 49.16	\$ 103.63
19101		A	010	Y	Y	N	N	N	\$ 153.76	\$ 227.26

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
19105		A	000	Y	Y	N	N	N	\$ 148.70	\$ 1,674.23
19110		A	090	Y	Y	N	N	N	\$ 239.07	\$ 331.62
19112		A	090	Y	Y	D	N	N	\$ 216.42	\$ 310.41
19120		A	090	Y	Y	N	N	N	\$ 286.07	\$ 348.73
19125		A	090	Y	Y	N	D	N	\$ 317.88	\$ 385.36
19126		A	ZZZ	N	N	N	D	N	\$ 113.75	\$ 113.75
19281		A	000	Y	Y	D	N	N	\$ 67.72	\$ 157.86
19282		A	ZZZ	N	N	D	N	N	\$ 34.22	\$ 111.10
19283		A	000	Y	Y	D	N	N	\$ 68.93	\$ 174.00
19284		A	ZZZ	N	N	D	N	N	\$ 35.43	\$ 130.86
19285		A	000	Y	Y	D	N	N	\$ 58.08	\$ 269.20
19286		A	ZZZ	N	N	D	N	N	\$ 29.64	\$ 225.09
19287		A	000	Y	Y	D	N	N	\$ 86.52	\$ 460.79
19288		A	ZZZ	N	N	D	N	N	\$ 43.38	\$ 361.02
19294		Not Covered	ZZZ	N	N	D	N	N	\$ 116.40	\$ 116.40
19296		A	000	Y	Y	D	N	N	\$ 147.01	\$ 2,573.40
19297		A	ZZZ	N	N	D	N	N	\$ 67.48	\$ 67.48
19298		A	000	Y	Y	D	N	N	\$ 217.62	\$ 634.07
19300		A	090	Y	Y	N	N	N	\$ 288.96	\$ 382.95
19301		A	090	Y	Y	D	N	N	\$ 457.42	\$ 457.42
19302		A	090	Y	Y	Y	D	N	\$ 629.49	\$ 629.49
19303		A	090	Y	Y	Y	D	N	\$ 666.61	\$ 666.61
19305		A	090	Y	Y	Y	D	N	\$ 793.85	\$ 793.85
19306		A	090	Y	Y	Y	D	N	\$ 843.74	\$ 843.74
19307		A	090	Y	Y	Y	D	N	\$ 821.09	\$ 821.09
19316		A	090	Y	Y	Y	D	N	\$ 535.98	\$ 535.98
19318		A	090	Y	Y	Y	D	N	\$ 743.00	\$ 743.00
19325		A	090	Y	Y	D	N	N	\$ 412.35	\$ 412.35
19328		A	090	Y	Y	N	N	N	\$ 373.07	\$ 373.07
19330		A	090	Y	Y	N	N	N	\$ 436.45	\$ 436.45
19340		A	090	Y	Y	N	D	N	\$ 511.40	\$ 511.40
19342		A	090	Y	Y	D	D	N	\$ 513.57	\$ 513.57
19350		A	090	Y	Y	N	N	N	\$ 452.36	\$ 551.17
19355		A	090	Y	Y	D	N	N	\$ 416.21	\$ 503.69
19357		A	090	Y	Y	Y	D	N	\$ 779.88	\$ 779.88
19361		A	090	Y	Y	Y	D	N	\$ 1,062.33	\$ 1,062.33
19364		A	090	Y	Y	Y	D	N	\$ 1,865.58	\$ 1,865.58
19367		A	090	Y	Y	Y	D	N	\$ 1,207.65	\$ 1,207.65
19368		A	090	Y	Y	Y	D	N	\$ 1,487.69	\$ 1,487.69
19369		A	090	Y	Y	Y	D	N	\$ 1,381.41	\$ 1,381.41
19370		A	090	Y	Y	N	N	N	\$ 451.39	\$ 451.39
19371		A	090	Y	Y	N	N	N	\$ 481.28	\$ 481.28

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
19380		A	090	Y	Y	N	N	N	\$ 544.42	\$ 544.42
19396		Not Covered	000	Y	Y	D	N	N	\$ 97.61	\$ 186.78
19499		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
20100		A	010	Y	Y	Y	N	N	\$ 418.62	\$ 418.62
20101		A	010	Y	N	N	N	N	\$ 145.81	\$ 389.22
20102		A	010	Y	N	N	N	N	\$ 176.65	\$ 407.05
20103		A	010	Y	N	D	N	N	\$ 235.94	\$ 380.78
20150		A	090	Y	Y	Y	D	N	\$ 686.13	\$ 686.13
20200		A	000	Y	N	N	N	N	\$ 64.83	\$ 146.29
20205		A	000	Y	N	N	N	N	\$ 107.00	\$ 204.13
20206		A	000	Y	N	N	N	N	\$ 38.56	\$ 151.35
20220		A	000	Y	N	N	N	N	\$ 59.53	\$ 159.54
20225		A	000	Y	N	N	N	N	\$ 88.21	\$ 261.49
20240		A	000	Y	N	N	N	N	\$ 97.61	\$ 97.61
20245		A	000	Y	N	N	N	N	\$ 239.55	\$ 239.55
20250		A	010	Y	N	N	N	N	\$ 267.75	\$ 267.75
20251		A	010	Y	N	Y	N	N	\$ 292.57	\$ 292.57
20500		A	010	Y	N	N	N	N	\$ 58.32	\$ 77.84
20501		A	000	Y	N	N	N	N	\$ 25.31	\$ 91.82
20520		A	010	Y	N	N	N	N	\$ 97.85	\$ 141.23
20525		A	010	Y	N	N	N	N	\$ 167.25	\$ 311.85
20526		A	000	Y	Y	N	N	N	\$ 39.04	\$ 53.50
20527		Not Covered	000	Y	Y	N	N	N	\$ 44.10	\$ 57.36
20550		A	000	Y	Y	N	N	N	\$ 26.99	\$ 37.36
20551		A	000	Y	N	N	N	N	\$ 27.23	\$ 38.08
20552		A	000	Y	N	N	N	N	\$ 26.03	\$ 35.91
20553		A	000	Y	N	N	N	N	\$ 29.16	\$ 40.97
20555		A	000	Y	N	D	N	N	\$ 224.85	\$ 224.85
20560		Not Covered	XXX	N	N	N	N	N	\$ 11.33	\$ 17.35
20561		Not Covered	XXX	N	N	N	N	N	\$ 16.63	\$ 25.06
20600		A	000	Y	Y	N	N	N	\$ 24.82	\$ 34.46
20604		A	000	Y	Y	N	N	N	\$ 31.81	\$ 52.78
20605		A	000	Y	Y	N	N	N	\$ 25.55	\$ 35.67
20606		A	000	Y	Y	N	N	N	\$ 36.63	\$ 58.32
20610		A	000	Y	Y	N	N	N	\$ 31.57	\$ 42.66
20611		A	000	Y	Y	N	N	N	\$ 41.45	\$ 65.07
20612		A	000	Y	N	N	N	N	\$ 28.20	\$ 41.69
20615		A	010	Y	N	N	N	N	\$ 107.49	\$ 165.81
20650		A	010	Y	N	N	D	N	\$ 106.28	\$ 143.40
20660		A	000	Y	N	N	N	N	\$ 170.87	\$ 170.87
20661		A	090	Y	N	N	N	N	\$ 341.98	\$ 341.98
20662		A	090	Y	N	D	N	N	\$ 348.73	\$ 348.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
20663		A	090	Y	Y	D	N	N	\$ 320.29	\$ 320.29
20664		A	090	Y	N	N	N	N	\$ 602.02	\$ 602.02
20665		A	010	Y	N	D	N	N	\$ 62.66	\$ 74.47
20670		A	010	Y	N	N	N	N	\$ 96.16	\$ 240.04
20680		A	090	Y	N	D	N	N	\$ 283.90	\$ 405.12
20690		A	090	Y	N	N	N	N	\$ 407.05	\$ 407.05
20692		A	090	Y	N	Y	D	N	\$ 758.67	\$ 758.67
20693		A	090	Y	N	N	N	N	\$ 298.36	\$ 298.36
20694		A	090	Y	N	N	N	N	\$ 227.26	\$ 284.38
20696		Not Covered	090	Y	N	Y	D	N	\$ 810.72	\$ 810.72
20697		Not Covered	000	N	N	Y	D	N	\$ 1,266.21	\$ 1,266.21
20700		A	ZZZ	N	N	D	N	N	\$ 57.60	\$ 57.60
20701		A	ZZZ	N	N	D	N	N	\$ 43.86	\$ 43.86
20702		A	ZZZ	N	N	D	N	N	\$ 96.88	\$ 96.88
20703		A	ZZZ	N	N	D	N	N	\$ 69.41	\$ 69.41
20704		A	ZZZ	N	N	D	N	N	\$ 100.74	\$ 100.74
20705		A	ZZZ	N	N	D	N	N	\$ 83.39	\$ 83.39
20802		A	090	Y	Y	Y	D	N	\$ 1,886.79	\$ 1,886.79
20805		A	090	Y	Y	Y	D	N	\$ 2,245.88	\$ 2,245.88
20808		A	090	Y	Y	Y	D	N	\$ 2,717.76	\$ 2,717.76
20816		A	090	Y	N	Y	D	N	\$ 1,412.74	\$ 1,412.74
20822		A	090	Y	N	Y	D	N	\$ 1,213.44	\$ 1,213.44
20824		A	090	Y	Y	Y	D	N	\$ 1,414.91	\$ 1,414.91
20827		A	090	Y	Y	Y	D	N	\$ 1,247.18	\$ 1,247.18
20838		A	090	Y	Y	Y	D	N	\$ 1,912.82	\$ 1,912.82
20900		A	000	Y	N	Y	D	N	\$ 125.32	\$ 264.86
20902		A	000	Y	N	Y	D	N	\$ 192.08	\$ 192.08
20910		A	090	Y	N	D	N	N	\$ 316.67	\$ 316.67
20912		A	090	Y	N	D	N	N	\$ 319.33	\$ 319.33
20920		A	090	Y	N	N	D	N	\$ 262.69	\$ 262.69
20922		A	090	Y	N	Y	D	N	\$ 330.17	\$ 401.75
20924		A	090	Y	N	Y	D	N	\$ 341.50	\$ 341.50
20930		B	XXX	N	N	N	N	N	\$ -	\$ -
20931		A	ZZZ	N	N	N	D	N	\$ 77.84	\$ 77.84
20932		A	ZZZ	N	N	Y	D	N	\$ 526.10	\$ 526.10
20933		A	ZZZ	N	N	Y	D	N	\$ 482.72	\$ 482.72
20934		A	ZZZ	N	N	Y	D	N	\$ 525.86	\$ 525.86
20936		B	XXX	N	N	N	N	N	\$ -	\$ -
20937		A	ZZZ	N	N	Y	D	N	\$ 116.64	\$ 116.64
20938		A	ZZZ	N	N	Y	D	N	\$ 129.90	\$ 129.90
20939		Not Covered	ZZZ	N	Y	D	N	N	\$ 48.92	\$ 48.92
20950		A	000	Y	N	D	N	N	\$ 59.29	\$ 173.04

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
20955		A	090	Y	N	Y	D	N	\$ 1,679.05	\$ 1,679.05
20956		A	090	Y	N	Y	D	N	\$ 1,815.69	\$ 1,815.69
20957		A	090	Y	N	Y	D	N	\$ 1,889.20	\$ 1,889.20
20962		A	090	Y	N	Y	D	N	\$ 1,817.62	\$ 1,817.62
20969		A	090	Y	N	Y	D	N	\$ 1,845.10	\$ 1,845.10
20970		A	090	Y	N	Y	D	N	\$ 1,959.33	\$ 1,959.33
20972		A	090	Y	N	Y	N	N	\$ 1,954.51	\$ 1,954.51
20973		A	090	Y	Y	Y	D	N	\$ 2,065.61	\$ 2,065.61
20974		A	000	N	N	N	N	N	\$ 33.98	\$ 52.78
20975		A	000	N	N	Y	D	N	\$ 121.46	\$ 121.46
20979		A	000	N	N	N	N	N	\$ 22.17	\$ 35.91
20982		A	000	Y	Y	N	N	N	\$ 252.09	\$ 2,414.10
20983		A	000	Y	Y	N	N	N	\$ 234.98	\$ 3,535.71
20985		Not Covered	ZZZ	N	N	D	N	N	\$ 100.74	\$ 100.74
20999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
21010		A	090	Y	Y	D	N	N	\$ 496.22	\$ 496.22
21011		A	090	Y	N	Y	N	N	\$ 170.39	\$ 241.48
21012		A	090	Y	N	Y	N	N	\$ 227.75	\$ 227.75
21013		A	090	Y	N	Y	N	N	\$ 269.68	\$ 354.99
21014		A	090	Y	N	Y	N	N	\$ 352.82	\$ 352.82
21015		A	090	Y	N	N	N	N	\$ 473.32	\$ 473.32
21016		A	090	Y	N	Y	N	N	\$ 684.20	\$ 684.20
21025		A	090	Y	N	N	N	N	\$ 446.09	\$ 528.03
21026		A	090	Y	N	N	N	N	\$ 286.55	\$ 355.48
21029		A	090	Y	N	D	N	N	\$ 412.83	\$ 506.10
21030		A	090	Y	Y	N	N	N	\$ 245.34	\$ 311.13
21031		A	090	Y	Y	N	N	N	\$ 179.79	\$ 251.36
21032		A	090	Y	N	N	N	N	\$ 175.69	\$ 249.68
21034		A	090	Y	N	Y	D	N	\$ 763.49	\$ 870.97
21040		A	090	Y	N	N	N	N	\$ 247.03	\$ 315.23
21044		A	090	Y	N	Y	D	N	\$ 579.36	\$ 579.36
21045		A	090	Y	N	Y	D	N	\$ 806.63	\$ 806.63
21046		A	090	Y	N	D	D	N	\$ 675.28	\$ 675.28
21047		A	090	Y	N	Y	D	N	\$ 851.94	\$ 851.94
21048		A	090	Y	N	D	D	N	\$ 685.65	\$ 685.65
21049		A	090	Y	N	Y	D	N	\$ 818.68	\$ 818.68
21050		A	090	Y	Y	D	N	N	\$ 578.40	\$ 578.40
21060		A	090	Y	Y	Y	D	N	\$ 526.10	\$ 526.10
21070		A	090	Y	Y	D	N	N	\$ 413.07	\$ 413.07
21073		Not Covered	090	Y	Y	D	N	N	\$ 164.12	\$ 244.13
21076		A	010	Y	N	D	N	N	\$ 489.71	\$ 583.46
21077		A	090	Y	Y	D	N	N	\$ 1,204.04	\$ 1,429.13

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
21079		A	090	Y	N	N	N	N	\$ 808.56	\$ 973.88
21080		A	090	Y	N	N	N	N	\$ 920.38	\$ 1,123.06
21081		A	090	Y	N	D	N	N	\$ 841.33	\$ 1,032.93
21082		A	090	Y	N	D	N	N	\$ 764.45	\$ 944.48
21083		A	090	Y	N	D	N	N	\$ 709.02	\$ 898.21
21084		A	090	Y	N	D	N	N	\$ 821.81	\$ 1,028.83
21085		A	010	Y	N	D	N	N	\$ 332.34	\$ 447.54
21086		A	090	Y	Y	D	N	N	\$ 888.33	\$ 1,064.02
21087		A	090	Y	N	D	N	N	\$ 888.33	\$ 1,064.02
21088		Not Covered	090	N	N	D	N	N	\$ -	\$ -
21089		Unlstd/Manual	YYY	N	N	N	D	D	\$ -	\$ -
21100		A	090	Y	N	D	N	N	\$ 235.46	\$ 413.07
21110		A	090	Y	N	N	N	N	\$ 465.61	\$ 556.47
21116		A	000	Y	Y	N	N	N	\$ 31.33	\$ 136.17
21120		A	090	Y	N	N	D	N	\$ 344.87	\$ 443.44
21121		A	090	Y	N	Y	N	N	\$ 364.15	\$ 430.67
21122		A	090	Y	N	Y	N	N	\$ 511.16	\$ 511.16
21123		A	090	Y	N	Y	D	N	\$ 577.44	\$ 577.44
21125		A	090	Y	N	Y	N	N	\$ 454.77	\$ 1,768.70
21127		A	090	Y	N	Y	D	N	\$ 521.04	\$ 2,608.34
21137		A	090	Y	N	Y	N	N	\$ 506.34	\$ 506.34
21138		A	090	Y	N	Y	D	N	\$ 618.65	\$ 618.65
21139		A	090	Y	N	Y	D	N	\$ 744.93	\$ 744.93
21141		A	090	Y	N	Y	D	N	\$ 890.50	\$ 890.50
21142		A	090	Y	N	Y	D	N	\$ 915.32	\$ 915.32
21143		A	090	Y	N	Y	D	N	\$ 947.13	\$ 947.13
21145		A	090	Y	N	Y	N	N	\$ 1,041.36	\$ 1,041.36
21146		A	090	Y	N	Y	D	N	\$ 1,086.43	\$ 1,086.43
21147		A	090	Y	N	Y	N	N	\$ 1,145.47	\$ 1,145.47
21150		A	090	Y	N	Y	N	N	\$ 1,115.35	\$ 1,115.35
21151		A	090	Y	N	Y	N	N	\$ 1,229.10	\$ 1,229.10
21154		A	090	Y	N	Y	D	N	\$ 1,322.37	\$ 1,322.37
21155		A	090	Y	N	Y	N	N	\$ 1,467.45	\$ 1,467.45
21159		A	090	Y	N	Y	D	N	\$ 1,762.19	\$ 1,762.19
21160		A	090	Y	N	Y	N	N	\$ 1,911.85	\$ 1,911.85
21172		A	090	Y	N	Y	D	N	\$ 1,471.06	\$ 1,471.06
21175		A	090	Y	N	Y	N	N	\$ 1,510.11	\$ 1,510.11
21179		A	090	Y	N	Y	N	N	\$ 1,035.82	\$ 1,035.82
21180		A	090	Y	N	Y	D	N	\$ 1,158.49	\$ 1,158.49
21181		A	090	Y	N	D	N	N	\$ 500.32	\$ 500.32
21182		A	090	Y	N	Y	D	N	\$ 1,445.52	\$ 1,445.52
21183		A	090	Y	N	Y	D	N	\$ 1,574.45	\$ 1,574.45

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
21184		A	090	Y	N	Y	N	N	\$ 1,694.95	\$ 1,694.95
21188		A	090	Y	N	Y	N	N	\$ 1,072.21	\$ 1,072.21
21193		A	090	Y	B	Y	D	N	\$ 827.35	\$ 827.35
21194		A	090	Y	B	Y	N	N	\$ 956.29	\$ 956.29
21195		A	090	Y	B	Y	N	N	\$ 909.53	\$ 909.53
21196		A	090	Y	B	Y	D	N	\$ 939.66	\$ 939.66
21198		A	090	Y	N	Y	D	N	\$ 721.07	\$ 721.07
21199		A	090	Y	N	Y	D	N	\$ 689.74	\$ 689.74
21206		A	090	Y	N	Y	D	N	\$ 670.70	\$ 670.70
21208		A	090	Y	N	D	N	N	\$ 499.11	\$ 1,093.66
21209		A	090	Y	N	Y	N	N	\$ 400.06	\$ 519.36
21210		A	090	Y	N	N	N	N	\$ 512.61	\$ 1,213.44
21215		A	090	Y	N	N	D	N	\$ 532.13	\$ 2,652.69
21230		A	090	Y	N	D	N	N	\$ 506.10	\$ 506.10
21235		A	090	Y	N	N	N	N	\$ 374.27	\$ 477.18
21240		A	090	Y	Y	Y	D	N	\$ 706.13	\$ 706.13
21242		A	090	Y	Y	Y	D	N	\$ 674.08	\$ 674.08
21243		A	090	Y	Y	Y	D	N	\$ 1,077.51	\$ 1,077.51
21244		A	090	Y	N	Y	D	N	\$ 676.97	\$ 676.97
21245		A	090	Y	N	Y	N	N	\$ 636.72	\$ 817.47
21246		A	090	Y	N	Y	N	N	\$ 570.21	\$ 570.21
21247		A	090	Y	Y	Y	D	N	\$ 1,062.09	\$ 1,062.09
21248		A	090	Y	N	N	N	N	\$ 540.56	\$ 665.40
21249		A	090	Y	N	D	N	N	\$ 762.28	\$ 908.33
21255		A	090	Y	Y	Y	D	N	\$ 903.75	\$ 903.75
21256		A	090	Y	Y	Y	D	N	\$ 838.20	\$ 838.20
21260		A	090	Y	N	Y	D	N	\$ 932.67	\$ 932.67
21261		A	090	Y	N	Y	D	N	\$ 1,658.56	\$ 1,658.56
21263		A	090	Y	N	Y	D	N	\$ 1,532.04	\$ 1,532.04
21267		A	090	Y	Y	Y	D	N	\$ 1,090.04	\$ 1,090.04
21268		A	090	Y	Y	Y	D	N	\$ 1,369.36	\$ 1,369.36
21270		A	090	Y	Y	Y	D	N	\$ 506.34	\$ 669.74
21275		A	090	Y	N	Y	D	N	\$ 570.69	\$ 570.69
21280		A	090	Y	Y	D	N	N	\$ 379.58	\$ 379.58
21282		A	090	Y	Y	N	N	N	\$ 255.94	\$ 255.94
21295		A	090	Y	Y	D	N	N	\$ 124.36	\$ 124.36
21296		A	090	Y	Y	D	N	N	\$ 270.16	\$ 270.16
21299		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
21310		A	000	Y	N	N	N	N	\$ 20.00	\$ 84.35
21315		A	010	Y	N	N	N	N	\$ 101.46	\$ 182.92
21320		A	010	Y	N	N	N	N	\$ 89.41	\$ 168.70
21325		A	090	Y	N	D	N	N	\$ 290.89	\$ 290.89

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
21330		A	090	Y	N	D	N	N	\$ 351.86	\$ 351.86
21335		A	090	Y	N	N	N	N	\$ 478.14	\$ 478.14
21336		A	090	Y	N	D	N	N	\$ 426.57	\$ 426.57
21337		A	090	Y	N	D	N	N	\$ 195.21	\$ 271.37
21338		A	090	Y	N	D	N	N	\$ 440.55	\$ 440.55
21339		A	090	Y	N	Y	D	N	\$ 500.56	\$ 500.56
21340		A	090	Y	N	D	N	N	\$ 502.49	\$ 502.49
21343		A	090	Y	N	Y	D	N	\$ 723.00	\$ 723.00
21344		A	090	Y	N	Y	Y	N	\$ 939.42	\$ 939.42
21345		A	090	Y	N	D	N	N	\$ 422.47	\$ 522.25
21346		A	090	Y	N	N	D	N	\$ 668.29	\$ 668.29
21347		A	090	Y	N	Y	D	N	\$ 688.06	\$ 688.06
21348		A	090	Y	N	Y	Y	N	\$ 735.53	\$ 735.53
21355		A	010	Y	Y	D	N	N	\$ 216.18	\$ 288.96
21356		A	010	Y	Y	D	N	N	\$ 250.88	\$ 331.86
21360		A	090	Y	Y	Y	N	N	\$ 344.87	\$ 344.87
21365		A	090	Y	Y	Y	D	N	\$ 737.22	\$ 737.22
21366		A	090	Y	Y	Y	Y	N	\$ 866.40	\$ 866.40
21385		A	090	Y	Y	Y	D	N	\$ 499.59	\$ 499.59
21386		A	090	Y	Y	Y	N	N	\$ 466.82	\$ 466.82
21387		A	090	Y	Y	Y	N	N	\$ 522.01	\$ 522.01
21390		A	090	Y	Y	Y	D	N	\$ 536.23	\$ 536.23
21395		A	090	Y	Y	Y	D	N	\$ 685.89	\$ 685.89
21400		A	090	Y	Y	D	N	N	\$ 106.28	\$ 134.00
21401		A	090	Y	Y	Y	N	N	\$ 215.21	\$ 334.75
21406		A	090	Y	Y	Y	D	N	\$ 391.38	\$ 391.38
21407		A	090	Y	Y	Y	D	N	\$ 429.22	\$ 429.22
21408		A	090	Y	Y	Y	Y	N	\$ 611.42	\$ 611.42
21421		A	090	Y	N	D	N	N	\$ 366.56	\$ 431.87
21422		A	090	Y	N	Y	D	N	\$ 428.74	\$ 428.74
21423		A	090	Y	N	Y	Y	N	\$ 546.11	\$ 546.11
21431		A	090	Y	N	Y	N	N	\$ 460.79	\$ 460.79
21432		A	090	Y	N	Y	N	N	\$ 484.41	\$ 484.41
21433		A	090	Y	N	Y	D	N	\$ 1,182.11	\$ 1,182.11
21435		A	090	Y	N	Y	N	N	\$ 952.67	\$ 952.67
21436		A	090	Y	N	Y	Y	N	\$ 1,385.03	\$ 1,385.03
21440		A	090	Y	N	D	N	N	\$ 345.59	\$ 427.05
21445		A	090	Y	N	Y	N	N	\$ 419.82	\$ 515.26
21450		A	090	Y	N	D	N	N	\$ 312.82	\$ 382.71
21451		A	090	Y	N	D	N	N	\$ 420.55	\$ 500.32
21452		A	090	Y	N	D	N	N	\$ 294.98	\$ 480.55
21453		A	090	Y	N	D	N	N	\$ 597.20	\$ 697.45

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
21454		A	090	Y	N	D	D	N	\$ 327.04	\$ 327.04
21461		A	090	Y	N	N	D	N	\$ 685.89	\$ 1,248.14
21462		A	090	Y	N	Y	D	N	\$ 768.55	\$ 1,366.71
21465		A	090	Y	Y	Y	D	N	\$ 539.60	\$ 539.60
21470		A	090	Y	N	Y	D	N	\$ 780.60	\$ 780.60
21480		A	000	Y	Y	N	N	N	\$ 22.41	\$ 87.00
21485		A	090	Y	Y	D	N	N	\$ 507.31	\$ 618.17
21490		A	090	Y	Y	Y	D	N	\$ 531.65	\$ 531.65
21497		A	090	Y	N	D	N	N	\$ 384.15	\$ 457.90
21499		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
21501		A	090	Y	N	N	N	N	\$ 219.79	\$ 316.67
21502		A	090	Y	N	Y	N	N	\$ 350.41	\$ 350.41
21510		A	090	Y	N	D	N	N	\$ 309.20	\$ 309.20
21550		A	010	Y	N	N	N	N	\$ 103.39	\$ 174.97
21552		A	090	Y	N	Y	N	N	\$ 306.79	\$ 306.79
21554		A	090	Y	N	Y	N	N	\$ 501.76	\$ 501.76
21555		A	090	Y	N	N	N	N	\$ 205.81	\$ 287.03
21556		A	090	Y	N	N	N	N	\$ 360.54	\$ 360.54
21557		A	090	Y	N	Y	D	N	\$ 654.32	\$ 654.32
21558		A	090	Y	N	Y	D	N	\$ 927.61	\$ 927.61
21600		A	090	Y	N	Y	D	N	\$ 377.17	\$ 377.17
21601		A	090	Y	N	Y	D	N	\$ 808.80	\$ 808.80
21602		A	090	Y	N	Y	D	N	\$ 1,080.16	\$ 1,080.16
21603		A	090	Y	N	Y	D	N	\$ 1,182.59	\$ 1,182.59
21610		A	090	Y	N	Y	N	N	\$ 836.03	\$ 836.03
21615		A	090	Y	Y	Y	D	N	\$ 428.98	\$ 428.98
21616		A	090	Y	Y	Y	N	N	\$ 499.83	\$ 499.83
21620		A	090	Y	N	Y	D	N	\$ 347.76	\$ 347.76
21627		A	090	Y	N	Y	N	N	\$ 368.01	\$ 368.01
21630		A	090	Y	N	Y	D	N	\$ 824.94	\$ 824.94
21632		A	090	Y	N	Y	D	N	\$ 841.09	\$ 841.09
21685		A	090	Y	N	Y	D	N	\$ 666.85	\$ 666.85
21700		A	090	Y	Y	Y	N	N	\$ 249.68	\$ 249.68
21705		A	090	Y	Y	Y	N	N	\$ 376.68	\$ 376.68
21720		A	090	Y	N	Y	N	N	\$ 360.05	\$ 360.05
21725		A	090	Y	N	Y	D	N	\$ 368.01	\$ 368.01
21740		A	090	Y	N	Y	D	N	\$ 716.98	\$ 716.98
21742		C	090	Y	N	Y	D	N	\$ -	\$ -
21743		C	090	Y	N	Y	D	N	\$ -	\$ -
21750		A	090	Y	N	Y	D	N	\$ 472.12	\$ 472.12
21811		Not Covered	000	Y	Y	Y	N	N	\$ 417.41	\$ 417.41
21812		Not Covered	000	Y	Y	Y	N	N	\$ 504.65	\$ 504.65

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
21813		Not Covered	000	Y	Y	Y	N	N	\$ 695.53	\$ 695.53
21820		A	090	Y	N	N	N	N	\$ 95.92	\$ 97.36
21825		A	090	Y	N	Y	D	N	\$ 373.31	\$ 373.31
21899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
21920		A	010	Y	N	N	N	N	\$ 103.87	\$ 170.63
21925		A	090	Y	N	N	N	N	\$ 248.71	\$ 320.77
21930		A	090	Y	N	N	N	N	\$ 247.03	\$ 333.54
21931		A	090	Y	N	Y	N	N	\$ 323.42	\$ 323.42
21932		A	090	Y	N	Y	N	N	\$ 455.73	\$ 455.73
21933		A	090	Y	N	Y	N	N	\$ 509.72	\$ 509.72
21935		A	090	Y	N	N	D	N	\$ 707.34	\$ 707.34
21936		A	090	Y	N	Y	D	N	\$ 979.42	\$ 979.42
22010		A	090	Y	N	D	N	N	\$ 664.68	\$ 664.68
22015		A	090	Y	N	N	N	N	\$ 649.50	\$ 649.50
22100		A	090	Y	N	Y	D	N	\$ 589.25	\$ 589.25
22101		A	090	Y	N	Y	D	N	\$ 592.38	\$ 592.38
22102		A	090	Y	N	Y	D	N	\$ 564.18	\$ 564.18
22103		A	ZZZ	N	N	Y	D	N	\$ 99.29	\$ 99.29
22110		A	090	Y	N	Y	D	N	\$ 721.55	\$ 721.55
22112		A	090	Y	N	Y	D	N	\$ 779.64	\$ 779.64
22114		A	090	Y	N	Y	D	N	\$ 779.64	\$ 779.64
22116		A	ZZZ	N	N	Y	D	N	\$ 99.77	\$ 99.77
22206		A	090	Y	N	Y	D	N	\$ 1,704.59	\$ 1,704.59
22207		A	090	Y	N	Y	D	N	\$ 1,665.79	\$ 1,665.79
22208		A	ZZZ	N	N	Y	D	N	\$ 413.32	\$ 413.32
22210		A	090	Y	N	Y	D	N	\$ 1,242.11	\$ 1,242.11
22212		A	090	Y	N	Y	D	N	\$ 1,036.78	\$ 1,036.78
22214		A	090	Y	N	Y	D	N	\$ 1,039.19	\$ 1,039.19
22216		A	ZZZ	N	N	Y	D	N	\$ 255.22	\$ 255.22
22220		A	090	Y	N	Y	D	N	\$ 1,120.41	\$ 1,120.41
22222		A	090	Y	N	Y	D	N	\$ 1,217.77	\$ 1,217.77
22224		A	090	Y	N	Y	D	N	\$ 1,093.90	\$ 1,093.90
22226		A	ZZZ	N	N	Y	D	N	\$ 253.77	\$ 253.77
22310		A	090	Y	N	N	N	N	\$ 198.34	\$ 206.54
22315		A	090	Y	N	N	N	N	\$ 524.18	\$ 593.34
22318		A	090	Y	N	Y	Y	N	\$ 1,143.30	\$ 1,143.30
22319		A	090	Y	N	Y	Y	N	\$ 1,278.75	\$ 1,278.75
22325		A	090	Y	N	Y	D	N	\$ 1,012.20	\$ 1,012.20
22326		A	090	Y	N	Y	D	N	\$ 1,043.29	\$ 1,043.29
22327		A	090	Y	N	Y	D	N	\$ 1,055.82	\$ 1,055.82
22328		A	ZZZ	N	N	Y	D	N	\$ 199.07	\$ 199.07
22505		A	010	Y	N	N	N	N	\$ 89.17	\$ 89.17

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
22510		A	010	Y	N	N	N	N	\$ 294.98	\$ 1,200.90
22511		A	010	Y	N	N	N	N	\$ 277.15	\$ 1,194.64
22512		A	ZZZ	N	N	N	N	N	\$ 143.40	\$ 523.93
22513		A	010	Y	N	N	N	N	\$ 352.10	\$ 4,080.85
22514		A	010	Y	N	N	N	N	\$ 328.72	\$ 4,063.02
22515		A	ZZZ	N	N	N	N	N	\$ 152.55	\$ 2,189.73
22526		Not Covered	010	N	N	N	N	N	\$ 220.52	\$ 1,391.05
22527		Not Covered	ZZZ	N	N	N	N	N	\$ 104.35	\$ 1,152.22
22532		A	090	Y	N	Y	Y	N	\$ 1,249.34	\$ 1,249.34
22533		A	090	Y	N	Y	Y	N	\$ 1,143.79	\$ 1,143.79
22534		A	ZZZ	N	N	Y	Y	N	\$ 252.33	\$ 252.33
22548		A	090	Y	N	Y	Y	N	\$ 1,370.57	\$ 1,370.57
22551		A	090	Y	N	Y	Y	N	\$ 1,186.68	\$ 1,186.68
22552		A	ZZZ	N	N	Y	Y	N	\$ 278.84	\$ 278.84
22554		A	090	Y	N	Y	Y	N	\$ 871.46	\$ 871.46
22556		A	090	Y	N	Y	Y	N	\$ 1,156.08	\$ 1,156.08
22558		A	090	Y	N	Y	Y	N	\$ 1,063.05	\$ 1,063.05
22585		A	ZZZ	N	N	Y	Y	N	\$ 229.67	\$ 229.67
22586		A	090	Y	N	Y	Y	N	\$ 1,419.25	\$ 1,419.25
22590		A	090	Y	N	Y	Y	N	\$ 1,099.44	\$ 1,099.44
22595		A	090	Y	N	Y	Y	N	\$ 1,047.63	\$ 1,047.63
22600		A	090	Y	N	Y	Y	N	\$ 895.80	\$ 895.80
22610		A	090	Y	N	Y	Y	N	\$ 879.65	\$ 879.65
22612		A	090	Y	N	Y	Y	N	\$ 1,100.41	\$ 1,100.41
22614		A	ZZZ	N	N	Y	Y	N	\$ 275.22	\$ 275.22
22630		A	090	Y	N	Y	Y	N	\$ 1,097.27	\$ 1,097.27
22632		A	ZZZ	N	N	Y	Y	N	\$ 225.82	\$ 225.82
22633		A	090	Y	N	Y	Y	N	\$ 1,289.35	\$ 1,289.35
22634		A	ZZZ	N	N	Y	Y	N	\$ 348.73	\$ 348.73
22800		A	090	Y	N	Y	D	N	\$ 935.32	\$ 935.32
22802		A	090	Y	N	Y	D	N	\$ 1,468.41	\$ 1,468.41
22804		A	090	Y	N	Y	D	N	\$ 1,691.34	\$ 1,691.34
22808		A	090	Y	N	Y	D	N	\$ 1,265.49	\$ 1,265.49
22810		A	090	Y	N	Y	D	N	\$ 1,453.23	\$ 1,453.23
22812		A	090	Y	N	Y	D	N	\$ 1,514.93	\$ 1,514.93
22818		A	090	Y	N	Y	Y	Y	\$ 1,486.25	\$ 1,486.25
22819		A	090	Y	N	Y	Y	Y	\$ 1,709.65	\$ 1,709.65
22830		A	090	Y	N	Y	D	N	\$ 564.90	\$ 564.90
22840		A	ZZZ	N	N	Y	D	N	\$ 533.57	\$ 533.57
22841		B	XXX	N	N	N	N	N	\$ -	\$ -
22842		A	ZZZ	N	N	Y	Y	N	\$ 536.23	\$ 536.23
22843		A	ZZZ	N	N	Y	Y	N	\$ 573.58	\$ 573.58

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
22844		A	ZZZ	N	N	Y	Y	N	\$ 692.39	\$ 692.39
22845		A	ZZZ	N	N	Y	Y	N	\$ 512.85	\$ 512.85
22846		A	ZZZ	N	N	Y	Y	N	\$ 532.85	\$ 532.85
22847		A	ZZZ	N	N	Y	Y	N	\$ 557.43	\$ 557.43
22848		A	ZZZ	N	N	Y	Y	N	\$ 252.09	\$ 252.09
22849		A	090	Y	N	Y	D	N	\$ 907.85	\$ 907.85
22850		A	090	Y	N	Y	D	N	\$ 504.17	\$ 504.17
22852		A	090	Y	N	Y	D	N	\$ 484.17	\$ 484.17
22853		A	ZZZ	N	N	Y	Y	N	\$ 181.96	\$ 181.96
22854		A	ZZZ	N	N	Y	Y	N	\$ 235.70	\$ 235.70
22855		A	090	Y	N	Y	D	N	\$ 769.27	\$ 769.27
22856		Not Covered	090	Y	N	Y	Y	N	\$ 1,135.59	\$ 1,135.59
22857		Not Covered	090	Y	N	Y	Y	N	\$ 1,214.16	\$ 1,214.16
22858		Not Covered	ZZZ	N	N	Y	Y	N	\$ 356.68	\$ 356.68
22859		A	ZZZ	N	N	Y	Y	N	\$ 234.49	\$ 234.49
22861		Not Covered	090	Y	N	Y	Y	N	\$ 1,626.99	\$ 1,626.99
22862		Not Covered	090	Y	N	Y	Y	Y	\$ 1,620.97	\$ 1,620.97
22864		Not Covered	090	Y	N	Y	Y	N	\$ 1,449.86	\$ 1,449.86
22865		Not Covered	090	Y	N	Y	Y	Y	\$ 1,581.44	\$ 1,581.44
22867		Not Covered	090	Y	N	Y	N	N	\$ 680.10	\$ 680.10
22868		Not Covered	ZZZ	N	N	Y	Y	N	\$ 173.04	\$ 173.04
22869		Not Covered	090	Y	N	Y	N	N	\$ 296.19	\$ 296.19
22870		Not Covered	ZZZ	N	N	Y	Y	N	\$ 82.90	\$ 82.90
22899		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
22900		A	090	Y	N	Y	D	N	\$ 388.97	\$ 388.97
22901		A	090	Y	N	Y	D	N	\$ 461.03	\$ 461.03
22902		A	090	Y	N	Y	D	N	\$ 227.02	\$ 313.78
22903		A	090	Y	N	Y	D	N	\$ 302.70	\$ 302.70
22904		A	090	Y	N	Y	D	D	\$ 722.76	\$ 722.76
22905		A	090	Y	N	Y	D	D	\$ 917.49	\$ 917.49
22999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
23000		A	090	Y	Y	Y	D	N	\$ 241.24	\$ 372.35
23020		A	090	Y	Y	Y	N	N	\$ 468.26	\$ 468.26
23030		A	010	Y	N	N	N	N	\$ 172.80	\$ 293.78
23031		A	010	Y	Y	N	N	N	\$ 145.81	\$ 278.84
23035		A	090	Y	Y	Y	N	N	\$ 463.44	\$ 463.44
23040		A	090	Y	Y	Y	D	N	\$ 487.54	\$ 487.54
23044		A	090	Y	Y	N	D	N	\$ 383.43	\$ 383.43
23065		A	010	Y	Y	N	N	N	\$ 108.69	\$ 149.18
23066		A	090	Y	Y	N	N	N	\$ 245.58	\$ 378.61
23071		A	090	Y	Y	Y	N	N	\$ 288.24	\$ 288.24
23073		A	090	Y	Y	Y	N	N	\$ 478.63	\$ 478.63

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
23075		A	090	Y	Y	N	N	N	\$ 221.48	\$ 339.81
23076		A	090	Y	Y	N	N	N	\$ 368.97	\$ 368.97
23077		A	090	Y	Y	Y	D	N	\$ 783.73	\$ 783.73
23078		A	090	Y	Y	Y	D	N	\$ 990.99	\$ 990.99
23100		A	090	Y	Y	Y	D	N	\$ 341.26	\$ 341.26
23101		A	090	Y	Y	N	D	N	\$ 309.20	\$ 309.20
23105		A	090	Y	Y	Y	D	N	\$ 435.25	\$ 435.25
23106		A	090	Y	Y	N	D	N	\$ 339.09	\$ 339.09
23107		A	090	Y	Y	Y	D	N	\$ 449.22	\$ 449.22
23120		A	090	Y	Y	Y	D	N	\$ 396.45	\$ 396.45
23125		A	090	Y	Y	Y	D	N	\$ 482.96	\$ 482.96
23130		A	090	Y	Y	N	D	N	\$ 417.17	\$ 417.17
23140		A	090	Y	Y	N	N	N	\$ 376.44	\$ 376.44
23145		A	090	Y	Y	Y	D	N	\$ 473.57	\$ 473.57
23146		A	090	Y	Y	D	N	N	\$ 422.71	\$ 422.71
23150		A	090	Y	Y	Y	D	N	\$ 447.54	\$ 447.54
23155		A	090	Y	Y	Y	D	N	\$ 542.25	\$ 542.25
23156		A	090	Y	Y	Y	N	N	\$ 461.76	\$ 461.76
23170		A	090	Y	Y	N	N	N	\$ 382.23	\$ 382.23
23172		A	090	Y	Y	Y	N	N	\$ 385.84	\$ 385.84
23174		A	090	Y	Y	Y	D	N	\$ 516.70	\$ 516.70
23180		A	090	Y	Y	N	D	N	\$ 450.91	\$ 450.91
23182		A	090	Y	Y	Y	N	N	\$ 454.04	\$ 454.04
23184		A	090	Y	Y	Y	D	N	\$ 501.76	\$ 501.76
23190		A	090	Y	Y	Y	D	N	\$ 389.94	\$ 389.94
23195		A	090	Y	Y	Y	D	N	\$ 508.03	\$ 508.03
23200		A	090	Y	Y	Y	D	N	\$ 1,032.69	\$ 1,032.69
23210		A	090	Y	Y	Y	D	N	\$ 1,215.60	\$ 1,215.60
23220		A	090	Y	Y	Y	D	N	\$ 1,330.80	\$ 1,330.80
23330		A	010	Y	Y	D	N	N	\$ 111.58	\$ 195.69
23333		A	090	Y	Y	D	N	N	\$ 320.05	\$ 320.05
23334		A	090	Y	Y	N	D	N	\$ 726.62	\$ 726.62
23335		A	090	Y	Y	N	D	N	\$ 867.12	\$ 867.12
23350		A	000	Y	Y	N	N	N	\$ 34.46	\$ 105.32
23395		A	090	Y	N	Y	D	N	\$ 874.11	\$ 874.11
23397		A	090	Y	N	Y	D	N	\$ 773.85	\$ 773.85
23400		A	090	Y	Y	Y	D	N	\$ 663.96	\$ 663.96
23405		A	090	Y	N	Y	D	N	\$ 420.30	\$ 420.30
23406		A	090	Y	N	Y	N	N	\$ 516.70	\$ 516.70
23410		A	090	Y	Y	Y	D	N	\$ 557.92	\$ 557.92
23412		A	090	Y	Y	Y	D	N	\$ 580.09	\$ 580.09
23415		A	090	Y	Y	N	D	N	\$ 473.08	\$ 473.08

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
23420		A	090	Y	Y	Y	D	N	\$ 662.51	\$ 662.51
23430		A	090	Y	Y	Y	D	N	\$ 505.38	\$ 505.38
23440		A	090	Y	Y	Y	D	N	\$ 515.98	\$ 515.98
23450		A	090	Y	Y	Y	D	N	\$ 647.57	\$ 647.57
23455		A	090	Y	Y	Y	D	N	\$ 679.38	\$ 679.38
23460		A	090	Y	Y	Y	D	N	\$ 744.93	\$ 744.93
23462		A	090	Y	Y	Y	D	N	\$ 730.71	\$ 730.71
23465		A	090	Y	Y	Y	D	N	\$ 765.42	\$ 765.42
23466		A	090	Y	Y	Y	D	N	\$ 760.60	\$ 760.60
23470		A	090	Y	Y	Y	D	N	\$ 821.09	\$ 821.09
23472		A	090	Y	Y	Y	D	N	\$ 992.92	\$ 992.92
23473		A	090	Y	Y	Y	D	N	\$ 1,109.56	\$ 1,109.56
23474		A	090	Y	Y	Y	D	N	\$ 1,196.81	\$ 1,196.81
23480		A	090	Y	Y	N	D	N	\$ 559.60	\$ 559.60
23485		A	090	Y	Y	Y	D	N	\$ 649.25	\$ 649.25
23490		A	090	Y	Y	Y	N	N	\$ 587.56	\$ 587.56
23491		A	090	Y	Y	Y	D	N	\$ 693.60	\$ 693.60
23500		A	090	Y	Y	N	N	N	\$ 150.38	\$ 147.73
23505		A	090	Y	Y	N	N	N	\$ 223.65	\$ 239.07
23515		A	090	Y	Y	Y	D	N	\$ 488.51	\$ 488.51
23520		A	090	Y	Y	D	N	N	\$ 157.61	\$ 159.30
23525		A	090	Y	Y	D	N	N	\$ 241.00	\$ 261.24
23530		A	090	Y	Y	Y	N	N	\$ 390.42	\$ 390.42
23532		A	090	Y	Y	Y	N	N	\$ 424.64	\$ 424.64
23540		A	090	Y	Y	N	N	N	\$ 155.20	\$ 156.89
23545		A	090	Y	Y	D	N	N	\$ 209.19	\$ 230.64
23550		A	090	Y	Y	Y	D	N	\$ 388.25	\$ 388.25
23552		A	090	Y	Y	Y	D	N	\$ 444.16	\$ 444.16
23570		A	090	Y	Y	N	N	N	\$ 160.27	\$ 155.93
23575		A	090	Y	Y	D	N	N	\$ 253.77	\$ 272.57
23585		A	090	Y	Y	Y	D	N	\$ 666.61	\$ 666.61
23600		A	090	Y	Y	N	N	N	\$ 208.47	\$ 220.03
23605		A	090	Y	Y	N	N	N	\$ 288.48	\$ 315.23
23615		A	090	Y	Y	Y	D	N	\$ 601.54	\$ 601.54
23616		A	090	Y	Y	Y	Y	N	\$ 845.43	\$ 845.43
23620		A	090	Y	Y	N	N	N	\$ 171.83	\$ 178.58
23625		A	090	Y	Y	N	N	N	\$ 235.46	\$ 254.74
23630		A	090	Y	Y	Y	D	N	\$ 529.24	\$ 529.24
23650		A	090	Y	Y	N	N	N	\$ 197.86	\$ 216.42
23655		A	090	Y	Y	N	N	N	\$ 274.02	\$ 274.02
23660		A	090	Y	Y	Y	D	N	\$ 396.45	\$ 396.45
23665		A	090	Y	Y	N	N	N	\$ 267.75	\$ 288.48

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
23670		A	090	Y	Y	Y	D	N	\$ 593.34	\$ 593.34
23675		A	090	Y	Y	N	N	N	\$ 337.64	\$ 369.21
23680		A	090	Y	Y	Y	D	N	\$ 631.66	\$ 631.66
23700		A	010	Y	Y	N	N	N	\$ 132.07	\$ 132.07
23800		A	090	Y	Y	Y	D	N	\$ 700.83	\$ 700.83
23802		A	090	Y	Y	Y	D	N	\$ 875.07	\$ 875.07
23900		A	090	Y	N	Y	N	N	\$ 949.30	\$ 949.30
23920		A	090	Y	Y	Y	D	N	\$ 767.34	\$ 767.34
23921		A	090	Y	Y	N	N	N	\$ 317.40	\$ 317.40
23929		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
23930		A	010	Y	Y	N	N	N	\$ 147.25	\$ 242.45
23931		A	010	Y	Y	N	N	N	\$ 106.52	\$ 198.58
23935		A	090	Y	Y	D	N	N	\$ 345.35	\$ 345.35
24000		A	090	Y	Y	D	D	N	\$ 322.22	\$ 322.22
24006		A	090	Y	Y	Y	Y	N	\$ 483.21	\$ 483.21
24065		A	010	Y	Y	N	N	N	\$ 108.69	\$ 170.39
24066		A	090	Y	Y	N	N	N	\$ 283.66	\$ 415.48
24071		A	090	Y	Y	Y	N	N	\$ 277.63	\$ 277.63
24073		A	090	Y	Y	Y	N	N	\$ 476.22	\$ 476.22
24075		A	090	Y	Y	N	N	N	\$ 222.44	\$ 351.62
24076		A	090	Y	Y	N	N	N	\$ 369.94	\$ 369.94
24077		A	090	Y	Y	N	D	N	\$ 707.58	\$ 707.58
24079		A	090	Y	Y	Y	D	N	\$ 912.43	\$ 912.43
24100		A	090	Y	Y	Y	D	N	\$ 282.93	\$ 282.93
24101		A	090	Y	Y	Y	N	N	\$ 339.81	\$ 339.81
24102		A	090	Y	Y	Y	D	N	\$ 419.34	\$ 419.34
24105		A	090	Y	Y	N	N	N	\$ 238.59	\$ 238.59
24110		A	090	Y	Y	N	D	N	\$ 393.55	\$ 393.55
24115		A	090	Y	Y	Y	D	N	\$ 502.00	\$ 502.00
24116		A	090	Y	Y	Y	N	N	\$ 587.32	\$ 587.32
24120		A	090	Y	Y	D	N	N	\$ 360.30	\$ 360.30
24125		A	090	Y	Y	Y	D	N	\$ 422.47	\$ 422.47
24126		A	090	Y	Y	Y	N	N	\$ 441.75	\$ 441.75
24130		A	090	Y	Y	N	D	N	\$ 344.39	\$ 344.39
24134		A	090	Y	Y	Y	N	N	\$ 508.75	\$ 508.75
24136		A	090	Y	Y	N	N	N	\$ 429.70	\$ 429.70
24138		A	090	Y	Y	Y	N	N	\$ 462.24	\$ 462.24
24140		A	090	Y	Y	Y	N	N	\$ 477.66	\$ 477.66
24145		A	090	Y	Y	N	D	N	\$ 403.92	\$ 403.92
24147		A	090	Y	Y	N	D	N	\$ 424.16	\$ 424.16
24149		A	090	Y	Y	Y	D	N	\$ 797.95	\$ 797.95
24150		A	090	Y	Y	Y	D	N	\$ 1,060.88	\$ 1,060.88

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
24152		A	090	Y	Y	Y	D	N	\$ 920.86	\$ 920.86
24155		A	090	Y	Y	Y	D	N	\$ 582.26	\$ 582.26
24160		A	090	Y	Y	N	D	N	\$ 858.92	\$ 858.92
24164		A	090	Y	Y	N	D	N	\$ 489.47	\$ 489.47
24200		A	010	Y	Y	D	N	N	\$ 94.71	\$ 144.36
24201		A	090	Y	Y	N	N	N	\$ 247.03	\$ 365.60
24220		A	000	Y	Y	D	N	N	\$ 46.51	\$ 124.12
24300		A	090	Y	Y	N	N	N	\$ 284.14	\$ 284.14
24301		A	090	Y	N	Y	D	N	\$ 510.92	\$ 510.92
24305		A	090	Y	N	D	N	N	\$ 392.11	\$ 392.11
24310		A	090	Y	N	D	N	N	\$ 321.01	\$ 321.01
24320		A	090	Y	N	Y	D	N	\$ 532.13	\$ 532.13
24330		A	090	Y	Y	Y	N	N	\$ 488.27	\$ 488.27
24331		A	090	Y	Y	Y	N	N	\$ 536.47	\$ 536.47
24332		A	090	Y	Y	N	N	N	\$ 416.45	\$ 416.45
24340		A	090	Y	Y	Y	D	N	\$ 419.10	\$ 419.10
24341		A	090	Y	Y	Y	D	N	\$ 502.73	\$ 502.73
24342		A	090	Y	Y	Y	D	N	\$ 528.27	\$ 528.27
24343		A	090	Y	Y	Y	D	N	\$ 481.28	\$ 481.28
24344		A	090	Y	Y	Y	D	N	\$ 742.76	\$ 742.76
24345		A	090	Y	Y	Y	D	N	\$ 478.63	\$ 478.63
24346		A	090	Y	Y	Y	D	N	\$ 750.23	\$ 750.23
24357		A	090	Y	Y	D	N	N	\$ 279.56	\$ 279.56
24358		A	090	Y	Y	D	N	N	\$ 356.20	\$ 356.20
24359		A	090	Y	Y	D	N	N	\$ 449.22	\$ 449.22
24360		A	090	Y	Y	Y	D	N	\$ 615.51	\$ 615.51
24361		A	090	Y	Y	Y	D	N	\$ 688.06	\$ 688.06
24362		A	090	Y	Y	Y	N	N	\$ 725.17	\$ 725.17
24363		A	090	Y	Y	Y	N	N	\$ 992.20	\$ 992.20
24365		A	090	Y	Y	Y	D	N	\$ 436.45	\$ 436.45
24366		A	090	Y	Y	Y	D	N	\$ 463.20	\$ 463.20
24370		A	090	Y	Y	Y	N	N	\$ 1,052.93	\$ 1,052.93
24371		A	090	Y	Y	Y	N	N	\$ 1,214.16	\$ 1,214.16
24400		A	090	Y	Y	Y	D	N	\$ 561.29	\$ 561.29
24410		A	090	Y	Y	Y	D	N	\$ 722.28	\$ 722.28
24420		A	090	Y	Y	Y	D	N	\$ 713.60	\$ 713.60
24430		A	090	Y	Y	Y	D	N	\$ 720.59	\$ 720.59
24435		A	090	Y	Y	Y	D	N	\$ 734.57	\$ 734.57
24470		A	090	Y	Y	Y	N	N	\$ 456.21	\$ 456.21
24495		A	090	Y	Y	D	N	N	\$ 510.20	\$ 510.20
24498		A	090	Y	Y	Y	D	N	\$ 590.93	\$ 590.93
24500		A	090	Y	Y	N	N	N	\$ 221.00	\$ 238.83

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
24505		A	090	Y	Y	N	N	N	\$ 304.62	\$ 336.20
24515		A	090	Y	Y	Y	D	N	\$ 598.40	\$ 598.40
24516		A	090	Y	Y	Y	Y	N	\$ 586.59	\$ 586.59
24530		A	090	Y	Y	N	N	N	\$ 233.29	\$ 253.29
24535		A	090	Y	Y	N	N	N	\$ 386.32	\$ 417.65
24538		A	090	Y	Y	N	N	N	\$ 527.07	\$ 527.07
24545		A	090	Y	Y	Y	D	N	\$ 632.38	\$ 632.38
24546		A	090	Y	Y	Y	Y	N	\$ 707.34	\$ 707.34
24560		A	090	Y	Y	N	N	N	\$ 196.66	\$ 220.03
24565		A	090	Y	Y	N	N	N	\$ 332.10	\$ 361.26
24566		A	090	Y	Y	N	N	N	\$ 487.06	\$ 487.06
24575		A	090	Y	Y	Y	D	N	\$ 495.74	\$ 495.74
24576		A	090	Y	Y	N	N	N	\$ 207.02	\$ 230.88
24577		A	090	Y	Y	N	N	N	\$ 341.74	\$ 372.10
24579		A	090	Y	Y	Y	D	N	\$ 566.11	\$ 566.11
24582		A	090	Y	Y	N	N	N	\$ 549.24	\$ 549.24
24586		A	090	Y	Y	Y	D	N	\$ 742.28	\$ 742.28
24587		A	090	Y	Y	Y	D	N	\$ 743.49	\$ 743.49
24600		A	090	Y	Y	N	N	N	\$ 228.95	\$ 250.40
24605		A	090	Y	Y	N	N	N	\$ 321.25	\$ 321.25
24615		A	090	Y	Y	Y	D	N	\$ 485.13	\$ 485.13
24620		A	090	Y	Y	D	N	N	\$ 381.02	\$ 381.02
24635		A	090	Y	Y	Y	D	N	\$ 457.42	\$ 457.42
24640		A	010	Y	Y	D	N	N	\$ 53.26	\$ 67.96
24650		A	090	Y	Y	N	N	N	\$ 162.19	\$ 174.00
24655		A	090	Y	Y	N	N	N	\$ 269.44	\$ 295.95
24665		A	090	Y	Y	Y	D	N	\$ 444.16	\$ 444.16
24666		A	090	Y	Y	Y	D	N	\$ 497.42	\$ 497.42
24670		A	090	Y	Y	N	N	N	\$ 177.38	\$ 193.04
24675		A	090	Y	Y	N	N	N	\$ 279.80	\$ 306.55
24685		A	090	Y	Y	Y	D	N	\$ 442.24	\$ 442.24
24800		A	090	Y	Y	Y	D	N	\$ 566.83	\$ 566.83
24802		A	090	Y	Y	Y	N	N	\$ 684.68	\$ 684.68
24900		A	090	Y	Y	Y	D	N	\$ 501.76	\$ 501.76
24920		A	090	Y	Y	Y	D	N	\$ 499.35	\$ 499.35
24925		A	090	Y	Y	Y	N	N	\$ 385.36	\$ 385.36
24930		A	090	Y	Y	Y	N	N	\$ 528.03	\$ 528.03
24931		A	090	Y	Y	Y	N	N	\$ 636.72	\$ 636.72
24935		A	090	Y	Y	D	N	N	\$ 823.98	\$ 823.98
24940		C	090	Y	Y	Y	N	N	\$ -	\$ -
24999		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
25000		A	090	Y	Y	N	N	N	\$ 227.50	\$ 227.50

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
25001		A	090	Y	Y	N	N	N	\$ 229.19	\$ 229.19
25020		A	090	Y	Y	N	N	N	\$ 467.06	\$ 467.06
25023		A	090	Y	Y	D	N	N	\$ 857.72	\$ 857.72
25024		A	090	Y	Y	N	N	N	\$ 531.16	\$ 531.16
25025		A	090	Y	Y	D	N	N	\$ 814.10	\$ 814.10
25028		A	090	Y	Y	N	N	N	\$ 433.80	\$ 433.80
25031		A	090	Y	Y	D	N	N	\$ 246.78	\$ 246.78
25035		A	090	Y	Y	D	N	N	\$ 396.20	\$ 396.20
25040		A	090	Y	Y	D	N	N	\$ 379.33	\$ 379.33
25065		A	010	Y	Y	N	N	N	\$ 105.08	\$ 167.98
25066		A	090	Y	Y	N	N	N	\$ 241.96	\$ 241.96
25071		A	090	Y	Y	Y	N	N	\$ 289.20	\$ 289.20
25073		A	090	Y	Y	Y	N	N	\$ 362.95	\$ 362.95
25075		A	090	Y	Y	N	N	N	\$ 212.32	\$ 341.98
25076		A	090	Y	Y	N	N	N	\$ 348.97	\$ 348.97
25077		A	090	Y	Y	N	N	N	\$ 607.56	\$ 607.56
25078		A	090	Y	Y	Y	N	N	\$ 799.64	\$ 799.64
25085		A	090	Y	Y	Y	N	N	\$ 302.70	\$ 302.70
25100		A	090	Y	Y	D	N	N	\$ 234.25	\$ 234.25
25101		A	090	Y	Y	D	N	N	\$ 271.61	\$ 271.61
25105		A	090	Y	Y	D	D	N	\$ 327.52	\$ 327.52
25107		A	090	Y	Y	Y	D	N	\$ 415.24	\$ 415.24
25109		A	090	Y	Y	N	N	N	\$ 360.54	\$ 360.54
25110		A	090	Y	Y	N	N	N	\$ 230.64	\$ 230.64
25111		A	090	Y	Y	N	N	N	\$ 215.45	\$ 215.45
25112		A	090	Y	Y	N	N	N	\$ 261.00	\$ 261.00
25115		A	090	Y	Y	N	N	N	\$ 510.92	\$ 510.92
25116		A	090	Y	Y	D	D	N	\$ 405.60	\$ 405.60
25118		A	090	Y	Y	N	N	N	\$ 255.70	\$ 255.70
25119		A	090	Y	Y	Y	D	N	\$ 335.95	\$ 335.95
25120		A	090	Y	Y	D	D	N	\$ 337.88	\$ 337.88
25125		A	090	Y	Y	D	N	N	\$ 403.19	\$ 403.19
25126		A	090	Y	Y	Y	N	N	\$ 406.57	\$ 406.57
25130		A	090	Y	Y	D	N	N	\$ 302.21	\$ 302.21
25135		A	090	Y	Y	Y	D	N	\$ 379.82	\$ 379.82
25136		A	090	Y	Y	Y	D	N	\$ 336.68	\$ 336.68
25145		A	090	Y	Y	Y	N	N	\$ 352.34	\$ 352.34
25150		A	090	Y	Y	N	D	N	\$ 383.91	\$ 383.91
25151		A	090	Y	Y	Y	D	N	\$ 396.20	\$ 396.20
25170		A	090	Y	Y	Y	D	N	\$ 1,007.62	\$ 1,007.62
25210		A	090	Y	N	D	D	N	\$ 331.38	\$ 331.38
25215		A	090	Y	Y	Y	D	N	\$ 418.14	\$ 418.14

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
25230		A	090	Y	Y	N	D	N	\$ 290.89	\$ 290.89
25240		A	090	Y	Y	D	D	N	\$ 288.96	\$ 288.96
25246		A	000	Y	Y	N	N	N	\$ 50.85	\$ 127.49
25248		A	090	Y	Y	N	N	N	\$ 283.90	\$ 283.90
25250		A	090	Y	Y	Y	N	N	\$ 361.74	\$ 361.74
25251		A	090	Y	Y	Y	N	N	\$ 489.23	\$ 489.23
25259		A	090	Y	Y	N	N	N	\$ 280.52	\$ 280.52
25260		A	090	Y	N	N	N	N	\$ 426.33	\$ 426.33
25263		A	090	Y	N	Y	N	N	\$ 428.74	\$ 428.74
25265		A	090	Y	N	Y	N	N	\$ 511.16	\$ 511.16
25270		A	090	Y	N	D	N	N	\$ 332.58	\$ 332.58
25272		A	090	Y	N	D	N	N	\$ 379.82	\$ 379.82
25274		A	090	Y	N	D	D	N	\$ 450.43	\$ 450.43
25275		A	090	Y	Y	D	D	N	\$ 454.29	\$ 454.29
25280		A	090	Y	N	D	D	N	\$ 382.95	\$ 382.95
25290		A	090	Y	N	N	N	N	\$ 293.30	\$ 293.30
25295		A	090	Y	N	N	N	N	\$ 355.23	\$ 355.23
25300		A	090	Y	Y	Y	N	N	\$ 468.02	\$ 468.02
25301		A	090	Y	Y	Y	N	N	\$ 435.97	\$ 435.97
25310		A	090	Y	N	Y	D	N	\$ 419.10	\$ 419.10
25312		A	090	Y	N	Y	D	N	\$ 484.17	\$ 484.17
25315		A	090	Y	Y	Y	N	N	\$ 524.66	\$ 524.66
25316		A	090	Y	Y	Y	N	N	\$ 625.15	\$ 625.15
25320		A	090	Y	Y	Y	N	N	\$ 662.03	\$ 662.03
25332		A	090	Y	Y	Y	N	N	\$ 573.82	\$ 573.82
25335		A	090	Y	Y	Y	N	N	\$ 644.68	\$ 644.68
25337		A	090	Y	Y	N	N	N	\$ 598.64	\$ 598.64
25350		A	090	Y	Y	Y	N	N	\$ 456.70	\$ 456.70
25355		A	090	Y	Y	Y	N	N	\$ 521.52	\$ 521.52
25360		A	090	Y	Y	Y	D	N	\$ 442.96	\$ 442.96
25365		A	090	Y	Y	Y	N	N	\$ 625.64	\$ 625.64
25370		A	090	Y	Y	Y	N	N	\$ 689.02	\$ 689.02
25375		A	090	Y	Y	Y	D	N	\$ 651.66	\$ 651.66
25390		A	090	Y	Y	Y	D	N	\$ 522.25	\$ 522.25
25391		A	090	Y	Y	Y	D	N	\$ 680.83	\$ 680.83
25392		A	090	Y	Y	Y	N	N	\$ 693.12	\$ 693.12
25393		A	090	Y	Y	Y	N	N	\$ 773.61	\$ 773.61
25394		A	090	Y	Y	Y	D	N	\$ 534.30	\$ 534.30
25400		A	090	Y	Y	Y	D	N	\$ 546.35	\$ 546.35
25405		A	090	Y	Y	Y	D	N	\$ 706.13	\$ 706.13
25415		A	090	Y	Y	Y	D	N	\$ 661.55	\$ 661.55
25420		A	090	Y	Y	Y	D	N	\$ 798.67	\$ 798.67

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
25425		A	090	Y	Y	Y	D	N	\$ 658.41	\$ 658.41
25426		A	090	Y	Y	Y	D	N	\$ 768.79	\$ 768.79
25430		A	090	Y	Y	N	N	N	\$ 495.98	\$ 495.98
25431		A	090	Y	Y	Y	D	N	\$ 536.95	\$ 536.95
25440		A	090	Y	Y	Y	D	N	\$ 521.52	\$ 521.52
25441		A	090	Y	Y	Y	D	N	\$ 640.34	\$ 640.34
25442		A	090	Y	Y	Y	D	N	\$ 547.55	\$ 547.55
25443		A	090	Y	Y	Y	D	N	\$ 533.82	\$ 533.82
25444		A	090	Y	Y	Y	N	N	\$ 562.01	\$ 562.01
25445		A	090	Y	Y	N	D	N	\$ 488.99	\$ 488.99
25446		A	090	Y	Y	Y	D	N	\$ 798.67	\$ 798.67
25447		A	090	Y	Y	Y	D	N	\$ 560.81	\$ 560.81
25449		A	090	Y	Y	Y	D	N	\$ 703.00	\$ 703.00
25450		A	090	Y	Y	N	N	N	\$ 419.10	\$ 419.10
25455		A	090	Y	Y	N	N	N	\$ 495.74	\$ 495.74
25490		A	090	Y	Y	Y	N	N	\$ 488.75	\$ 488.75
25491		A	090	Y	Y	Y	N	N	\$ 502.97	\$ 502.97
25492		A	090	Y	Y	Y	N	N	\$ 617.92	\$ 617.92
25500		A	090	Y	Y	N	N	N	\$ 170.39	\$ 187.02
25505		A	090	Y	Y	N	N	N	\$ 308.24	\$ 336.68
25515		A	090	Y	Y	Y	D	N	\$ 453.08	\$ 453.08
25520		A	090	Y	Y	N	N	N	\$ 366.80	\$ 387.29
25525		A	090	Y	Y	Y	Y	N	\$ 533.57	\$ 533.57
25526		A	090	Y	Y	Y	Y	N	\$ 649.98	\$ 649.98
25530		A	090	Y	Y	N	N	N	\$ 160.27	\$ 174.00
25535		A	090	Y	Y	N	N	N	\$ 307.76	\$ 331.86
25545		A	090	Y	Y	Y	D	N	\$ 421.03	\$ 421.03
25560		A	090	Y	Y	N	N	N	\$ 171.11	\$ 190.39
25565		A	090	Y	Y	N	N	N	\$ 314.51	\$ 347.52
25574		A	090	Y	Y	Y	Y	N	\$ 456.70	\$ 456.70
25575		A	090	Y	Y	Y	D	N	\$ 613.35	\$ 613.35
25600		A	090	Y	Y	N	N	N	\$ 210.88	\$ 220.76
25605		A	090	Y	Y	N	N	N	\$ 345.35	\$ 364.15
25606		A	090	Y	Y	N	N	N	\$ 448.98	\$ 448.98
25607		A	090	Y	Y	Y	N	N	\$ 498.63	\$ 498.63
25608		A	090	Y	Y	Y	N	N	\$ 559.84	\$ 559.84
25609		A	090	Y	Y	Y	N	N	\$ 711.67	\$ 711.67
25622		A	090	Y	Y	N	N	N	\$ 187.50	\$ 202.20
25624		A	090	Y	Y	D	N	N	\$ 296.43	\$ 325.11
25628		A	090	Y	Y	Y	N	N	\$ 487.78	\$ 487.78
25630		A	090	Y	Y	N	N	N	\$ 189.43	\$ 203.16
25635		A	090	Y	Y	D	N	N	\$ 282.69	\$ 309.44

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
25645		A	090	Y	Y	Y	N	N	\$ 387.53	\$ 387.53
25650		A	090	Y	Y	N	N	N	\$ 203.65	\$ 218.83
25651		A	090	Y	Y	D	N	N	\$ 328.72	\$ 328.72
25652		A	090	Y	Y	N	D	N	\$ 420.55	\$ 420.55
25660		A	090	Y	Y	D	N	N	\$ 299.56	\$ 299.56
25670		A	090	Y	Y	Y	D	N	\$ 413.56	\$ 413.56
25671		A	090	Y	Y	N	N	N	\$ 358.61	\$ 358.61
25675		A	090	Y	Y	D	N	N	\$ 271.61	\$ 298.36
25676		A	090	Y	Y	Y	N	N	\$ 427.53	\$ 427.53
25680		A	090	Y	Y	D	N	N	\$ 355.72	\$ 355.72
25685		A	090	Y	Y	Y	N	N	\$ 500.32	\$ 500.32
25690		A	090	Y	Y	D	N	N	\$ 329.69	\$ 329.69
25695		A	090	Y	Y	Y	D	N	\$ 432.35	\$ 432.35
25800		A	090	Y	Y	Y	D	N	\$ 496.94	\$ 496.94
25805		A	090	Y	Y	Y	D	N	\$ 577.20	\$ 577.20
25810		A	090	Y	Y	Y	D	N	\$ 586.84	\$ 586.84
25820		A	090	Y	Y	Y	D	N	\$ 433.32	\$ 433.32
25825		A	090	Y	Y	Y	D	N	\$ 530.20	\$ 530.20
25830		A	090	Y	Y	Y	D	N	\$ 674.08	\$ 674.08
25900		A	090	Y	Y	D	N	N	\$ 486.10	\$ 486.10
25905		A	090	Y	Y	Y	N	N	\$ 478.14	\$ 478.14
25907		A	090	Y	Y	Y	N	N	\$ 417.65	\$ 417.65
25909		A	090	Y	Y	Y	N	N	\$ 466.34	\$ 466.34
25915		A	090	Y	Y	Y	N	N	\$ 800.84	\$ 800.84
25920		A	090	Y	Y	D	N	N	\$ 491.16	\$ 491.16
25922		A	090	Y	Y	Y	N	N	\$ 432.84	\$ 432.84
25924		A	090	Y	Y	Y	N	N	\$ 479.83	\$ 479.83
25927		A	090	Y	Y	D	N	N	\$ 576.47	\$ 576.47
25929		A	090	Y	Y	Y	N	N	\$ 406.33	\$ 406.33
25931		A	090	Y	Y	N	N	N	\$ 531.65	\$ 531.65
25999		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
26010		A	010	Y	N	N	N	N	\$ 92.79	\$ 214.01
26011		A	010	Y	N	N	N	N	\$ 124.36	\$ 305.35
26020		A	090	Y	N	N	N	N	\$ 373.55	\$ 373.55
26025		A	090	Y	Y	D	N	N	\$ 283.66	\$ 283.66
26030		A	090	Y	Y	D	N	N	\$ 330.41	\$ 330.41
26034		A	090	Y	N	N	N	N	\$ 368.73	\$ 368.73
26035		A	090	Y	N	D	N	N	\$ 583.46	\$ 583.46
26037		A	090	Y	Y	D	N	N	\$ 381.99	\$ 381.99
26040		A	090	Y	Y	N	N	N	\$ 210.15	\$ 210.15
26045		A	090	Y	Y	N	N	N	\$ 317.40	\$ 317.40
26055		A	090	Y	N	N	N	N	\$ 193.52	\$ 376.92

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
26060		A	090	Y	N	D	N	N	\$ 170.87	\$ 170.87
26070		A	090	Y	Y	N	N	N	\$ 216.18	\$ 216.18
26075		A	090	Y	Y	N	N	N	\$ 225.82	\$ 225.82
26080		A	090	Y	N	N	N	N	\$ 265.10	\$ 265.10
26100		A	090	Y	Y	D	N	N	\$ 226.78	\$ 226.78
26105		A	090	Y	Y	D	N	N	\$ 228.23	\$ 228.23
26110		A	090	Y	N	N	N	N	\$ 216.42	\$ 216.42
26111		A	090	Y	N	Y	N	N	\$ 280.77	\$ 280.77
26113		A	090	Y	N	Y	N	N	\$ 368.49	\$ 368.49
26115		A	090	Y	N	N	N	N	\$ 221.48	\$ 359.33
26116		A	090	Y	N	N	N	N	\$ 353.79	\$ 353.79
26117		A	090	Y	N	N	N	N	\$ 501.28	\$ 501.28
26118		A	090	Y	N	Y	N	N	\$ 715.53	\$ 715.53
26121		A	090	Y	Y	N	N	N	\$ 404.64	\$ 404.64
26123		A	090	Y	Y	N	N	N	\$ 562.74	\$ 562.74
26125		A	ZZZ	N	N	N	N	N	\$ 186.29	\$ 186.29
26130		A	090	Y	Y	N	N	N	\$ 315.47	\$ 315.47
26135		A	090	Y	N	D	N	N	\$ 373.55	\$ 373.55
26140		A	090	Y	N	N	N	N	\$ 341.50	\$ 341.50
26145		A	090	Y	N	N	N	N	\$ 346.80	\$ 346.80
26160		A	090	Y	N	N	N	N	\$ 210.63	\$ 393.55
26170		A	090	Y	N	D	N	N	\$ 273.54	\$ 273.54
26180		A	090	Y	N	D	N	N	\$ 300.77	\$ 300.77
26185		A	090	Y	Y	Y	D	N	\$ 373.31	\$ 373.31
26200		A	090	Y	N	D	N	N	\$ 303.66	\$ 303.66
26205		A	090	Y	N	N	N	N	\$ 411.15	\$ 411.15
26210		A	090	Y	N	N	N	N	\$ 299.32	\$ 299.32
26215		A	090	Y	N	N	N	N	\$ 384.64	\$ 384.64
26230		A	090	Y	N	D	N	N	\$ 337.64	\$ 337.64
26235		A	090	Y	N	D	N	N	\$ 332.58	\$ 332.58
26236		A	090	Y	N	N	N	N	\$ 297.15	\$ 297.15
26250		A	090	Y	N	D	N	N	\$ 726.86	\$ 726.86
26260		A	090	Y	N	Y	N	N	\$ 543.46	\$ 543.46
26262		A	090	Y	N	Y	N	N	\$ 427.05	\$ 427.05
26320		A	090	Y	N	N	N	N	\$ 234.25	\$ 234.25
26340		A	090	Y	Y	N	N	N	\$ 226.30	\$ 226.30
26341		Not Covered	010	Y	Y	N	N	N	\$ 51.57	\$ 73.51
26350		A	090	Y	N	N	N	N	\$ 491.40	\$ 491.40
26352		A	090	Y	N	Y	D	N	\$ 555.51	\$ 555.51
26356		A	090	Y	N	N	N	N	\$ 534.30	\$ 534.30
26357		A	090	Y	N	Y	N	N	\$ 602.98	\$ 602.98
26358		A	090	Y	N	Y	N	N	\$ 667.81	\$ 667.81

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
26370		A	090	Y	N	D	N	N	\$ 523.21	\$ 523.21
26372		A	090	Y	N	Y	N	N	\$ 613.59	\$ 613.59
26373		A	090	Y	N	Y	N	N	\$ 589.00	\$ 589.00
26390		A	090	Y	N	Y	D	N	\$ 587.80	\$ 587.80
26392		A	090	Y	N	Y	D	N	\$ 674.08	\$ 674.08
26410		A	090	Y	N	N	N	N	\$ 394.52	\$ 394.52
26412		A	090	Y	N	D	N	N	\$ 474.77	\$ 474.77
26415		A	090	Y	N	D	N	N	\$ 569.72	\$ 569.72
26416		A	090	Y	N	N	N	N	\$ 616.96	\$ 616.96
26418		A	090	Y	N	N	N	N	\$ 404.88	\$ 404.88
26420		A	090	Y	N	Y	N	N	\$ 493.33	\$ 493.33
26426		A	090	Y	N	N	N	N	\$ 339.33	\$ 339.33
26428		A	090	Y	N	D	N	N	\$ 529.48	\$ 529.48
26432		A	090	Y	N	N	N	N	\$ 354.03	\$ 354.03
26433		A	090	Y	N	N	N	N	\$ 375.24	\$ 375.24
26434		A	090	Y	N	Y	N	N	\$ 459.35	\$ 459.35
26437		A	090	Y	N	N	N	N	\$ 439.10	\$ 439.10
26440		A	090	Y	N	N	N	N	\$ 429.46	\$ 429.46
26442		A	090	Y	N	N	N	N	\$ 656.73	\$ 656.73
26445		A	090	Y	N	N	N	N	\$ 399.34	\$ 399.34
26449		A	090	Y	N	D	N	N	\$ 467.78	\$ 467.78
26450		A	090	Y	N	D	N	N	\$ 297.88	\$ 297.88
26455		A	090	Y	N	D	N	N	\$ 295.47	\$ 295.47
26460		A	090	Y	N	N	N	N	\$ 290.16	\$ 290.16
26471		A	090	Y	N	D	N	N	\$ 434.04	\$ 434.04
26474		A	090	Y	N	Y	N	N	\$ 428.26	\$ 428.26
26476		A	090	Y	N	N	N	N	\$ 422.47	\$ 422.47
26477		A	090	Y	N	N	D	N	\$ 410.18	\$ 410.18
26478		A	090	Y	N	D	N	N	\$ 436.93	\$ 436.93
26479		A	090	Y	N	Y	N	N	\$ 445.13	\$ 445.13
26480		A	090	Y	N	D	N	N	\$ 520.32	\$ 520.32
26483		A	090	Y	N	Y	D	N	\$ 580.81	\$ 580.81
26485		A	090	Y	N	Y	D	N	\$ 557.19	\$ 557.19
26489		A	090	Y	N	D	N	N	\$ 647.09	\$ 647.09
26490		A	090	Y	N	D	N	N	\$ 559.36	\$ 559.36
26492		A	090	Y	N	Y	D	N	\$ 618.89	\$ 618.89
26494		A	090	Y	N	Y	D	N	\$ 561.77	\$ 561.77
26496		A	090	Y	N	D	N	N	\$ 606.60	\$ 606.60
26497		A	090	Y	N	Y	N	N	\$ 605.87	\$ 605.87
26498		A	090	Y	N	Y	D	N	\$ 796.02	\$ 796.02
26499		A	090	Y	N	Y	D	N	\$ 582.50	\$ 582.50
26500		A	090	Y	N	D	N	N	\$ 436.93	\$ 436.93

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
26502		A	090	Y	N	Y	N	N	\$ 501.76	\$ 501.76
26508		A	090	Y	Y	D	N	N	\$ 445.13	\$ 445.13
26510		A	090	Y	N	D	N	N	\$ 421.75	\$ 421.75
26516		A	090	Y	Y	D	N	N	\$ 493.33	\$ 493.33
26517		A	090	Y	Y	Y	N	N	\$ 578.88	\$ 578.88
26518		A	090	Y	Y	Y	D	N	\$ 586.11	\$ 586.11
26520		A	090	Y	N	N	N	N	\$ 450.19	\$ 450.19
26525		A	090	Y	N	N	D	N	\$ 451.15	\$ 451.15
26530		A	090	Y	N	Y	N	N	\$ 364.39	\$ 364.39
26531		A	090	Y	N	Y	D	N	\$ 424.88	\$ 424.88
26535		A	090	Y	N	N	N	N	\$ 293.78	\$ 293.78
26536		A	090	Y	N	D	N	N	\$ 495.26	\$ 495.26
26540		A	090	Y	N	D	D	N	\$ 462.48	\$ 462.48
26541		A	090	Y	N	Y	D	N	\$ 555.99	\$ 555.99
26542		A	090	Y	N	D	N	N	\$ 478.39	\$ 478.39
26545		A	090	Y	N	D	N	N	\$ 485.62	\$ 485.62
26546		A	090	Y	Y	Y	N	N	\$ 685.40	\$ 685.40
26548		A	090	Y	N	D	N	N	\$ 531.16	\$ 531.16
26550		A	090	Y	Y	Y	N	N	\$ 1,130.29	\$ 1,130.29
26551		A	090	Y	Y	Y	N	N	\$ 2,265.88	\$ 2,265.88
26553		A	090	Y	Y	Y	D	N	\$ 2,250.46	\$ 2,250.46
26554		A	090	Y	Y	Y	D	N	\$ 2,623.53	\$ 2,623.53
26555		A	090	Y	N	Y	N	N	\$ 944.24	\$ 944.24
26556		A	090	Y	N	Y	D	N	\$ 2,337.46	\$ 2,337.46
26560		A	090	Y	N	Y	N	N	\$ 419.10	\$ 419.10
26561		A	090	Y	N	Y	D	N	\$ 660.58	\$ 660.58
26562		A	090	Y	N	Y	N	N	\$ 927.61	\$ 927.61
26565		A	090	Y	N	Y	N	N	\$ 486.34	\$ 486.34
26567		A	090	Y	N	D	N	N	\$ 477.42	\$ 477.42
26568		A	090	Y	N	Y	N	N	\$ 623.71	\$ 623.71
26580		A	090	Y	Y	Y	N	N	\$ 1,045.22	\$ 1,045.22
26587		A	090	Y	N	Y	N	N	\$ 709.99	\$ 709.99
26590		A	090	Y	N	Y	N	N	\$ 974.60	\$ 974.60
26591		A	090	Y	N	D	N	N	\$ 314.99	\$ 314.99
26593		A	090	Y	N	N	N	N	\$ 423.68	\$ 423.68
26596		A	090	Y	N	Y	N	N	\$ 543.70	\$ 543.70
26600		A	090	Y	N	N	N	N	\$ 187.74	\$ 197.14
26605		A	090	Y	N	N	N	N	\$ 197.14	\$ 217.38
26607		A	090	Y	N	D	N	N	\$ 337.40	\$ 337.40
26608		A	090	Y	N	D	N	N	\$ 322.94	\$ 322.94
26615		A	090	Y	N	N	N	N	\$ 387.29	\$ 387.29
26641		A	090	Y	Y	D	N	N	\$ 254.74	\$ 278.11

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
26645		A	090	Y	Y	D	N	N	\$ 266.06	\$ 290.41
26650		A	090	Y	Y	N	N	N	\$ 322.22	\$ 322.22
26665		A	090	Y	Y	N	D	N	\$ 421.99	\$ 421.99
26670		A	090	Y	N	D	N	N	\$ 210.63	\$ 233.29
26675		A	090	Y	N	D	N	N	\$ 283.42	\$ 308.48
26676		A	090	Y	N	N	N	N	\$ 340.29	\$ 340.29
26685		A	090	Y	N	N	D	N	\$ 387.05	\$ 387.05
26686		A	090	Y	N	Y	N	N	\$ 423.68	\$ 423.68
26700		A	090	Y	N	N	N	N	\$ 209.19	\$ 225.09
26705		A	090	Y	N	D	N	N	\$ 257.63	\$ 281.97
26706		A	090	Y	N	N	N	N	\$ 299.56	\$ 299.56
26715		A	090	Y	N	D	N	N	\$ 385.12	\$ 385.12
26720		A	090	Y	N	N	N	N	\$ 123.63	\$ 131.35
26725		A	090	Y	N	N	N	N	\$ 203.65	\$ 227.02
26727		A	090	Y	N	N	N	N	\$ 317.64	\$ 317.64
26735		A	090	Y	N	N	N	N	\$ 400.54	\$ 400.54
26740		A	090	Y	N	N	N	N	\$ 144.84	\$ 152.55
26742		A	090	Y	N	N	N	N	\$ 226.78	\$ 250.64
26746		A	090	Y	N	N	N	N	\$ 501.76	\$ 501.76
26750		A	090	Y	N	N	N	N	\$ 124.12	\$ 123.63
26755		A	090	Y	N	N	N	N	\$ 185.33	\$ 213.04
26756		A	090	Y	N	D	N	N	\$ 281.97	\$ 281.97
26765		A	090	Y	N	N	N	N	\$ 335.47	\$ 335.47
26770		A	090	Y	N	N	N	N	\$ 174.73	\$ 190.39
26775		A	090	Y	N	N	N	N	\$ 234.73	\$ 260.04
26776		A	090	Y	N	N	N	N	\$ 300.29	\$ 300.29
26785		A	090	Y	N	N	N	N	\$ 366.80	\$ 366.80
26820		A	090	Y	Y	Y	D	N	\$ 552.85	\$ 552.85
26841		A	090	Y	Y	D	D	N	\$ 510.68	\$ 510.68
26842		A	090	Y	Y	Y	D	N	\$ 554.78	\$ 554.78
26843		A	090	Y	N	Y	D	N	\$ 521.04	\$ 521.04
26844		A	090	Y	N	Y	D	N	\$ 574.54	\$ 574.54
26850		A	090	Y	N	D	N	N	\$ 486.10	\$ 486.10
26852		A	090	Y	N	Y	D	N	\$ 554.06	\$ 554.06
26860		A	090	Y	N	N	N	N	\$ 398.61	\$ 398.61
26861		A	ZZZ	N	N	N	N	N	\$ 70.85	\$ 70.85
26862		A	090	Y	N	Y	D	N	\$ 507.31	\$ 507.31
26863		A	ZZZ	N	N	Y	N	N	\$ 156.89	\$ 156.89
26910		A	090	Y	N	N	N	N	\$ 506.10	\$ 506.10
26951		A	090	Y	N	N	N	N	\$ 457.66	\$ 457.66
26952		A	090	Y	N	N	N	N	\$ 450.91	\$ 450.91
26989		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
26990		A	090	Y	N	N	N	N	\$ 453.32	\$ 453.32
26991		A	090	Y	N	D	N	N	\$ 357.16	\$ 477.18
26992		A	090	Y	N	D	N	N	\$ 682.51	\$ 682.51
27000		A	090	Y	Y	N	D	N	\$ 273.29	\$ 273.29
27001		A	090	Y	Y	Y	D	N	\$ 368.25	\$ 368.25
27003		A	090	Y	Y	Y	D	N	\$ 406.09	\$ 406.09
27005		A	090	Y	Y	Y	D	N	\$ 489.23	\$ 489.23
27006		A	090	Y	Y	Y	D	N	\$ 486.82	\$ 486.82
27025		A	090	Y	Y	D	D	N	\$ 627.81	\$ 627.81
27027		A	090	Y	Y	D	N	N	\$ 602.50	\$ 602.50
27030		A	090	Y	Y	Y	D	N	\$ 641.30	\$ 641.30
27033		A	090	Y	Y	Y	D	N	\$ 665.40	\$ 665.40
27035		A	090	Y	Y	Y	D	N	\$ 763.01	\$ 763.01
27036		A	090	Y	Y	Y	D	N	\$ 692.15	\$ 692.15
27040		A	010	Y	Y	N	N	N	\$ 134.48	\$ 227.50
27041		A	090	Y	Y	N	N	N	\$ 479.83	\$ 479.83
27043		A	090	Y	Y	N	N	N	\$ 322.46	\$ 322.46
27045		A	090	Y	Y	Y	D	N	\$ 506.10	\$ 506.10
27047		A	090	Y	Y	N	N	N	\$ 244.37	\$ 328.24
27048		A	090	Y	Y	Y	D	N	\$ 419.58	\$ 419.58
27049		A	090	Y	Y	Y	D	N	\$ 933.63	\$ 933.63
27050		A	090	Y	Y	D	D	N	\$ 271.85	\$ 271.85
27052		A	090	Y	Y	Y	D	N	\$ 390.90	\$ 390.90
27054		A	090	Y	Y	Y	D	N	\$ 467.06	\$ 467.06
27057		A	090	Y	Y	D	N	N	\$ 692.63	\$ 692.63
27059		A	090	Y	Y	Y	D	N	\$ 1,249.34	\$ 1,249.34
27060		A	090	Y	Y	N	N	N	\$ 314.99	\$ 314.99
27062		A	090	Y	Y	N	D	N	\$ 307.52	\$ 307.52
27065		A	090	Y	Y	Y	D	N	\$ 354.99	\$ 354.99
27066		A	090	Y	Y	Y	D	N	\$ 555.75	\$ 555.75
27067		A	090	Y	Y	Y	N	N	\$ 706.13	\$ 706.13
27070		A	090	Y	Y	Y	D	N	\$ 599.85	\$ 599.85
27071		A	090	Y	Y	Y	D	N	\$ 654.07	\$ 654.07
27075		A	090	Y	N	Y	D	N	\$ 1,434.43	\$ 1,434.43
27076		A	090	Y	N	Y	D	N	\$ 1,738.82	\$ 1,738.82
27077		A	090	Y	N	Y	D	N	\$ 1,941.01	\$ 1,941.01
27078		A	090	Y	Y	Y	D	N	\$ 1,414.91	\$ 1,414.91
27080		A	090	Y	N	Y	D	N	\$ 348.73	\$ 348.73
27086		A	010	Y	Y	D	N	N	\$ 112.55	\$ 204.13
27087		A	090	Y	Y	Y	D	N	\$ 420.55	\$ 420.55
27090		A	090	Y	Y	Y	D	N	\$ 565.15	\$ 565.15
27091		A	090	Y	Y	Y	D	N	\$ 1,093.18	\$ 1,093.18

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
27093		A	000	Y	Y	N	N	N	\$ 47.24	\$ 151.11
27095		A	000	Y	Y	N	N	N	\$ 57.12	\$ 203.89
27096		A	000	Y	Y	N	N	N	\$ 56.39	\$ 107.25
27097		A	090	Y	Y	Y	N	N	\$ 464.41	\$ 464.41
27098		A	090	Y	Y	Y	N	N	\$ 472.12	\$ 472.12
27100		A	090	Y	Y	Y	D	N	\$ 564.42	\$ 564.42
27105		A	090	Y	Y	Y	N	N	\$ 592.62	\$ 592.62
27110		A	090	Y	Y	Y	D	N	\$ 662.27	\$ 662.27
27111		A	090	Y	Y	Y	D	N	\$ 615.76	\$ 615.76
27120		A	090	Y	Y	Y	D	N	\$ 889.53	\$ 889.53
27122		A	090	Y	Y	Y	D	N	\$ 753.85	\$ 753.85
27125		A	090	Y	Y	Y	D	N	\$ 773.85	\$ 773.85
27130		A	090	Y	Y	Y	D	N	\$ 882.78	\$ 882.78
27132		A	090	Y	Y	Y	D	N	\$ 1,147.88	\$ 1,147.88
27134		A	090	Y	Y	Y	D	N	\$ 1,313.93	\$ 1,313.93
27137		A	090	Y	Y	Y	D	N	\$ 1,008.34	\$ 1,008.34
27138		A	090	Y	Y	Y	D	N	\$ 1,048.11	\$ 1,048.11
27140		A	090	Y	Y	Y	D	N	\$ 609.01	\$ 609.01
27146		A	090	Y	Y	Y	D	N	\$ 875.79	\$ 875.79
27147		A	090	Y	Y	Y	D	N	\$ 1,003.04	\$ 1,003.04
27151		A	090	Y	Y	Y	D	N	\$ 1,085.95	\$ 1,085.95
27156		A	090	Y	Y	Y	D	N	\$ 1,170.78	\$ 1,170.78
27158		A	090	Y	B	Y	N	N	\$ 959.90	\$ 959.90
27161		A	090	Y	Y	Y	D	N	\$ 832.17	\$ 832.17
27165		A	090	Y	Y	Y	D	N	\$ 943.03	\$ 943.03
27170		A	090	Y	Y	Y	D	N	\$ 803.25	\$ 803.25
27175		A	090	Y	Y	D	N	N	\$ 454.53	\$ 454.53
27176		A	090	Y	Y	Y	D	N	\$ 628.53	\$ 628.53
27177		A	090	Y	Y	Y	D	N	\$ 762.04	\$ 762.04
27178		A	090	Y	Y	Y	D	N	\$ 628.53	\$ 628.53
27179		A	090	Y	Y	Y	N	N	\$ 668.05	\$ 668.05
27181		A	090	Y	Y	Y	N	N	\$ 765.18	\$ 765.18
27185		A	090	Y	Y	N	D	N	\$ 488.27	\$ 488.27
27187		A	090	Y	Y	Y	D	N	\$ 679.38	\$ 679.38
27197		A	000	Y	N	N	N	N	\$ 88.45	\$ 88.45
27198		A	000	Y	N	D	Y	N	\$ 216.66	\$ 216.66
27200		A	090	Y	N	N	N	N	\$ 124.12	\$ 123.15
27202		A	090	Y	N	Y	N	N	\$ 360.30	\$ 360.30
27215		A	090	N	N	N	N	N	\$ 407.29	\$ 407.29
27216		A	090	N	N	N	N	N	\$ 604.43	\$ 604.43
27217		A	090	N	N	N	N	N	\$ 567.80	\$ 567.80
27218		A	090	N	N	N	N	N	\$ 783.25	\$ 783.25

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
27220		A	090	Y	Y	N	N	N	\$ 280.28	\$ 283.90
27222		A	090	Y	Y	N	N	N	\$ 667.81	\$ 667.81
27226		A	090	Y	Y	Y	Y	N	\$ 723.00	\$ 723.00
27227		A	090	Y	Y	Y	Y	N	\$ 1,134.63	\$ 1,134.63
27228		A	090	Y	Y	Y	Y	N	\$ 1,291.04	\$ 1,291.04
27230		A	090	Y	Y	N	N	N	\$ 321.49	\$ 326.80
27232		A	090	Y	Y	N	N	N	\$ 511.40	\$ 511.40
27235		A	090	Y	Y	N	D	N	\$ 618.89	\$ 618.89
27236		A	090	Y	Y	Y	D	N	\$ 816.27	\$ 816.27
27238		A	090	Y	Y	N	N	N	\$ 314.99	\$ 314.99
27240		A	090	Y	Y	N	N	N	\$ 655.52	\$ 655.52
27244		A	090	Y	Y	Y	D	N	\$ 840.37	\$ 840.37
27245		A	090	Y	Y	Y	Y	N	\$ 839.40	\$ 839.40
27246		A	090	Y	Y	N	N	N	\$ 261.00	\$ 263.65
27248		A	090	Y	Y	Y	D	N	\$ 509.47	\$ 509.47
27250		A	000	Y	Y	N	N	N	\$ 128.94	\$ 128.94
27252		A	090	Y	Y	N	N	N	\$ 518.15	\$ 518.15
27253		A	090	Y	Y	Y	D	N	\$ 643.71	\$ 643.71
27254		A	090	Y	Y	Y	D	N	\$ 871.94	\$ 871.94
27256		A	010	Y	Y	D	N	N	\$ 166.05	\$ 207.50
27257		A	010	Y	Y	D	N	N	\$ 247.99	\$ 247.99
27258		A	090	Y	Y	Y	D	N	\$ 760.36	\$ 760.36
27259		A	090	Y	Y	Y	N	N	\$ 1,057.51	\$ 1,057.51
27265		A	090	Y	Y	N	N	N	\$ 274.74	\$ 274.74
27266		A	090	Y	Y	N	N	N	\$ 396.69	\$ 396.69
27267		A	090	Y	Y	Y	D	N	\$ 294.98	\$ 294.98
27268		A	090	Y	Y	Y	D	N	\$ 369.21	\$ 369.21
27269		A	090	Y	Y	Y	D	N	\$ 852.18	\$ 852.18
27275		A	010	Y	N	N	N	N	\$ 124.12	\$ 124.12
27279		A	090	Y	Y	Y	D	N	\$ 592.62	\$ 592.62
27280		A	090	Y	Y	Y	D	N	\$ 942.55	\$ 942.55
27282		A	090	Y	N	Y	D	N	\$ 584.67	\$ 584.67
27284		A	090	Y	Y	Y	D	N	\$ 1,104.74	\$ 1,104.74
27286		A	090	Y	Y	Y	D	N	\$ 1,128.12	\$ 1,128.12
27290		A	090	Y	N	Y	D	N	\$ 1,114.38	\$ 1,114.38
27295		A	090	Y	Y	Y	D	N	\$ 861.09	\$ 861.09
27299		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
27301		A	090	Y	Y	N	N	N	\$ 344.39	\$ 453.56
27303		A	090	Y	Y	Y	D	N	\$ 437.66	\$ 437.66
27305		A	090	Y	Y	Y	D	N	\$ 326.07	\$ 326.07
27306		A	090	Y	Y	Y	N	N	\$ 224.13	\$ 224.13
27307		A	090	Y	Y	D	D	N	\$ 324.87	\$ 324.87

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
27310		A	090	Y	Y	Y	D	N	\$ 497.67	\$ 497.67
27323		A	010	Y	Y	N	N	N	\$ 116.64	\$ 180.27
27324		A	090	Y	Y	N	N	N	\$ 275.95	\$ 275.95
27325		A	090	Y	Y	Y	N	N	\$ 382.23	\$ 382.23
27326		A	090	Y	Y	Y	D	N	\$ 352.58	\$ 352.58
27327		A	090	Y	Y	N	N	N	\$ 210.88	\$ 329.45
27328		A	090	Y	Y	N	N	N	\$ 425.85	\$ 425.85
27329		A	090	Y	Y	Y	D	N	\$ 715.29	\$ 715.29
27330		A	090	Y	Y	N	D	N	\$ 282.45	\$ 282.45
27331		A	090	Y	Y	Y	D	N	\$ 322.22	\$ 322.22
27332		A	090	Y	Y	Y	D	N	\$ 437.66	\$ 437.66
27333		A	090	Y	Y	Y	D	N	\$ 398.61	\$ 398.61
27334		A	090	Y	Y	Y	D	N	\$ 465.61	\$ 465.61
27335		A	090	Y	Y	Y	D	N	\$ 521.77	\$ 521.77
27337		A	090	Y	Y	Y	N	N	\$ 287.51	\$ 287.51
27339		A	090	Y	Y	Y	N	N	\$ 517.67	\$ 517.67
27340		A	090	Y	Y	N	N	N	\$ 250.64	\$ 250.64
27345		A	090	Y	Y	Y	D	N	\$ 327.52	\$ 327.52
27347		A	090	Y	Y	Y	D	N	\$ 357.16	\$ 357.16
27350		A	090	Y	Y	Y	D	N	\$ 443.68	\$ 443.68
27355		A	090	Y	Y	Y	D	N	\$ 411.15	\$ 411.15
27356		A	090	Y	Y	Y	D	N	\$ 502.97	\$ 502.97
27357		A	090	Y	Y	Y	D	N	\$ 555.99	\$ 555.99
27358		A	ZZZ	N	N	Y	N	N	\$ 191.60	\$ 191.60
27360		A	090	Y	Y	Y	D	N	\$ 606.60	\$ 606.60
27364		A	090	Y	Y	Y	D	N	\$ 1,077.75	\$ 1,077.75
27365		A	090	Y	Y	Y	D	N	\$ 1,414.67	\$ 1,414.67
27369		A	000	Y	Y	N	N	N	\$ 27.72	\$ 108.69
27372		A	090	Y	Y	D	N	N	\$ 271.37	\$ 395.96
27380		A	090	Y	Y	Y	D	N	\$ 417.65	\$ 417.65
27381		A	090	Y	Y	Y	D	N	\$ 555.99	\$ 555.99
27385		A	090	Y	Y	Y	D	N	\$ 404.64	\$ 404.64
27386		A	090	Y	Y	Y	D	N	\$ 581.05	\$ 581.05
27390		A	090	Y	Y	Y	N	N	\$ 303.42	\$ 303.42
27391		A	090	Y	N	D	D	N	\$ 373.07	\$ 373.07
27392		A	090	Y	B	Y	D	N	\$ 484.89	\$ 484.89
27393		A	090	Y	Y	Y	D	N	\$ 341.02	\$ 341.02
27394		A	090	Y	N	Y	N	N	\$ 445.61	\$ 445.61
27395		A	090	Y	B	Y	D	N	\$ 600.57	\$ 600.57
27396		A	090	Y	Y	Y	D	N	\$ 419.58	\$ 419.58
27397		A	090	Y	Y	Y	N	N	\$ 622.50	\$ 622.50
27400		A	090	Y	Y	Y	D	N	\$ 473.32	\$ 473.32

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
27403		A	090	Y	Y	Y	D	N	\$ 438.14	\$ 438.14
27405		A	090	Y	Y	Y	D	N	\$ 459.11	\$ 459.11
27407		A	090	Y	Y	Y	D	N	\$ 541.77	\$ 541.77
27409		A	090	Y	Y	Y	D	N	\$ 660.34	\$ 660.34
27412		Not Covered	090	Y	Y	Y	D	N	\$ 1,128.84	\$ 1,128.84
27415		Not Covered	090	Y	Y	Y	D	N	\$ 937.97	\$ 937.97
27416		A	090	Y	Y	D	N	N	\$ 669.26	\$ 669.26
27418		A	090	Y	Y	Y	D	N	\$ 565.63	\$ 565.63
27420		A	090	Y	Y	Y	D	N	\$ 505.62	\$ 505.62
27422		A	090	Y	Y	Y	D	N	\$ 505.86	\$ 505.86
27424		A	090	Y	Y	Y	D	N	\$ 509.23	\$ 509.23
27425		A	090	Y	Y	N	D	N	\$ 304.62	\$ 304.62
27427		A	090	Y	Y	Y	D	N	\$ 484.65	\$ 484.65
27428		A	090	Y	Y	Y	D	N	\$ 759.87	\$ 759.87
27429		A	090	Y	Y	Y	D	N	\$ 855.31	\$ 855.31
27430		A	090	Y	Y	Y	D	N	\$ 505.14	\$ 505.14
27435		A	090	Y	Y	Y	D	N	\$ 550.20	\$ 550.20
27437		A	090	Y	Y	N	D	N	\$ 449.47	\$ 449.47
27438		A	090	Y	Y	Y	D	N	\$ 572.86	\$ 572.86
27440		A	090	Y	Y	Y	D	N	\$ 543.94	\$ 543.94
27441		A	090	Y	Y	Y	D	N	\$ 561.53	\$ 561.53
27442		A	090	Y	Y	Y	D	N	\$ 594.07	\$ 594.07
27443		A	090	Y	Y	Y	D	N	\$ 556.71	\$ 556.71
27445		A	090	Y	Y	Y	D	N	\$ 859.17	\$ 859.17
27446		A	090	Y	Y	Y	D	N	\$ 791.69	\$ 791.69
27447		A	090	Y	Y	Y	D	N	\$ 881.58	\$ 881.58
27448		A	090	Y	Y	Y	D	N	\$ 551.41	\$ 551.41
27450		A	090	Y	Y	Y	D	N	\$ 694.32	\$ 694.32
27454		A	090	Y	Y	Y	D	N	\$ 886.16	\$ 886.16
27455		A	090	Y	Y	Y	D	N	\$ 653.11	\$ 653.11
27457		A	090	Y	Y	Y	D	N	\$ 657.69	\$ 657.69
27465		A	090	Y	Y	Y	D	N	\$ 856.03	\$ 856.03
27466		A	090	Y	Y	Y	D	N	\$ 809.76	\$ 809.76
27468		A	090	Y	Y	Y	D	N	\$ 919.17	\$ 919.17
27470		A	090	Y	Y	Y	D	N	\$ 805.66	\$ 805.66
27472		A	090	Y	Y	Y	D	N	\$ 865.43	\$ 865.43
27475		A	090	Y	Y	N	D	N	\$ 450.67	\$ 450.67
27477		A	090	Y	Y	N	D	N	\$ 499.59	\$ 499.59
27479		A	090	Y	Y	Y	N	N	\$ 627.81	\$ 627.81
27485		A	090	Y	Y	N	N	N	\$ 457.42	\$ 457.42
27486		A	090	Y	Y	Y	D	N	\$ 963.04	\$ 963.04
27487		A	090	Y	Y	Y	D	N	\$ 1,205.48	\$ 1,205.48

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
27488		A	090	Y	Y	Y	D	N	\$ 820.61	\$ 820.61
27495		A	090	Y	Y	Y	D	N	\$ 772.65	\$ 772.65
27496		A	090	Y	Y	N	N	N	\$ 369.69	\$ 369.69
27497		A	090	Y	Y	D	Y	N	\$ 395.24	\$ 395.24
27498		A	090	Y	Y	Y	Y	N	\$ 445.61	\$ 445.61
27499		A	090	Y	Y	Y	Y	N	\$ 476.94	\$ 476.94
27500		A	090	Y	Y	N	N	N	\$ 326.56	\$ 352.58
27501		A	090	Y	Y	D	N	N	\$ 336.92	\$ 343.18
27502		A	090	Y	Y	N	N	N	\$ 519.11	\$ 519.11
27503		A	090	Y	Y	D	N	N	\$ 547.55	\$ 547.55
27506		A	090	Y	Y	Y	D	N	\$ 914.35	\$ 914.35
27507		A	090	Y	Y	Y	Y	N	\$ 664.20	\$ 664.20
27508		A	090	Y	Y	N	N	N	\$ 336.44	\$ 353.79
27509		A	090	Y	Y	D	N	N	\$ 452.84	\$ 452.84
27510		A	090	Y	Y	N	N	N	\$ 465.61	\$ 465.61
27511		A	090	Y	Y	Y	Y	N	\$ 684.44	\$ 684.44
27513		A	090	Y	Y	Y	Y	N	\$ 851.94	\$ 851.94
27514		A	090	Y	Y	Y	D	N	\$ 663.71	\$ 663.71
27516		A	090	Y	Y	N	N	N	\$ 324.63	\$ 345.59
27517		A	090	Y	Y	D	N	N	\$ 467.30	\$ 467.30
27519		A	090	Y	Y	Y	D	N	\$ 611.18	\$ 611.18
27520		A	090	Y	Y	N	N	N	\$ 199.55	\$ 215.21
27524		A	090	Y	Y	Y	D	N	\$ 512.37	\$ 512.37
27530		A	090	Y	Y	N	N	N	\$ 189.91	\$ 201.72
27532		A	090	Y	Y	N	N	N	\$ 391.38	\$ 416.93
27535		A	090	Y	Y	Y	Y	N	\$ 615.51	\$ 615.51
27536		A	090	Y	Y	Y	D	N	\$ 810.00	\$ 810.00
27538		A	090	Y	Y	D	N	N	\$ 300.53	\$ 321.98
27540		A	090	Y	Y	Y	D	N	\$ 554.06	\$ 554.06
27550		A	090	Y	Y	D	N	N	\$ 328.48	\$ 353.55
27552		A	090	Y	Y	D	N	N	\$ 428.98	\$ 428.98
27556		A	090	Y	Y	Y	D	N	\$ 601.30	\$ 601.30
27557		A	090	Y	Y	Y	D	N	\$ 718.42	\$ 718.42
27558		A	090	Y	Y	Y	Y	N	\$ 819.88	\$ 819.88
27560		A	090	Y	Y	N	N	N	\$ 231.36	\$ 250.88
27562		A	090	Y	Y	D	N	N	\$ 329.93	\$ 329.93
27566		A	090	Y	Y	Y	D	N	\$ 609.49	\$ 609.49
27570		A	010	Y	Y	N	N	N	\$ 101.22	\$ 101.22
27580		A	090	Y	Y	Y	D	N	\$ 1,002.08	\$ 1,002.08
27590		A	090	Y	Y	Y	D	N	\$ 550.93	\$ 550.93
27591		A	090	Y	Y	Y	D	N	\$ 659.62	\$ 659.62
27592		A	090	Y	Y	Y	D	N	\$ 466.58	\$ 466.58

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
27594		A	090	Y	Y	N	N	N	\$ 347.76	\$ 347.76
27596		A	090	Y	Y	N	D	N	\$ 494.53	\$ 494.53
27598		A	090	Y	Y	Y	D	N	\$ 488.99	\$ 488.99
27599		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
27600		A	090	Y	Y	N	D	N	\$ 277.15	\$ 277.15
27601		A	090	Y	Y	N	N	N	\$ 301.25	\$ 301.25
27602		A	090	Y	Y	Y	D	N	\$ 334.75	\$ 334.75
27603		A	090	Y	Y	N	N	N	\$ 265.10	\$ 357.40
27604		A	090	Y	Y	D	N	N	\$ 221.48	\$ 309.93
27605		A	010	Y	Y	D	N	N	\$ 123.63	\$ 221.48
27606		A	010	Y	Y	N	D	N	\$ 186.53	\$ 186.53
27607		A	090	Y	Y	N	N	N	\$ 407.53	\$ 407.53
27610		A	090	Y	Y	N	N	N	\$ 440.31	\$ 440.31
27612		A	090	Y	Y	Y	D	N	\$ 376.68	\$ 376.68
27613		A	010	Y	Y	N	N	N	\$ 106.52	\$ 165.81
27614		A	090	Y	Y	N	N	N	\$ 276.91	\$ 387.77
27615		A	090	Y	Y	D	D	N	\$ 703.24	\$ 703.24
27616		A	090	Y	Y	D	D	N	\$ 875.07	\$ 875.07
27618		A	090	Y	Y	N	N	N	\$ 205.09	\$ 319.08
27619		A	090	Y	Y	N	N	N	\$ 312.82	\$ 312.82
27620		A	090	Y	Y	Y	D	N	\$ 303.42	\$ 303.42
27625		A	090	Y	Y	Y	D	N	\$ 387.77	\$ 387.77
27626		A	090	Y	Y	Y	N	N	\$ 408.01	\$ 408.01
27630		A	090	Y	Y	N	N	N	\$ 241.96	\$ 361.98
27632		A	090	Y	Y	Y	N	N	\$ 282.45	\$ 282.45
27634		A	090	Y	Y	Y	N	N	\$ 463.68	\$ 463.68
27635		A	090	Y	Y	N	D	N	\$ 394.76	\$ 394.76
27637		A	090	Y	Y	Y	D	N	\$ 504.17	\$ 504.17
27638		A	090	Y	Y	Y	D	N	\$ 515.74	\$ 515.74
27640		A	090	Y	Y	N	D	N	\$ 566.59	\$ 566.59
27641		A	090	Y	Y	N	D	N	\$ 446.57	\$ 446.57
27645		A	090	Y	Y	Y	D	N	\$ 1,215.60	\$ 1,215.60
27646		A	090	Y	Y	Y	D	N	\$ 1,051.97	\$ 1,051.97
27647		A	090	Y	Y	Y	N	N	\$ 686.61	\$ 686.61
27648		A	000	Y	Y	D	N	N	\$ 36.15	\$ 139.06
27650		A	090	Y	Y	Y	D	N	\$ 445.13	\$ 445.13
27652		A	090	Y	Y	N	D	N	\$ 450.67	\$ 450.67
27654		A	090	Y	Y	Y	D	N	\$ 481.28	\$ 481.28
27656		A	090	Y	Y	Y	N	N	\$ 236.66	\$ 365.36
27658		A	090	Y	N	Y	D	N	\$ 248.71	\$ 248.71
27659		A	090	Y	N	Y	D	N	\$ 317.40	\$ 317.40
27664		A	090	Y	N	D	N	N	\$ 242.93	\$ 242.93

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
27665		A	090	Y	N	Y	D	N	\$ 282.69	\$ 282.69
27675		A	090	Y	Y	Y	D	N	\$ 331.86	\$ 331.86
27676		A	090	Y	Y	Y	N	N	\$ 405.84	\$ 405.84
27680		A	090	Y	N	N	D	N	\$ 282.45	\$ 282.45
27681		A	090	Y	Y	N	D	N	\$ 348.73	\$ 348.73
27685		A	090	Y	Y	Y	D	N	\$ 312.34	\$ 436.93
27686		A	090	Y	Y	N	D	N	\$ 363.19	\$ 363.19
27687		A	090	Y	Y	Y	D	N	\$ 305.83	\$ 305.83
27690		A	090	Y	Y	Y	D	N	\$ 433.56	\$ 433.56
27691		A	090	Y	Y	Y	D	N	\$ 503.69	\$ 503.69
27692		A	ZZZ	N	N	Y	D	N	\$ 71.10	\$ 71.10
27695		A	090	Y	Y	N	D	N	\$ 320.05	\$ 320.05
27696		A	090	Y	Y	N	D	N	\$ 374.27	\$ 374.27
27698		A	090	Y	Y	Y	D	N	\$ 433.32	\$ 433.32
27700		A	090	Y	Y	Y	D	N	\$ 412.35	\$ 412.35
27702		A	090	Y	Y	Y	D	N	\$ 657.69	\$ 657.69
27703		A	090	Y	Y	Y	N	N	\$ 762.52	\$ 762.52
27704		A	090	Y	Y	N	D	N	\$ 386.32	\$ 386.32
27705		A	090	Y	Y	Y	D	N	\$ 515.02	\$ 515.02
27707		A	090	Y	Y	N	D	N	\$ 267.03	\$ 267.03
27709		A	090	Y	Y	Y	D	N	\$ 790.24	\$ 790.24
27712		A	090	Y	Y	Y	D	N	\$ 752.40	\$ 752.40
27715		A	090	Y	Y	Y	D	N	\$ 732.88	\$ 732.88
27720		A	090	Y	Y	Y	D	N	\$ 595.75	\$ 595.75
27722		A	090	Y	Y	Y	D	N	\$ 609.25	\$ 609.25
27724		A	090	Y	Y	Y	D	N	\$ 863.50	\$ 863.50
27725		A	090	Y	Y	Y	D	N	\$ 828.80	\$ 828.80
27726		A	090	Y	Y	N	D	N	\$ 656.24	\$ 656.24
27727		A	090	Y	Y	Y	D	N	\$ 708.54	\$ 708.54
27730		A	090	Y	Y	N	D	N	\$ 399.10	\$ 399.10
27732		A	090	Y	Y	N	N	N	\$ 305.35	\$ 305.35
27734		A	090	Y	Y	N	N	N	\$ 447.30	\$ 447.30
27740		A	090	Y	Y	Y	N	N	\$ 481.76	\$ 481.76
27742		A	090	Y	Y	Y	D	N	\$ 529.00	\$ 529.00
27745		A	090	Y	Y	Y	D	N	\$ 518.15	\$ 518.15
27750		A	090	Y	Y	N	N	N	\$ 214.49	\$ 230.40
27752		A	090	Y	Y	N	N	N	\$ 333.30	\$ 361.26
27756		A	090	Y	Y	Y	D	N	\$ 390.18	\$ 390.18
27758		A	090	Y	Y	Y	D	N	\$ 610.21	\$ 610.21
27759		A	090	Y	Y	Y	Y	N	\$ 681.55	\$ 681.55
27760		A	090	Y	Y	N	N	N	\$ 203.89	\$ 220.03
27762		A	090	Y	Y	N	N	N	\$ 292.33	\$ 320.53

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
27766		A	090	Y	Y	N	D	N	\$ 409.22	\$ 409.22
27767		A	090	Y	Y	N	N	N	\$ 190.39	\$ 192.08
27768		A	090	Y	Y	N	N	N	\$ 299.80	\$ 299.80
27769		A	090	Y	Y	N	N	N	\$ 497.67	\$ 497.67
27780		A	090	Y	Y	N	N	N	\$ 188.46	\$ 203.65
27781		A	090	Y	Y	N	N	N	\$ 267.75	\$ 289.44
27784		A	090	Y	Y	N	D	N	\$ 478.63	\$ 478.63
27786		A	090	Y	Y	N	N	N	\$ 191.35	\$ 207.98
27788		A	090	Y	Y	N	N	N	\$ 259.08	\$ 283.90
27792		A	090	Y	Y	N	D	N	\$ 437.42	\$ 437.42
27808		A	090	Y	Y	N	N	N	\$ 202.44	\$ 221.24
27810		A	090	Y	Y	N	N	N	\$ 287.03	\$ 315.95
27814		A	090	Y	Y	Y	D	N	\$ 520.08	\$ 520.08
27816		A	090	Y	Y	N	N	N	\$ 195.21	\$ 217.86
27818		A	090	Y	Y	N	N	N	\$ 296.19	\$ 328.48
27822		A	090	Y	Y	Y	D	N	\$ 590.93	\$ 590.93
27823		A	090	Y	Y	Y	D	N	\$ 667.81	\$ 667.81
27824		A	090	Y	Y	N	N	N	\$ 204.13	\$ 212.32
27825		A	090	Y	Y	D	N	N	\$ 334.27	\$ 367.04
27826		A	090	Y	Y	Y	Y	N	\$ 575.99	\$ 575.99
27827		A	090	Y	Y	Y	Y	N	\$ 757.70	\$ 757.70
27828		A	090	Y	Y	Y	Y	N	\$ 903.27	\$ 903.27
27829		A	090	Y	Y	Y	Y	N	\$ 477.18	\$ 477.18
27830		A	090	Y	Y	D	N	N	\$ 240.28	\$ 259.32
27831		A	090	Y	Y	D	N	N	\$ 274.02	\$ 274.02
27832		A	090	Y	Y	Y	D	N	\$ 514.29	\$ 514.29
27840		A	090	Y	Y	N	N	N	\$ 255.94	\$ 255.94
27842		A	090	Y	Y	N	N	N	\$ 335.23	\$ 335.23
27846		A	090	Y	Y	Y	D	N	\$ 486.82	\$ 486.82
27848		A	090	Y	Y	Y	D	N	\$ 543.94	\$ 543.94
27860		A	010	Y	Y	D	N	N	\$ 113.27	\$ 113.27
27870		A	090	Y	Y	Y	D	N	\$ 691.91	\$ 691.91
27871		A	090	Y	Y	Y	D	N	\$ 467.54	\$ 467.54
27880		A	090	Y	Y	Y	D	N	\$ 630.46	\$ 630.46
27881		A	090	Y	Y	Y	D	N	\$ 590.21	\$ 590.21
27882		A	090	Y	Y	D	D	N	\$ 411.87	\$ 411.87
27884		A	090	Y	Y	N	N	N	\$ 395.24	\$ 395.24
27886		A	090	Y	Y	N	D	N	\$ 450.19	\$ 450.19
27888		A	090	Y	Y	Y	D	N	\$ 448.98	\$ 448.98
27889		A	090	Y	Y	N	D	N	\$ 442.48	\$ 442.48
27892		A	090	Y	Y	D	N	N	\$ 366.56	\$ 366.56
27893		A	090	Y	Y	D	N	N	\$ 415.00	\$ 415.00

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
27894		A	090	Y	Y	Y	N	N	\$ 569.48	\$ 569.48
27899		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
28001		A	010	Y	N	N	N	N	\$ 112.79	\$ 179.55
28002		A	010	Y	N	N	N	N	\$ 213.53	\$ 289.20
28003		A	090	Y	N	N	N	N	\$ 378.61	\$ 466.82
28005		A	090	Y	N	N	N	N	\$ 386.32	\$ 386.32
28008		A	090	Y	Y	N	N	N	\$ 197.86	\$ 285.10
28010		A	090	Y	N	N	N	N	\$ 136.89	\$ 152.79
28011		A	090	Y	N	N	N	N	\$ 187.02	\$ 208.95
28020		A	090	Y	N	N	D	N	\$ 245.58	\$ 360.78
28022		A	090	Y	N	N	N	N	\$ 217.62	\$ 320.77
28024		A	090	Y	N	N	N	N	\$ 202.20	\$ 299.80
28035		A	090	Y	Y	N	D	N	\$ 238.83	\$ 348.25
28039		A	090	Y	Y	Y	N	N	\$ 234.73	\$ 329.21
28041		A	090	Y	Y	D	N	N	\$ 303.18	\$ 303.18
28043		A	090	Y	Y	N	N	N	\$ 173.76	\$ 255.70
28045		A	090	Y	Y	D	N	N	\$ 231.84	\$ 320.05
28046		A	090	Y	Y	N	D	N	\$ 485.86	\$ 485.86
28047		A	090	Y	Y	Y	D	N	\$ 706.61	\$ 706.61
28050		A	090	Y	Y	N	D	N	\$ 185.33	\$ 274.50
28052		A	090	Y	Y	N	D	N	\$ 188.94	\$ 291.13
28054		A	090	Y	Y	D	N	N	\$ 154.96	\$ 241.48
28055		A	090	Y	Y	D	N	N	\$ 260.04	\$ 260.04
28060		A	090	Y	Y	N	N	N	\$ 241.24	\$ 344.15
28062		A	090	Y	Y	N	D	N	\$ 273.05	\$ 382.95
28070		A	090	Y	N	N	N	N	\$ 236.18	\$ 345.84
28072		A	090	Y	N	N	N	N	\$ 214.01	\$ 319.57
28080		A	090	Y	N	D	N	N	\$ 245.58	\$ 345.84
28086		A	090	Y	Y	Y	D	N	\$ 238.11	\$ 354.75
28088		A	090	Y	Y	D	N	N	\$ 187.74	\$ 291.61
28090		A	090	Y	Y	N	N	N	\$ 204.37	\$ 305.35
28092		A	090	Y	N	N	N	N	\$ 177.86	\$ 274.26
28100		A	090	Y	Y	Y	D	N	\$ 279.08	\$ 404.88
28102		A	090	Y	Y	Y	N	N	\$ 413.32	\$ 413.32
28103		A	090	Y	Y	Y	N	N	\$ 260.76	\$ 260.76
28104		A	090	Y	N	Y	D	N	\$ 237.39	\$ 347.76
28106		A	090	Y	N	Y	D	N	\$ 287.03	\$ 287.03
28107		A	090	Y	N	Y	N	N	\$ 255.70	\$ 374.27
28108		A	090	Y	N	N	N	N	\$ 191.11	\$ 285.83
28110		A	090	Y	Y	N	D	N	\$ 193.04	\$ 301.73
28111		A	090	Y	Y	N	D	N	\$ 216.90	\$ 320.29
28112		A	090	Y	Y	N	D	N	\$ 207.74	\$ 317.88

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
28113		A	090	Y	Y	D	N	N	\$ 281.97	\$ 385.60
28114		A	090	Y	Y	Y	D	N	\$ 558.88	\$ 706.13
28116		A	090	Y	Y	N	N	N	\$ 390.42	\$ 509.23
28118		A	090	Y	Y	Y	D	N	\$ 281.25	\$ 398.13
28119		A	090	Y	Y	N	D	N	\$ 241.72	\$ 344.63
28120		A	090	Y	Y	N	D	N	\$ 334.27	\$ 447.78
28122		A	090	Y	Y	Y	D	N	\$ 293.06	\$ 392.35
28124		A	090	Y	Y	N	N	N	\$ 221.48	\$ 313.54
28126		A	090	Y	N	N	N	N	\$ 163.88	\$ 255.22
28130		A	090	Y	Y	Y	D	N	\$ 418.86	\$ 418.86
28140		A	090	Y	N	N	D	N	\$ 293.30	\$ 388.01
28150		A	090	Y	N	N	N	N	\$ 186.05	\$ 276.67
28153		A	090	Y	N	N	N	N	\$ 175.21	\$ 267.51
28160		A	090	Y	N	N	N	N	\$ 177.14	\$ 270.16
28171		A	090	Y	N	Y	N	N	\$ 758.67	\$ 758.67
28173		A	090	Y	N	N	D	N	\$ 496.70	\$ 496.70
28175		A	090	Y	N	N	D	N	\$ 316.67	\$ 316.67
28190		A	010	Y	Y	N	N	N	\$ 88.93	\$ 162.43
28192		A	090	Y	Y	N	N	N	\$ 207.98	\$ 305.35
28193		A	090	Y	Y	N	N	N	\$ 246.06	\$ 347.04
28200		A	090	Y	N	N	D	N	\$ 216.66	\$ 324.15
28202		A	090	Y	N	Y	D	N	\$ 289.20	\$ 397.17
28208		A	090	Y	N	N	D	N	\$ 211.84	\$ 317.40
28210		A	090	Y	N	Y	N	N	\$ 286.07	\$ 395.96
28220		A	090	Y	Y	N	N	N	\$ 202.44	\$ 296.19
28222		A	090	Y	Y	N	N	N	\$ 240.76	\$ 343.67
28225		A	090	Y	Y	N	D	N	\$ 176.41	\$ 273.78
28226		A	090	Y	Y	N	N	N	\$ 266.31	\$ 408.25
28230		A	090	Y	Y	N	N	N	\$ 189.91	\$ 285.83
28232		A	090	Y	N	N	N	N	\$ 159.78	\$ 249.44
28234		A	090	Y	N	N	N	N	\$ 175.69	\$ 267.51
28238		A	090	Y	Y	Y	D	N	\$ 326.56	\$ 441.27
28240		A	090	Y	Y	N	N	N	\$ 196.66	\$ 294.26
28250		A	090	Y	Y	Y	D	N	\$ 270.40	\$ 381.74
28260		A	090	Y	Y	Y	D	N	\$ 351.38	\$ 466.58
28261		A	090	Y	Y	D	N	N	\$ 638.41	\$ 807.11
28262		A	090	Y	Y	Y	D	N	\$ 764.21	\$ 935.32
28264		A	090	Y	Y	Y	N	N	\$ 471.64	\$ 607.08
28270		A	090	Y	Y	N	N	N	\$ 222.44	\$ 321.49
28272		A	090	Y	Y	N	N	N	\$ 166.77	\$ 253.29
28280		A	090	Y	Y	D	N	N	\$ 231.60	\$ 335.71
28285		A	090	Y	Y	N	D	N	\$ 254.01	\$ 352.82

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
28286		A	090	Y	Y	N	N	N	\$ 197.62	\$ 291.13
28288		A	090	Y	N	N	N	N	\$ 288.00	\$ 399.10
28289		A	090	Y	Y	Y	D	N	\$ 306.31	\$ 460.55
28291		A	090	Y	Y	Y	D	N	\$ 331.13	\$ 478.87
28292		A	090	Y	Y	Y	D	N	\$ 321.49	\$ 465.61
28295		A	090	Y	Y	Y	D	N	\$ 415.48	\$ 727.58
28296		A	090	Y	Y	Y	D	N	\$ 343.18	\$ 589.49
28297		A	090	Y	Y	Y	D	N	\$ 405.36	\$ 686.85
28298		A	090	Y	Y	Y	D	N	\$ 335.71	\$ 551.89
28299		A	090	Y	Y	Y	D	N	\$ 393.55	\$ 663.96
28300		A	090	Y	Y	Y	D	N	\$ 441.03	\$ 441.03
28302		A	090	Y	Y	Y	D	N	\$ 486.58	\$ 486.58
28304		A	090	Y	Y	Y	D	N	\$ 410.91	\$ 548.76
28305		A	090	Y	Y	Y	D	N	\$ 459.35	\$ 459.35
28306		A	090	Y	Y	Y	D	N	\$ 268.47	\$ 397.41
28307		A	090	Y	Y	D	N	N	\$ 276.91	\$ 403.92
28308		A	090	Y	Y	Y	D	N	\$ 256.18	\$ 375.48
28309		A	090	Y	Y	D	N	N	\$ 603.95	\$ 603.95
28310		A	090	Y	Y	N	D	N	\$ 242.45	\$ 360.78
28312		A	090	Y	N	N	D	N	\$ 214.25	\$ 333.30
28313		A	090	Y	N	N	N	N	\$ 240.52	\$ 349.21
28315		A	090	Y	Y	N	D	N	\$ 218.83	\$ 317.64
28320		A	090	Y	Y	Y	D	N	\$ 417.89	\$ 417.89
28322		A	090	Y	N	Y	D	N	\$ 389.46	\$ 522.97
28340		A	090	Y	N	N	N	N	\$ 275.46	\$ 376.44
28341		A	090	Y	N	N	N	N	\$ 329.21	\$ 437.90
28344		A	090	Y	Y	N	D	N	\$ 185.81	\$ 276.43
28345		A	090	Y	N	D	N	N	\$ 242.93	\$ 339.57
28360		A	090	Y	Y	Y	N	N	\$ 745.17	\$ 745.17
28400		A	090	Y	Y	N	N	N	\$ 149.90	\$ 161.47
28405		A	090	Y	Y	D	N	N	\$ 238.35	\$ 262.21
28406		A	090	Y	Y	D	N	N	\$ 371.86	\$ 371.86
28415		A	090	Y	Y	Y	D	N	\$ 762.04	\$ 762.04
28420		A	090	Y	Y	Y	D	N	\$ 880.86	\$ 880.86
28430		A	090	Y	Y	N	N	N	\$ 139.06	\$ 157.37
28435		A	090	Y	Y	D	N	N	\$ 196.90	\$ 220.52
28436		A	090	Y	Y	N	N	N	\$ 323.42	\$ 323.42
28445		A	090	Y	Y	Y	D	N	\$ 699.14	\$ 699.14
28446		A	090	Y	Y	Y	D	N	\$ 836.51	\$ 836.51
28450		A	090	Y	N	N	N	N	\$ 125.08	\$ 137.85
28455		A	090	Y	N	D	N	N	\$ 170.87	\$ 190.63
28456		A	090	Y	N	N	N	N	\$ 235.70	\$ 235.70

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
28465		A	090	Y	N	N	N	N	\$ 423.20	\$ 423.20
28470		A	090	Y	N	N	N	N	\$ 134.00	\$ 142.67
28475		A	090	Y	N	N	N	N	\$ 150.63	\$ 169.42
28476		A	090	Y	N	D	N	N	\$ 251.36	\$ 251.36
28485		A	090	Y	N	N	D	N	\$ 373.07	\$ 373.07
28490		A	090	Y	Y	N	N	N	\$ 80.01	\$ 91.10
28495		A	090	Y	Y	N	N	N	\$ 96.40	\$ 114.96
28496		A	090	Y	Y	N	N	N	\$ 160.27	\$ 294.26
28505		A	090	Y	Y	N	N	N	\$ 333.79	\$ 438.14
28510		A	090	Y	N	N	N	N	\$ 77.60	\$ 78.81
28515		A	090	Y	N	N	N	N	\$ 92.30	\$ 105.32
28525		A	090	Y	N	D	N	N	\$ 269.20	\$ 375.96
28530		A	090	Y	Y	D	N	N	\$ 64.83	\$ 73.99
28531		A	090	Y	Y	N	Y	N	\$ 119.54	\$ 215.94
28540		A	090	Y	Y	D	N	N	\$ 113.99	\$ 126.28
28545		A	090	Y	Y	D	N	N	\$ 177.62	\$ 201.24
28546		A	090	Y	Y	D	N	N	\$ 230.40	\$ 384.15
28555		A	090	Y	Y	Y	D	N	\$ 442.72	\$ 572.86
28570		A	090	Y	Y	D	N	N	\$ 127.97	\$ 151.83
28575		A	090	Y	Y	D	N	N	\$ 224.13	\$ 248.47
28576		A	090	Y	Y	D	N	N	\$ 259.08	\$ 259.08
28585		A	090	Y	Y	Y	D	N	\$ 463.68	\$ 581.53
28600		A	090	Y	N	D	N	N	\$ 121.46	\$ 141.47
28605		A	090	Y	N	D	N	N	\$ 200.03	\$ 223.17
28606		A	090	Y	N	N	N	N	\$ 255.46	\$ 255.46
28615		A	090	Y	N	Y	D	N	\$ 552.13	\$ 552.13
28630		A	010	Y	N	D	N	N	\$ 74.95	\$ 102.43
28635		A	010	Y	N	D	N	N	\$ 90.13	\$ 117.37
28636		A	010	Y	N	N	Y	N	\$ 133.51	\$ 204.85
28645		A	090	Y	N	N	D	N	\$ 326.31	\$ 434.04
28660		A	010	Y	N	N	N	N	\$ 62.18	\$ 80.01
28665		A	010	Y	N	D	N	N	\$ 84.35	\$ 98.81
28666		A	010	Y	N	N	Y	N	\$ 115.92	\$ 115.92
28675		A	090	Y	N	N	N	N	\$ 270.16	\$ 375.72
28705		A	090	Y	Y	Y	D	N	\$ 834.82	\$ 834.82
28715		A	090	Y	Y	Y	D	N	\$ 637.45	\$ 637.45
28725		A	090	Y	Y	Y	D	N	\$ 526.10	\$ 526.10
28730		A	090	Y	Y	Y	D	N	\$ 496.22	\$ 496.22
28735		A	090	Y	Y	Y	D	N	\$ 529.72	\$ 529.72
28737		A	090	Y	Y	Y	D	N	\$ 462.96	\$ 462.96
28740		A	090	Y	Y	Y	D	N	\$ 416.69	\$ 553.34
28750		A	090	Y	Y	D	N	N	\$ 391.38	\$ 525.62

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
28755		A	090	Y	Y	N	D	N	\$ 222.93	\$ 334.75
28760		A	090	Y	Y	Y	D	N	\$ 382.71	\$ 509.23
28800		A	090	Y	Y	Y	D	N	\$ 360.54	\$ 360.54
28805		A	090	Y	Y	D	N	N	\$ 488.75	\$ 488.75
28810		A	090	Y	N	D	N	N	\$ 288.72	\$ 288.72
28820		A	000	Y	N	N	N	N	\$ 125.08	\$ 204.13
28825		A	000	Y	N	N	N	N	\$ 121.22	\$ 199.55
28890		Not Covered	090	Y	Y	N	D	N	\$ 145.56	\$ 204.13
28899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
29000		A	000	Y	N	D	N	N	\$ 132.55	\$ 224.13
29010		A	000	Y	N	D	N	N	\$ 107.49	\$ 173.76
29015		A	000	Y	N	D	N	N	\$ 120.98	\$ 187.50
29035		A	000	Y	N	D	N	N	\$ 95.20	\$ 161.71
29040		A	000	Y	N	D	N	N	\$ 115.44	\$ 186.05
29044		A	000	Y	N	D	N	N	\$ 111.58	\$ 182.20
29046		A	000	Y	N	D	N	N	\$ 125.08	\$ 199.55
29049		A	000	Y	N	D	N	N	\$ 46.03	\$ 63.62
29055		A	000	Y	N	D	N	N	\$ 90.38	\$ 139.06
29058		A	000	Y	N	D	N	N	\$ 63.38	\$ 80.98
29065		A	000	Y	Y	N	N	N	\$ 45.31	\$ 61.70
29075		A	000	Y	Y	N	N	N	\$ 41.45	\$ 56.39
29085		A	000	Y	Y	N	N	N	\$ 44.59	\$ 61.46
29086		A	000	Y	Y	N	N	N	\$ 31.57	\$ 47.00
29105		A	000	Y	Y	N	N	N	\$ 29.64	\$ 53.50
29125		A	000	Y	Y	N	N	N	\$ 26.51	\$ 41.69
29126		A	000	Y	Y	N	N	N	\$ 32.29	\$ 48.92
29130		A	000	Y	Y	N	N	N	\$ 20.00	\$ 27.23
29131		A	000	Y	Y	N	N	N	\$ 23.38	\$ 34.22
29200		A	000	Y	N	N	N	N	\$ 12.53	\$ 21.45
29240		A	000	Y	Y	N	N	N	\$ 12.53	\$ 20.00
29260		A	000	Y	Y	N	N	N	\$ 13.50	\$ 20.00
29280		A	000	Y	Y	N	N	N	\$ 13.50	\$ 19.52
29305		A	000	Y	N	D	N	N	\$ 105.80	\$ 158.58
29325		A	000	Y	N	D	N	N	\$ 118.33	\$ 175.21
29345		A	000	Y	Y	N	N	N	\$ 67.00	\$ 88.21
29355		A	000	Y	Y	N	N	N	\$ 72.54	\$ 93.99
29358		A	000	Y	Y	N	N	N	\$ 69.65	\$ 103.15
29365		A	000	Y	Y	N	N	N	\$ 58.08	\$ 79.05
29405		A	000	Y	Y	N	N	N	\$ 39.28	\$ 52.06
29425		A	000	Y	Y	N	N	N	\$ 36.39	\$ 49.16
29435		A	000	Y	Y	N	N	N	\$ 54.71	\$ 74.23
29440		A	000	Y	Y	N	N	N	\$ 19.28	\$ 27.96

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
29445		A	000	Y	Y	N	N	N	\$ 68.44	\$ 85.80
29450		A	000	Y	Y	N	N	N	\$ 76.88	\$ 95.44
29505		A	000	Y	Y	N	N	N	\$ 34.70	\$ 56.15
29515		A	000	Y	Y	N	N	N	\$ 33.02	\$ 46.03
29520		A	000	Y	Y	D	N	N	\$ 12.53	\$ 23.14
29530		A	000	Y	Y	N	N	N	\$ 12.29	\$ 19.76
29540		A	000	Y	Y	N	N	N	\$ 12.53	\$ 18.56
29550		A	000	Y	Y	N	N	N	\$ 7.71	\$ 12.29
29580		A	000	Y	Y	N	N	N	\$ 18.32	\$ 40.97
29581		A	000	Y	Y	D	N	N	\$ 18.56	\$ 56.88
29584		A	000	Y	Y	D	N	N	\$ 10.85	\$ 52.54
29700		A	000	Y	N	N	N	N	\$ 22.90	\$ 40.01
29705		A	000	Y	Y	N	N	N	\$ 31.57	\$ 42.42
29710		A	000	Y	Y	D	N	N	\$ 56.64	\$ 80.01
29720		A	000	Y	N	N	N	N	\$ 29.88	\$ 54.71
29730		A	000	Y	N	N	N	N	\$ 30.37	\$ 41.69
29740		A	000	Y	N	N	N	N	\$ 47.48	\$ 65.07
29750		A	000	Y	Y	D	N	N	\$ 53.26	\$ 71.10
29799		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
29800		A	090	Y	Y	D	N	N	\$ 358.85	\$ 358.85
29804		A	090	Y	Y	Y	D	N	\$ 405.12	\$ 405.12
29805		A	090	Y	Y	N	D	N	\$ 318.12	\$ 318.12
29806		A	090	Y	Y	N	D	N	\$ 720.83	\$ 720.83
29807		A	090	Y	Y	N	D	N	\$ 703.72	\$ 703.72
29819		A	090	Y	Y	N	D	N	\$ 398.86	\$ 398.86
29820		A	090	Y	Y	Y	D	N	\$ 365.60	\$ 365.60
29821		A	090	Y	Y	Y	D	N	\$ 403.43	\$ 403.43
29822		A	090	Y	Y	Y	N	N	\$ 367.04	\$ 367.04
29823		A	090	Y	Y	Y	D	N	\$ 402.23	\$ 402.23
29824		A	090	Y	Y	Y	D	N	\$ 458.38	\$ 458.38
29825		A	090	Y	Y	Y	D	N	\$ 398.61	\$ 398.61
29826		A	ZZZ	N	Y	Y	D	N	\$ 120.74	\$ 120.74
29827		A	090	Y	Y	Y	D	N	\$ 729.99	\$ 729.99
29828		A	090	Y	Y	Y	D	N	\$ 625.40	\$ 625.40
29830		A	090	Y	Y	N	N	N	\$ 305.11	\$ 305.11
29834		A	090	Y	Y	Y	D	N	\$ 334.27	\$ 334.27
29835		A	090	Y	Y	Y	D	N	\$ 345.84	\$ 345.84
29836		A	090	Y	Y	Y	D	N	\$ 395.00	\$ 395.00
29837		A	090	Y	Y	Y	D	N	\$ 358.37	\$ 358.37
29838		A	090	Y	Y	D	N	N	\$ 402.23	\$ 402.23
29840		A	090	Y	Y	D	N	N	\$ 303.90	\$ 303.90
29843		A	090	Y	Y	Y	D	N	\$ 329.21	\$ 329.21

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
29844		A	090	Y	Y	Y	N	N	\$ 337.40	\$ 337.40
29845		A	090	Y	Y	Y	D	N	\$ 395.48	\$ 395.48
29846		A	090	Y	Y	D	N	N	\$ 353.55	\$ 353.55
29847		A	090	Y	Y	Y	N	N	\$ 369.69	\$ 369.69
29848		A	090	Y	Y	N	N	N	\$ 343.18	\$ 343.18
29850		A	090	Y	Y	D	Y	N	\$ 422.71	\$ 422.71
29851		A	090	Y	Y	Y	Y	N	\$ 634.31	\$ 634.31
29855		A	090	Y	Y	Y	Y	N	\$ 531.16	\$ 531.16
29856		A	090	Y	Y	Y	Y	N	\$ 673.84	\$ 673.84
29860		A	090	Y	Y	Y	D	N	\$ 436.93	\$ 436.93
29861		A	090	Y	Y	Y	D	N	\$ 492.12	\$ 492.12
29862		A	090	Y	Y	Y	D	N	\$ 552.37	\$ 552.37
29863		A	090	Y	Y	Y	D	N	\$ 551.89	\$ 551.89
29866		Not Covered	090	Y	Y	D	N	N	\$ 715.29	\$ 715.29
29867		Not Covered	090	Y	Y	D	N	N	\$ 872.90	\$ 872.90
29868		Not Covered	090	Y	Y	D	N	N	\$ 1,143.55	\$ 1,143.55
29870		A	090	Y	Y	N	D	N	\$ 274.02	\$ 371.86
29871		A	090	Y	Y	N	N	N	\$ 348.25	\$ 348.25
29873		A	090	Y	Y	N	D	N	\$ 359.09	\$ 359.09
29874		A	090	Y	Y	D	N	N	\$ 364.87	\$ 364.87
29875		A	090	Y	Y	D	N	N	\$ 336.20	\$ 336.20
29876		A	090	Y	Y	N	N	N	\$ 443.68	\$ 443.68
29877		A	090	Y	Y	D	N	N	\$ 421.51	\$ 421.51
29879		A	090	Y	Y	D	N	N	\$ 449.47	\$ 449.47
29880		A	090	Y	Y	D	D	N	\$ 381.02	\$ 381.02
29881		A	090	Y	Y	D	N	N	\$ 367.28	\$ 367.28
29882		A	090	Y	Y	N	N	N	\$ 469.95	\$ 469.95
29883		A	090	Y	Y	D	N	N	\$ 570.69	\$ 570.69
29884		A	090	Y	Y	Y	D	N	\$ 420.06	\$ 420.06
29885		A	090	Y	Y	Y	D	N	\$ 513.09	\$ 513.09
29886		A	090	Y	Y	N	N	N	\$ 431.63	\$ 431.63
29887		A	090	Y	Y	Y	D	N	\$ 511.16	\$ 511.16
29888		A	090	Y	Y	Y	D	N	\$ 667.33	\$ 667.33
29889		A	090	Y	Y	Y	D	N	\$ 834.34	\$ 834.34
29891		A	090	Y	Y	Y	N	N	\$ 454.04	\$ 454.04
29892		A	090	Y	Y	Y	N	N	\$ 437.42	\$ 437.42
29893		A	090	Y	Y	N	D	N	\$ 285.83	\$ 427.78
29894		A	090	Y	Y	Y	D	N	\$ 337.64	\$ 337.64
29895		A	090	Y	Y	Y	D	N	\$ 316.67	\$ 316.67
29897		A	090	Y	Y	Y	N	N	\$ 336.92	\$ 336.92
29898		A	090	Y	Y	Y	D	N	\$ 380.30	\$ 380.30
29899		A	090	Y	Y	Y	D	N	\$ 698.18	\$ 698.18

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
29900		A	090	Y	Y	D	N	N	\$ 336.44	\$ 336.44
29901		A	090	Y	Y	D	N	N	\$ 363.91	\$ 363.91
29902		A	090	Y	Y	D	N	N	\$ 386.81	\$ 386.81
29904		A	090	Y	Y	Y	N	N	\$ 433.80	\$ 433.80
29905		A	090	Y	Y	Y	N	N	\$ 347.28	\$ 347.28
29906		A	090	Y	Y	Y	N	N	\$ 445.61	\$ 445.61
29907		A	090	Y	Y	Y	N	N	\$ 596.72	\$ 596.72
29914		A	090	Y	Y	Y	D	N	\$ 681.07	\$ 681.07
29915		A	090	Y	Y	Y	D	N	\$ 698.18	\$ 698.18
29916		A	090	Y	Y	Y	D	N	\$ 698.18	\$ 698.18
29999		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
30000		A	010	Y	N	D	N	N	\$ 78.81	\$ 169.91
30020		A	010	Y	N	N	N	N	\$ 79.05	\$ 171.35
30100		A	000	Y	N	N	N	N	\$ 44.83	\$ 92.79
30110		A	010	Y	Y	N	N	N	\$ 86.28	\$ 158.82
30115		A	090	Y	Y	N	N	N	\$ 304.14	\$ 304.14
30117		A	090	Y	N	N	N	N	\$ 217.62	\$ 619.37
30118		A	090	Y	N	N	D	N	\$ 526.83	\$ 526.83
30120		A	090	Y	N	N	N	N	\$ 281.49	\$ 337.40
30124		A	090	Y	N	N	N	N	\$ 197.86	\$ 197.86
30125		A	090	Y	N	Y	N	N	\$ 430.91	\$ 430.91
30130		A	090	Y	Y	N	N	N	\$ 269.44	\$ 269.44
30140		A	000	Y	Y	N	N	N	\$ 120.98	\$ 194.01
30150		A	090	Y	N	N	D	N	\$ 534.06	\$ 534.06
30160		A	090	Y	N	Y	D	N	\$ 541.05	\$ 541.05
30200		A	000	Y	N	N	N	N	\$ 38.56	\$ 72.30
30210		A	010	Y	N	N	N	N	\$ 65.79	\$ 97.12
30220		A	010	Y	N	N	N	N	\$ 82.90	\$ 198.58
30300		A	010	Y	N	N	N	N	\$ 78.08	\$ 130.38
30310		A	010	Y	N	D	N	N	\$ 135.68	\$ 135.68
30320		A	090	Y	N	D	N	N	\$ 317.40	\$ 317.40
30400		A	090	Y	N	D	N	N	\$ 814.82	\$ 814.82
30410		A	090	Y	N	Y	N	N	\$ 944.24	\$ 944.24
30420		A	090	Y	N	N	N	N	\$ 963.04	\$ 963.04
30430		A	090	Y	N	Y	N	N	\$ 707.09	\$ 707.09
30435		A	090	Y	N	Y	N	N	\$ 892.42	\$ 892.42
30450		A	090	Y	N	Y	N	N	\$ 1,178.01	\$ 1,178.01
30460		A	090	Y	N	Y	Y	N	\$ 561.77	\$ 561.77
30462		A	090	Y	N	Y	Y	N	\$ 1,083.78	\$ 1,083.78
30465		A	090	Y	N	D	N	N	\$ 681.79	\$ 681.79
30468		A	000	Y	Y	N	N	N	\$ 113.51	\$ 1,747.73
30520		A	090	Y	N	N	N	N	\$ 440.79	\$ 440.79

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
30540		A	090	Y	N	Y	N	N	\$ 485.13	\$ 485.13
30545		A	090	Y	N	Y	N	N	\$ 662.51	\$ 662.51
30560		A	010	Y	N	N	N	N	\$ 95.68	\$ 200.99
30580		A	090	Y	N	N	N	N	\$ 308.96	\$ 405.36
30600		A	090	Y	N	D	N	N	\$ 285.59	\$ 392.83
30620		A	090	Y	N	N	N	N	\$ 438.86	\$ 438.86
30630		A	090	Y	N	D	N	N	\$ 440.79	\$ 440.79
30801		A	010	Y	B	N	N	N	\$ 97.85	\$ 142.91
30802		A	010	Y	B	N	N	N	\$ 133.03	\$ 182.92
30901		A	000	Y	Y	N	N	N	\$ 39.04	\$ 100.74
30903		A	000	Y	Y	N	N	N	\$ 54.23	\$ 158.10
30905		A	000	Y	B	N	N	N	\$ 73.51	\$ 228.71
30906		A	000	Y	B	N	N	N	\$ 93.03	\$ 237.63
30915		A	090	Y	N	N	N	N	\$ 399.58	\$ 399.58
30920		A	090	Y	N	N	N	N	\$ 581.29	\$ 581.29
30930		A	010	Y	B	N	N	N	\$ 76.64	\$ 76.64
30999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
31000		A	010	Y	Y	N	N	N	\$ 69.89	\$ 117.85
31002		A	010	Y	Y	D	N	N	\$ 127.49	\$ 127.49
31020		A	090	Y	Y	N	N	N	\$ 251.36	\$ 314.26
31030		A	090	Y	Y	N	N	N	\$ 338.85	\$ 419.34
31032		A	090	Y	Y	N	N	N	\$ 391.63	\$ 391.63
31040		A	090	Y	Y	N	D	N	\$ 536.23	\$ 536.23
31050		A	090	Y	Y	N	N	N	\$ 338.85	\$ 338.85
31051		A	090	Y	Y	N	N	N	\$ 455.49	\$ 455.49
31070		A	090	Y	Y	N	N	N	\$ 309.20	\$ 309.20
31075		A	090	Y	Y	Y	D	N	\$ 546.35	\$ 546.35
31080		A	090	Y	Y	Y	N	N	\$ 720.11	\$ 720.11
31081		A	090	Y	Y	Y	D	N	\$ 773.13	\$ 773.13
31084		A	090	Y	Y	Y	D	N	\$ 802.53	\$ 802.53
31085		A	090	Y	Y	Y	D	N	\$ 827.35	\$ 827.35
31086		A	090	Y	Y	Y	N	N	\$ 779.88	\$ 779.88
31087		A	090	Y	Y	Y	D	N	\$ 744.93	\$ 744.93
31090		A	090	Y	Y	N	N	N	\$ 727.58	\$ 727.58
31200		A	090	Y	Y	N	N	N	\$ 403.19	\$ 403.19
31201		A	090	Y	Y	N	N	N	\$ 525.86	\$ 525.86
31205		A	090	Y	Y	Y	D	N	\$ 618.89	\$ 618.89
31225		A	090	Y	Y	Y	D	N	\$ 1,226.93	\$ 1,226.93
31230		A	090	Y	Y	Y	D	N	\$ 1,365.75	\$ 1,365.75
31231		A	000	Y	B	N	N	N	\$ 43.38	\$ 124.84
31233		A	000	Y	Y	D	N	N	\$ 90.62	\$ 175.21
31235		A	000	Y	Y	D	N	N	\$ 105.80	\$ 199.07

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
31237		A	000	Y	Y	N	N	N	\$ 107.25	\$ 167.25
31238		A	000	Y	Y	D	N	N	\$ 112.55	\$ 165.09
31239		A	010	Y	Y	D	N	N	\$ 405.84	\$ 405.84
31240		A	000	Y	Y	D	N	N	\$ 106.76	\$ 106.76
31241		A	000	Y	Y	D	N	N	\$ 302.70	\$ 302.70
31253		A	000	Y	Y	N	N	N	\$ 341.26	\$ 341.26
31254		A	000	Y	Y	N	N	N	\$ 165.33	\$ 286.07
31255		A	000	Y	Y	N	N	N	\$ 219.79	\$ 219.79
31256		A	000	Y	Y	N	N	N	\$ 122.19	\$ 122.19
31257		A	000	Y	Y	N	N	N	\$ 303.90	\$ 303.90
31259		A	000	Y	Y	N	N	N	\$ 321.74	\$ 321.74
31267		A	000	Y	Y	N	N	N	\$ 180.03	\$ 180.03
31276		A	000	Y	Y	N	N	N	\$ 257.15	\$ 257.15
31287		A	000	Y	Y	D	N	N	\$ 136.41	\$ 136.41
31288		A	000	Y	Y	D	N	N	\$ 159.06	\$ 159.06
31290		A	010	Y	Y	D	N	N	\$ 776.02	\$ 776.02
31291		A	010	Y	Y	D	N	N	\$ 823.50	\$ 823.50
31292		A	010	Y	Y	D	N	N	\$ 671.91	\$ 671.91
31293		A	010	Y	Y	D	N	N	\$ 728.06	\$ 728.06
31294		A	010	Y	Y	D	N	N	\$ 833.14	\$ 833.14
31295		A	000	Y	Y	Y	N	N	\$ 106.76	\$ 1,157.04
31296		A	000	Y	Y	Y	N	N	\$ 121.71	\$ 1,174.63
31297		A	000	Y	Y	D	N	N	\$ 97.12	\$ 1,147.40
31298		A	000	Y	Y	D	N	N	\$ 173.76	\$ 2,191.90
31299		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
31300		A	090	Y	N	Y	D	N	\$ 843.26	\$ 843.26
31360		A	090	Y	N	Y	D	N	\$ 1,389.85	\$ 1,389.85
31365		A	090	Y	N	Y	D	N	\$ 1,721.70	\$ 1,721.70
31367		A	090	Y	N	Y	D	N	\$ 1,469.38	\$ 1,469.38
31368		A	090	Y	N	Y	D	N	\$ 1,628.92	\$ 1,628.92
31370		A	090	Y	N	Y	D	N	\$ 1,377.32	\$ 1,377.32
31375		A	090	Y	N	Y	D	N	\$ 1,307.67	\$ 1,307.67
31380		A	090	Y	N	Y	D	N	\$ 1,288.87	\$ 1,288.87
31382		A	090	Y	N	Y	D	N	\$ 1,414.91	\$ 1,414.91
31390		A	090	Y	N	Y	D	N	\$ 1,904.86	\$ 1,904.86
31395		A	090	Y	N	Y	D	N	\$ 2,003.43	\$ 2,003.43
31400		A	090	Y	N	Y	N	N	\$ 664.92	\$ 664.92
31420		A	090	Y	N	Y	D	N	\$ 556.23	\$ 556.23
31500		A	000	N	N	N	N	N	\$ 99.77	\$ 99.77
31502		A	000	Y	N	N	N	N	\$ 24.10	\$ 24.10
31505		A	000	Y	N	N	N	N	\$ 32.05	\$ 58.32
31510		A	000	Y	N	D	N	N	\$ 80.74	\$ 140.02

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
31511		A	000	Y	N	N	N	N	\$ 89.41	\$ 139.54
31512		A	000	Y	N	D	N	N	\$ 86.04	\$ 139.54
31513		A	000	Y	N	D	N	N	\$ 87.97	\$ 87.97
31515		A	000	Y	N	N	N	N	\$ 74.71	\$ 139.54
31520		A	000	Y	N	D	N	N	\$ 104.35	\$ 104.35
31525		A	000	Y	N	N	N	N	\$ 107.25	\$ 165.09
31526		A	000	Y	N	N	N	N	\$ 105.32	\$ 105.32
31527		A	000	Y	N	D	N	N	\$ 130.86	\$ 130.86
31528		A	000	Y	N	D	N	N	\$ 96.64	\$ 96.64
31529		A	000	Y	N	D	N	N	\$ 108.21	\$ 108.21
31530		A	000	Y	N	N	N	N	\$ 134.00	\$ 134.00
31531		A	000	Y	N	D	N	N	\$ 141.71	\$ 141.71
31535		A	000	Y	N	N	N	N	\$ 127.49	\$ 127.49
31536		A	000	Y	N	N	N	N	\$ 141.23	\$ 141.23
31540		A	000	Y	N	N	N	N	\$ 162.68	\$ 162.68
31541		A	000	Y	N	N	N	N	\$ 177.38	\$ 177.38
31545		A	000	Y	Y	N	N	N	\$ 244.37	\$ 244.37
31546		A	000	Y	Y	N	N	N	\$ 372.10	\$ 372.10
31551		A	090	Y	N	D	D	N	\$ 1,028.83	\$ 1,028.83
31552		A	090	Y	N	D	D	N	\$ 992.20	\$ 992.20
31553		A	090	Y	N	D	D	N	\$ 1,125.95	\$ 1,125.95
31554		A	090	Y	N	D	D	N	\$ 1,126.43	\$ 1,126.43
31560		A	000	Y	N	D	N	N	\$ 210.88	\$ 210.88
31561		A	000	Y	N	D	N	N	\$ 230.16	\$ 230.16
31570		A	000	Y	N	N	N	N	\$ 154.72	\$ 226.30
31571		A	000	Y	N	N	N	N	\$ 167.74	\$ 167.74
31572		A	000	Y	Y	D	N	N	\$ 121.71	\$ 341.98
31573		A	000	Y	Y	D	N	N	\$ 99.77	\$ 183.40
31574		A	000	Y	Y	D	N	N	\$ 100.02	\$ 634.31
31575		A	000	Y	N	N	N	N	\$ 44.59	\$ 82.18
31576		A	000	Y	N	N	N	N	\$ 79.29	\$ 173.52
31577		A	000	Y	N	D	N	N	\$ 89.89	\$ 181.23
31578		A	000	Y	N	D	N	N	\$ 98.57	\$ 195.45
31579		A	000	Y	N	N	N	N	\$ 79.53	\$ 127.97
31580		A	090	Y	N	D	D	N	\$ 850.73	\$ 850.73
31584		A	090	Y	N	D	D	N	\$ 944.96	\$ 944.96
31587		A	090	Y	N	D	D	N	\$ 798.19	\$ 798.19
31590		A	090	Y	N	Y	D	N	\$ 593.82	\$ 593.82
31591		Not Covered	090	Y	N	D	D	N	\$ 725.41	\$ 725.41
31592		Not Covered	090	Y	N	D	D	N	\$ 1,159.45	\$ 1,159.45
31599		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
31600		A	000	Y	N	N	N	N	\$ 212.80	\$ 212.80

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
31601		A	000	Y	N	Y	D	N	\$ 305.83	\$ 305.83
31603		A	000	Y	N	N	N	N	\$ 222.68	\$ 222.68
31605		A	000	Y	N	N	N	N	\$ 233.53	\$ 233.53
31610		A	090	Y	N	N	N	N	\$ 643.23	\$ 643.23
31611		A	090	Y	N	Y	D	N	\$ 354.51	\$ 354.51
31612		A	000	Y	N	D	N	N	\$ 33.50	\$ 60.25
31613		A	090	Y	N	N	N	N	\$ 289.20	\$ 289.20
31614		A	090	Y	N	N	N	N	\$ 483.21	\$ 483.21
31615		A	000	Y	N	N	N	N	\$ 77.12	\$ 113.99
31622		A	000	Y	N	N	N	N	\$ 89.89	\$ 161.95
31623		A	000	Y	N	N	N	N	\$ 90.38	\$ 180.27
31624		A	000	Y	N	N	N	N	\$ 91.10	\$ 167.74
31625		A	000	Y	N	N	N	N	\$ 106.52	\$ 230.40
31626		Not Covered	000	Y	N	D	N	N	\$ 136.17	\$ 541.29
31627		Not Covered	ZZZ	N	N	D	N	N	\$ 66.76	\$ 783.73
31628		A	000	Y	N	N	N	N	\$ 120.02	\$ 245.34
31629		A	000	Y	N	N	N	N	\$ 127.49	\$ 301.49
31630		A	000	Y	N	N	N	N	\$ 136.17	\$ 136.17
31631		A	000	Y	N	N	N	N	\$ 155.93	\$ 155.93
31632		A	ZZZ	N	N	N	N	N	\$ 33.98	\$ 43.38
31633		A	ZZZ	N	N	N	N	N	\$ 43.62	\$ 54.23
31634		A	000	Y	N	Y	N	N	\$ 130.14	\$ 1,075.82
31635		A	000	Y	N	N	N	N	\$ 120.02	\$ 192.32
31636		A	000	Y	N	N	N	N	\$ 150.14	\$ 150.14
31637		A	ZZZ	N	N	N	N	N	\$ 53.26	\$ 53.26
31638		A	000	Y	N	N	N	N	\$ 170.39	\$ 170.39
31640		A	000	Y	N	N	N	N	\$ 170.63	\$ 170.63
31641		A	000	Y	N	N	N	N	\$ 174.97	\$ 174.97
31643		A	000	Y	N	N	N	N	\$ 118.57	\$ 118.57
31645		A	000	Y	N	N	N	N	\$ 100.26	\$ 178.10
31646		A	000	Y	N	N	N	N	\$ 96.88	\$ 96.88
31647		A	000	Y	N	N	N	N	\$ 142.67	\$ 142.67
31648		A	000	Y	N	N	N	N	\$ 136.65	\$ 136.65
31649		A	ZZZ	N	N	N	N	N	\$ 46.27	\$ 46.27
31651		A	ZZZ	N	N	N	N	N	\$ 52.54	\$ 52.54
31652		A	000	Y	N	N	N	N	\$ 152.31	\$ 790.48
31653		A	000	Y	N	N	N	N	\$ 168.46	\$ 821.81
31654		A	ZZZ	N	N	N	N	N	\$ 46.03	\$ 80.74
31660		Not Covered	000	Y	N	N	N	N	\$ 134.00	\$ 134.00
31661		Not Covered	000	Y	N	N	N	N	\$ 141.47	\$ 141.47
31717		A	000	Y	N	N	N	N	\$ 72.30	\$ 186.53
31720		A	000	Y	N	N	N	N	\$ 37.36	\$ 37.36

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
31725		A	000	Y	N	N	N	N	\$ 54.23	\$ 54.23
31730		A	000	Y	N	N	N	N	\$ 104.84	\$ 753.37
31750		A	090	Y	N	Y	D	N	\$ 911.94	\$ 911.94
31755		A	090	Y	N	Y	D	N	\$ 1,148.12	\$ 1,148.12
31760		A	090	Y	N	Y	D	N	\$ 956.29	\$ 956.29
31766		A	090	Y	N	Y	D	N	\$ 1,242.11	\$ 1,242.11
31770		A	090	Y	N	Y	D	N	\$ 928.33	\$ 928.33
31775		A	090	Y	N	Y	N	N	\$ 976.53	\$ 976.53
31780		A	090	Y	N	Y	D	N	\$ 808.31	\$ 808.31
31781		A	090	Y	N	Y	D	N	\$ 969.54	\$ 969.54
31785		A	090	Y	N	Y	D	N	\$ 729.03	\$ 729.03
31786		A	090	Y	N	Y	D	N	\$ 1,006.66	\$ 1,006.66
31800		A	090	Y	N	D	N	N	\$ 475.98	\$ 475.98
31805		A	090	Y	N	Y	D	N	\$ 566.35	\$ 566.35
31820		A	090	Y	N	D	N	N	\$ 220.27	\$ 292.57
31825		A	090	Y	N	D	N	N	\$ 322.22	\$ 402.95
31830		A	090	Y	N	D	N	N	\$ 239.07	\$ 317.64
31899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
32035		A	090	Y	Y	Y	D	N	\$ 504.41	\$ 504.41
32036		A	090	Y	Y	Y	D	N	\$ 544.42	\$ 544.42
32096		A	090	Y	N	Y	D	N	\$ 557.67	\$ 557.67
32097		A	090	Y	N	Y	D	N	\$ 556.71	\$ 556.71
32098		A	090	Y	N	Y	D	N	\$ 527.07	\$ 527.07
32100		A	090	Y	N	Y	D	N	\$ 560.33	\$ 560.33
32110		A	090	Y	N	Y	D	N	\$ 1,023.05	\$ 1,023.05
32120		A	090	Y	N	Y	D	N	\$ 604.91	\$ 604.91
32124		A	090	Y	N	Y	D	N	\$ 642.02	\$ 642.02
32140		A	090	Y	N	Y	D	N	\$ 687.57	\$ 687.57
32141		A	090	Y	N	Y	D	N	\$ 1,064.98	\$ 1,064.98
32150		A	090	Y	N	Y	D	N	\$ 697.21	\$ 697.21
32151		A	090	Y	N	Y	D	N	\$ 698.18	\$ 698.18
32160		A	090	Y	N	Y	D	N	\$ 550.44	\$ 550.44
32200		A	090	Y	N	Y	D	N	\$ 787.83	\$ 787.83
32215		A	090	Y	Y	Y	D	N	\$ 555.02	\$ 555.02
32220		A	090	Y	Y	Y	D	N	\$ 1,104.74	\$ 1,104.74
32225		A	090	Y	Y	Y	D	N	\$ 689.74	\$ 689.74
32310		A	090	Y	N	Y	D	N	\$ 636.72	\$ 636.72
32320		A	090	Y	N	Y	D	N	\$ 1,114.14	\$ 1,114.14
32400		A	000	Y	N	N	N	N	\$ 58.08	\$ 106.52
32408		A	000	Y	N	N	N	N	\$ 104.84	\$ 585.87
32440		A	090	Y	N	Y	D	N	\$ 1,094.14	\$ 1,094.14
32442		A	090	Y	N	Y	D	N	\$ 2,145.38	\$ 2,145.38

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
32445		A	090	Y	N	Y	D	N	\$ 2,470.25	\$ 2,470.25
32480		A	090	Y	N	Y	D	N	\$ 1,031.72	\$ 1,031.72
32482		A	090	Y	N	Y	D	N	\$ 1,104.02	\$ 1,104.02
32484		A	090	Y	N	Y	D	N	\$ 1,001.60	\$ 1,001.60
32486		A	090	Y	N	Y	D	N	\$ 1,642.90	\$ 1,642.90
32488		A	090	Y	N	Y	D	N	\$ 1,672.54	\$ 1,672.54
32491		A	090	Y	Y	Y	D	N	\$ 1,024.01	\$ 1,024.01
32501		A	ZZZ	N	N	Y	D	N	\$ 172.32	\$ 172.32
32503		A	090	Y	N	Y	D	N	\$ 1,253.44	\$ 1,253.44
32504		A	090	Y	N	Y	D	N	\$ 1,429.61	\$ 1,429.61
32505		A	090	Y	N	Y	D	N	\$ 646.84	\$ 646.84
32506		A	ZZZ	N	N	Y	D	N	\$ 110.62	\$ 110.62
32507		A	ZZZ	N	N	Y	D	N	\$ 110.62	\$ 110.62
32540		A	090	Y	N	Y	D	N	\$ 1,204.04	\$ 1,204.04
32550		A	000	N	N	N	N	N	\$ 141.47	\$ 526.83
32551		A	000	Y	Y	N	N	N	\$ 109.17	\$ 109.17
32552		A	010	Y	N	D	N	N	\$ 107.25	\$ 123.39
32553		A	000	Y	N	Y	N	N	\$ 120.74	\$ 343.18
32554		A	000	Y	Y	N	N	N	\$ 61.70	\$ 154.24
32555		A	000	Y	Y	N	N	N	\$ 75.92	\$ 208.22
32556		A	000	Y	Y	N	N	N	\$ 85.56	\$ 468.26
32557		A	000	Y	Y	N	N	N	\$ 102.91	\$ 422.71
32560		A	000	Y	N	N	N	N	\$ 53.74	\$ 171.35
32561		A	000	Y	N	Y	N	N	\$ 47.00	\$ 63.14
32562		A	000	Y	N	Y	N	N	\$ 41.93	\$ 56.64
32601		A	000	Y	N	D	N	N	\$ 214.97	\$ 214.97
32604		A	000	Y	N	D	N	N	\$ 334.99	\$ 334.99
32606		A	000	Y	N	D	N	N	\$ 322.94	\$ 322.94
32607		A	000	Y	N	D	N	N	\$ 214.73	\$ 214.73
32608		A	000	Y	N	D	N	N	\$ 265.10	\$ 265.10
32609		A	000	Y	N	D	N	N	\$ 178.34	\$ 178.34
32650		A	090	Y	Y	Y	D	N	\$ 460.31	\$ 460.31
32651		A	090	Y	Y	Y	D	N	\$ 761.80	\$ 761.80
32652		A	090	Y	Y	Y	D	N	\$ 1,158.49	\$ 1,158.49
32653		A	090	Y	N	Y	D	N	\$ 736.98	\$ 736.98
32654		A	090	Y	Y	Y	D	N	\$ 801.81	\$ 801.81
32655		A	090	Y	Y	Y	D	N	\$ 664.68	\$ 664.68
32656		A	090	Y	Y	Y	D	N	\$ 556.23	\$ 556.23
32658		A	090	Y	N	Y	D	N	\$ 494.29	\$ 494.29
32659		A	090	Y	N	Y	D	N	\$ 506.34	\$ 506.34
32661		A	090	Y	N	Y	D	N	\$ 553.82	\$ 553.82
32662		A	090	Y	N	Y	D	N	\$ 619.61	\$ 619.61

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
32663		A	090	Y	N	Y	D	N	\$ 976.77	\$ 976.77
32664		A	090	Y	Y	Y	D	N	\$ 588.76	\$ 588.76
32665		A	090	Y	N	Y	D	N	\$ 857.96	\$ 857.96
32666		A	090	Y	Y	Y	D	N	\$ 603.22	\$ 603.22
32667		A	ZZZ	N	N	Y	D	N	\$ 110.62	\$ 110.62
32668		A	ZZZ	N	N	Y	D	N	\$ 110.62	\$ 110.62
32669		A	090	Y	N	Y	D	N	\$ 936.53	\$ 936.53
32670		A	090	Y	N	Y	D	N	\$ 1,120.17	\$ 1,120.17
32671		A	090	Y	N	Y	D	N	\$ 1,240.91	\$ 1,240.91
32672		A	090	Y	N	Y	D	N	\$ 1,064.02	\$ 1,064.02
32673		A	090	Y	N	Y	D	N	\$ 846.39	\$ 846.39
32674		A	ZZZ	N	N	Y	D	N	\$ 152.07	\$ 152.07
32701		A	XXX	N	N	D	D	N	\$ 148.94	\$ 148.94
32800		A	090	Y	N	Y	D	N	\$ 656.73	\$ 656.73
32810		A	090	Y	N	Y	N	N	\$ 624.19	\$ 624.19
32815		A	090	Y	N	Y	D	N	\$ 1,961.02	\$ 1,961.02
32820		A	090	Y	N	Y	D	N	\$ 924.48	\$ 924.48
32850		C	XXX	N	N	N	N	N	\$ -	\$ -
32851		A	090	Y	N	Y	D	Y	\$ 2,292.15	\$ 2,292.15
32852		A	090	Y	N	Y	D	Y	\$ 2,508.57	\$ 2,508.57
32853		A	090	Y	B	Y	D	Y	\$ 3,206.99	\$ 3,206.99
32854		A	090	Y	B	Y	D	Y	\$ 3,404.13	\$ 3,404.13
32855		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
32856		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
32900		A	090	Y	N	Y	D	N	\$ 989.79	\$ 989.79
32905		A	090	Y	N	Y	D	N	\$ 930.26	\$ 930.26
32906		A	090	Y	N	Y	D	N	\$ 1,151.26	\$ 1,151.26
32940		A	090	Y	N	Y	D	N	\$ 858.68	\$ 858.68
32960		A	000	Y	N	N	N	N	\$ 62.42	\$ 84.59
32994		A	000	Y	Y	Y	N	N	\$ 300.05	\$ 3,390.15
32997		A	000	Y	Y	N	N	N	\$ 234.25	\$ 234.25
32998		A	000	Y	Y	Y	N	N	\$ 299.56	\$ 2,159.60
32999		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
33016		A	000	Y	N	N	N	N	\$ 165.33	\$ 165.33
33017		A	000	Y	N	N	N	N	\$ 170.87	\$ 170.87
33018		A	000	Y	N	N	N	N	\$ 194.49	\$ 194.49
33019		A	000	Y	N	N	N	N	\$ 157.86	\$ 157.86
33020		A	090	Y	N	Y	D	N	\$ 575.99	\$ 575.99
33025		A	090	Y	N	Y	D	N	\$ 535.50	\$ 535.50
33030		A	090	Y	N	Y	D	N	\$ 1,399.01	\$ 1,399.01
33031		A	090	Y	N	Y	D	N	\$ 1,734.72	\$ 1,734.72
33050		A	090	Y	N	Y	D	N	\$ 698.42	\$ 698.42

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33120		A	090	Y	N	Y	D	N	\$ 1,467.69	\$ 1,467.69
33130		A	090	Y	N	Y	D	N	\$ 953.64	\$ 953.64
33140		A	090	Y	N	Y	N	N	\$ 1,090.77	\$ 1,090.77
33141		A	ZZZ	N	N	Y	D	N	\$ 93.51	\$ 93.51
33202		A	090	Y	N	N	N	N	\$ 536.47	\$ 536.47
33203		A	090	Y	N	N	N	N	\$ 562.98	\$ 562.98
33206		A	090	Y	N	N	Y	N	\$ 314.75	\$ 314.75
33207		A	090	Y	N	N	Y	N	\$ 332.34	\$ 332.34
33208		A	090	Y	N	N	Y	N	\$ 361.50	\$ 361.50
33210		A	000	Y	N	N	N	N	\$ 113.75	\$ 113.75
33211		A	000	Y	N	N	N	N	\$ 119.30	\$ 119.30
33212		A	090	Y	N	N	N	N	\$ 222.68	\$ 222.68
33213		A	090	Y	N	N	N	N	\$ 232.08	\$ 232.08
33214		A	090	Y	N	D	Y	N	\$ 331.62	\$ 331.62
33215		A	090	Y	N	N	N	N	\$ 214.25	\$ 214.25
33216		A	090	Y	N	N	N	N	\$ 256.18	\$ 256.18
33217		A	090	Y	N	N	N	N	\$ 253.77	\$ 253.77
33218		A	090	Y	N	N	N	N	\$ 267.51	\$ 267.51
33220		A	090	Y	N	N	N	N	\$ 260.28	\$ 260.28
33221		A	090	Y	N	N	N	N	\$ 249.68	\$ 249.68
33222		A	090	Y	N	N	N	N	\$ 234.01	\$ 234.01
33223		A	090	Y	N	D	N	N	\$ 283.42	\$ 283.42
33224		A	000	Y	N	N	N	N	\$ 359.57	\$ 359.57
33225		A	ZZZ	N	N	N	N	N	\$ 327.52	\$ 327.52
33226		A	000	Y	N	N	N	N	\$ 344.39	\$ 344.39
33227		A	090	Y	N	N	N	N	\$ 233.77	\$ 233.77
33228		A	090	Y	N	N	N	N	\$ 245.34	\$ 245.34
33229		A	090	Y	N	N	N	N	\$ 259.08	\$ 259.08
33230		A	090	Y	N	N	N	N	\$ 265.58	\$ 265.58
33231		A	090	Y	N	N	N	N	\$ 277.63	\$ 277.63
33233		A	090	Y	N	N	N	N	\$ 158.34	\$ 158.34
33234		A	090	Y	N	N	N	N	\$ 336.44	\$ 336.44
33235		A	090	Y	N	N	N	N	\$ 440.31	\$ 440.31
33236		A	090	Y	N	D	Y	N	\$ 540.56	\$ 540.56
33237		A	090	Y	N	D	Y	N	\$ 580.57	\$ 580.57
33238		A	090	Y	N	D	Y	N	\$ 653.59	\$ 653.59
33240		A	090	Y	N	N	N	N	\$ 252.81	\$ 252.81
33241		A	090	Y	N	N	N	N	\$ 147.25	\$ 147.25
33243		A	090	Y	N	Y	D	N	\$ 953.64	\$ 953.64
33244		A	090	Y	N	N	D	N	\$ 599.85	\$ 599.85
33249		A	090	Y	N	N	D	N	\$ 636.48	\$ 636.48
33250		A	090	Y	N	Y	D	N	\$ 1,016.54	\$ 1,016.54

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33251		A	090	Y	N	Y	D	N	\$ 1,137.04	\$ 1,137.04
33254		A	090	Y	N	Y	D	N	\$ 945.20	\$ 945.20
33255		A	090	Y	N	Y	D	N	\$ 1,135.83	\$ 1,135.83
33256		A	090	Y	N	Y	D	N	\$ 1,357.79	\$ 1,357.79
33257		A	ZZZ	N	N	Y	N	N	\$ 403.19	\$ 403.19
33258		A	ZZZ	N	N	Y	N	N	\$ 451.15	\$ 451.15
33259		A	ZZZ	N	N	Y	N	N	\$ 585.15	\$ 585.15
33261		A	090	Y	N	Y	D	N	\$ 1,125.95	\$ 1,125.95
33262		A	090	Y	N	N	N	N	\$ 258.35	\$ 258.35
33263		A	090	Y	N	N	N	N	\$ 268.72	\$ 268.72
33264		A	090	Y	N	N	N	N	\$ 281.01	\$ 281.01
33265		A	090	Y	N	Y	D	N	\$ 948.09	\$ 948.09
33266		A	090	Y	N	Y	D	N	\$ 1,289.11	\$ 1,289.11
33270		A	090	Y	N	N	N	N	\$ 390.66	\$ 390.66
33271		A	090	Y	N	N	N	N	\$ 314.75	\$ 314.75
33272		A	090	Y	N	N	N	N	\$ 239.31	\$ 239.31
33273		A	090	Y	N	N	N	N	\$ 276.43	\$ 276.43
33274		Not Covered	090	Y	N	N	Y	N	\$ 334.99	\$ 334.99
33275		Not Covered	090	Y	N	N	N	N	\$ 363.91	\$ 363.91
33285		A	000	Y	N	N	N	N	\$ 61.46	\$ 3,089.62
33286		A	000	Y	N	N	N	N	\$ 60.73	\$ 91.58
33289		Not Covered	000	Y	N	D	N	N	\$ 233.05	\$ 233.05
33300		A	090	Y	N	Y	D	N	\$ 1,715.20	\$ 1,715.20
33305		A	090	Y	N	Y	D	N	\$ 2,876.34	\$ 2,876.34
33310		A	090	Y	N	Y	D	N	\$ 813.38	\$ 813.38
33315		A	090	Y	N	Y	D	N	\$ 1,341.65	\$ 1,341.65
33320		A	090	Y	N	Y	D	N	\$ 737.22	\$ 737.22
33321		A	090	Y	N	Y	D	N	\$ 827.35	\$ 827.35
33322		A	090	Y	N	Y	D	N	\$ 969.54	\$ 969.54
33330		A	090	Y	N	Y	D	N	\$ 993.64	\$ 993.64
33335		A	090	Y	N	Y	D	N	\$ 1,307.18	\$ 1,307.18
33340		Not Covered	000	Y	N	D	Y	D	\$ 549.96	\$ 549.96
33361		A	000	Y	N	D	Y	D	\$ 849.04	\$ 849.04
33362		A	000	Y	N	D	Y	D	\$ 925.20	\$ 925.20
33363		A	000	Y	N	D	Y	D	\$ 959.90	\$ 959.90
33364		A	000	Y	N	D	Y	D	\$ 963.04	\$ 963.04
33365		A	000	Y	N	D	Y	D	\$ 1,000.39	\$ 1,000.39
33366		A	000	Y	N	D	Y	D	\$ 1,103.78	\$ 1,103.78
33367		A	ZZZ	N	N	D	N	D	\$ 442.48	\$ 442.48
33368		A	ZZZ	N	N	D	N	D	\$ 523.93	\$ 523.93
33369		A	ZZZ	N	N	D	N	D	\$ 691.91	\$ 691.91
33390		Not Covered	090	Y	N	Y	D	N	\$ 1,346.23	\$ 1,346.23

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33391		Not Covered	090	Y	N	Y	D	N	\$ 1,604.10	\$ 1,604.10
33404		A	090	Y	N	Y	D	N	\$ 1,221.87	\$ 1,221.87
33405		A	090	Y	N	Y	D	N	\$ 1,590.12	\$ 1,590.12
33406		A	090	Y	N	Y	D	N	\$ 2,017.65	\$ 2,017.65
33410		A	090	Y	N	Y	D	N	\$ 1,780.75	\$ 1,780.75
33411		A	090	Y	N	Y	N	N	\$ 2,353.61	\$ 2,353.61
33412		A	090	Y	N	Y	D	N	\$ 2,212.86	\$ 2,212.86
33413		A	090	Y	N	Y	D	N	\$ 2,262.75	\$ 2,262.75
33414		A	090	Y	N	Y	D	N	\$ 1,506.25	\$ 1,506.25
33415		A	090	Y	N	Y	D	N	\$ 1,416.36	\$ 1,416.36
33416		A	090	Y	N	Y	D	N	\$ 1,413.95	\$ 1,413.95
33417		A	090	Y	N	Y	D	N	\$ 1,163.79	\$ 1,163.79
33418		Not Covered	090	Y	N	Y	D	N	\$ 1,254.89	\$ 1,254.89
33419		Not Covered	ZZZ	N	N	Y	D	N	\$ 298.12	\$ 298.12
33420		A	090	Y	N	N	D	N	\$ 1,012.44	\$ 1,012.44
33422		A	090	Y	N	Y	D	N	\$ 1,161.86	\$ 1,161.86
33425		A	090	Y	N	Y	D	N	\$ 1,914.50	\$ 1,914.50
33426		A	090	Y	N	Y	D	N	\$ 1,666.03	\$ 1,666.03
33427		A	090	Y	N	Y	D	N	\$ 1,707.73	\$ 1,707.73
33430		A	090	Y	N	Y	D	N	\$ 1,960.78	\$ 1,960.78
33440		A	090	Y	N	Y	D	N	\$ 2,298.42	\$ 2,298.42
33460		A	090	Y	N	Y	D	N	\$ 1,686.52	\$ 1,686.52
33463		A	090	Y	N	Y	D	N	\$ 2,146.59	\$ 2,146.59
33464		A	090	Y	N	Y	D	N	\$ 1,706.52	\$ 1,706.52
33465		A	090	Y	N	Y	D	N	\$ 1,928.24	\$ 1,928.24
33468		A	090	Y	N	Y	D	N	\$ 1,719.54	\$ 1,719.54
33470		A	090	Y	N	Y	N	N	\$ 862.78	\$ 862.78
33471		A	090	Y	N	Y	D	N	\$ 922.31	\$ 922.31
33474		A	090	Y	N	Y	D	N	\$ 1,525.77	\$ 1,525.77
33475		A	090	Y	N	Y	D	N	\$ 1,625.55	\$ 1,625.55
33476		A	090	Y	N	Y	D	N	\$ 1,062.09	\$ 1,062.09
33477		A	000	Y	N	D	D	D	\$ 950.26	\$ 950.26
33478		A	090	Y	N	Y	D	N	\$ 1,097.51	\$ 1,097.51
33496		A	090	Y	N	Y	D	N	\$ 1,163.55	\$ 1,163.55
33500		A	090	Y	N	Y	D	N	\$ 1,090.53	\$ 1,090.53
33501		A	090	Y	N	Y	Y	N	\$ 777.71	\$ 777.71
33502		A	090	Y	N	Y	D	N	\$ 888.09	\$ 888.09
33503		A	090	Y	N	D	D	N	\$ 922.31	\$ 922.31
33504		A	090	Y	N	Y	D	N	\$ 1,021.84	\$ 1,021.84
33505		A	090	Y	N	Y	D	N	\$ 1,448.65	\$ 1,448.65
33506		A	090	Y	N	Y	D	N	\$ 1,440.46	\$ 1,440.46
33507		A	090	Y	N	Y	D	N	\$ 1,206.93	\$ 1,206.93

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33508		A	ZZZ	N	N	Y	D	N	\$ 11.09	\$ 11.09
33510		A	090	Y	N	Y	N	N	\$ 1,352.73	\$ 1,352.73
33511		A	090	Y	N	Y	N	N	\$ 1,485.77	\$ 1,485.77
33512		A	090	Y	N	Y	N	N	\$ 1,695.44	\$ 1,695.44
33513		A	090	Y	N	Y	N	N	\$ 1,742.91	\$ 1,742.91
33514		A	090	Y	N	Y	N	N	\$ 1,837.87	\$ 1,837.87
33516		A	090	Y	N	Y	N	N	\$ 1,894.74	\$ 1,894.74
33517		A	ZZZ	N	N	Y	N	N	\$ 131.83	\$ 131.83
33518		A	ZZZ	N	N	Y	N	N	\$ 290.41	\$ 290.41
33519		A	ZZZ	N	N	Y	N	N	\$ 383.67	\$ 383.67
33521		A	ZZZ	N	N	Y	N	N	\$ 460.79	\$ 460.79
33522		A	ZZZ	N	N	Y	N	N	\$ 517.43	\$ 517.43
33523		A	ZZZ	N	N	Y	N	N	\$ 587.08	\$ 587.08
33530		A	ZZZ	N	N	Y	N	N	\$ 370.18	\$ 370.18
33533		A	090	Y	N	Y	N	N	\$ 1,309.59	\$ 1,309.59
33534		A	090	Y	N	Y	N	N	\$ 1,538.30	\$ 1,538.30
33535		A	090	Y	N	Y	N	N	\$ 1,715.68	\$ 1,715.68
33536		A	090	Y	N	Y	N	N	\$ 1,846.78	\$ 1,846.78
33542		A	090	Y	N	Y	D	N	\$ 1,842.45	\$ 1,842.45
33545		A	090	Y	N	Y	D	N	\$ 2,154.06	\$ 2,154.06
33548		A	090	Y	N	Y	D	N	\$ 2,076.46	\$ 2,076.46
33572		A	ZZZ	N	N	Y	N	N	\$ 162.68	\$ 162.68
33600		A	090	Y	N	Y	D	N	\$ 1,200.18	\$ 1,200.18
33602		A	090	Y	N	Y	D	N	\$ 1,164.03	\$ 1,164.03
33606		A	090	Y	N	Y	D	N	\$ 1,242.11	\$ 1,242.11
33608		A	090	Y	N	Y	D	N	\$ 1,257.54	\$ 1,257.54
33610		A	090	Y	N	Y	D	N	\$ 1,239.70	\$ 1,239.70
33611		A	090	Y	N	Y	D	N	\$ 1,366.23	\$ 1,366.23
33612		A	090	Y	N	Y	D	N	\$ 1,403.34	\$ 1,403.34
33615		A	090	Y	N	Y	D	N	\$ 1,397.56	\$ 1,397.56
33617		A	090	Y	N	Y	D	N	\$ 1,514.44	\$ 1,514.44
33619		A	090	Y	N	Y	D	N	\$ 1,916.19	\$ 1,916.19
33620		A	090	Y	N	Y	D	N	\$ 1,155.11	\$ 1,155.11
33621		A	090	Y	N	Y	D	N	\$ 648.53	\$ 648.53
33622		A	090	Y	N	Y	D	N	\$ 2,410.96	\$ 2,410.96
33641		A	090	Y	N	Y	D	N	\$ 1,146.92	\$ 1,146.92
33645		A	090	Y	N	Y	D	N	\$ 1,211.75	\$ 1,211.75
33647		A	090	Y	N	Y	D	N	\$ 1,272.48	\$ 1,272.48
33660		A	090	Y	N	Y	D	N	\$ 1,229.58	\$ 1,229.58
33665		A	090	Y	N	Y	D	N	\$ 1,340.20	\$ 1,340.20
33670		A	090	Y	N	Y	D	N	\$ 1,385.51	\$ 1,385.51
33675		A	090	Y	N	Y	D	N	\$ 1,381.17	\$ 1,381.17

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33676		A	090	Y	N	Y	D	N	\$ 1,418.04	\$ 1,418.04
33677		A	090	Y	N	Y	D	N	\$ 1,472.51	\$ 1,472.51
33681		A	090	Y	N	Y	D	N	\$ 1,285.98	\$ 1,285.98
33684		A	090	Y	N	Y	D	N	\$ 1,322.85	\$ 1,322.85
33688		A	090	Y	N	Y	D	N	\$ 1,321.89	\$ 1,321.89
33690		A	090	Y	N	Y	D	N	\$ 834.34	\$ 834.34
33692		A	090	Y	N	Y	D	N	\$ 1,373.46	\$ 1,373.46
33694		A	090	Y	N	Y	D	N	\$ 1,366.23	\$ 1,366.23
33697		A	090	Y	N	Y	D	N	\$ 1,439.73	\$ 1,439.73
33702		A	090	Y	N	Y	D	N	\$ 1,080.16	\$ 1,080.16
33710		A	090	Y	N	Y	N	N	\$ 1,437.32	\$ 1,437.32
33720		A	090	Y	N	Y	D	N	\$ 1,081.13	\$ 1,081.13
33722		A	090	Y	N	Y	D	N	\$ 1,138.48	\$ 1,138.48
33724		A	090	Y	N	Y	D	N	\$ 1,076.31	\$ 1,076.31
33726		A	090	Y	N	Y	D	N	\$ 1,424.55	\$ 1,424.55
33730		A	090	Y	N	Y	D	N	\$ 1,403.83	\$ 1,403.83
33732		A	090	Y	N	Y	D	N	\$ 1,150.29	\$ 1,150.29
33735		A	090	Y	N	Y	N	N	\$ 902.55	\$ 902.55
33736		A	090	Y	N	Y	D	N	\$ 979.91	\$ 979.91
33737		A	090	Y	N	Y	D	N	\$ 904.96	\$ 904.96
33741		A	000	Y	N	Y	N	N	\$ 530.44	\$ 530.44
33745		A	000	Y	N	Y	N	N	\$ 745.90	\$ 745.90
33746		A	ZZZ	N	N	Y	N	N	\$ 294.26	\$ 294.26
33750		A	090	Y	N	Y	D	N	\$ 882.54	\$ 882.54
33755		A	090	Y	N	Y	D	N	\$ 916.76	\$ 916.76
33762		A	090	Y	N	Y	D	N	\$ 896.04	\$ 896.04
33764		A	090	Y	N	Y	D	N	\$ 916.76	\$ 916.76
33766		A	090	Y	N	Y	D	N	\$ 931.47	\$ 931.47
33767		A	090	Y	N	Y	D	N	\$ 994.85	\$ 994.85
33768		A	ZZZ	N	N	Y	Y	N	\$ 293.54	\$ 293.54
33770		A	090	Y	N	Y	D	N	\$ 1,485.04	\$ 1,485.04
33771		A	090	Y	N	Y	D	N	\$ 1,531.07	\$ 1,531.07
33774		A	090	Y	N	Y	D	N	\$ 1,256.33	\$ 1,256.33
33775		A	090	Y	N	Y	N	N	\$ 1,295.62	\$ 1,295.62
33776		A	090	Y	N	Y	D	N	\$ 1,368.88	\$ 1,368.88
33777		A	090	Y	N	Y	N	N	\$ 1,325.26	\$ 1,325.26
33778		A	090	Y	N	Y	D	N	\$ 1,646.51	\$ 1,646.51
33779		A	090	Y	N	Y	D	N	\$ 1,633.74	\$ 1,633.74
33780		A	090	Y	N	Y	D	N	\$ 1,662.90	\$ 1,662.90
33781		A	090	Y	N	Y	N	N	\$ 1,625.55	\$ 1,625.55
33782		A	090	Y	N	Y	D	N	\$ 2,267.09	\$ 2,267.09
33783		A	090	Y	N	Y	D	N	\$ 2,450.49	\$ 2,450.49

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33786		A	090	Y	N	Y	D	N	\$ 1,598.55	\$ 1,598.55
33788		A	090	Y	N	Y	D	N	\$ 1,073.66	\$ 1,073.66
33800		A	090	Y	N	Y	Y	N	\$ 688.78	\$ 688.78
33802		A	090	Y	N	Y	D	N	\$ 754.57	\$ 754.57
33803		A	090	Y	N	Y	D	N	\$ 804.94	\$ 804.94
33813		A	090	Y	N	Y	D	N	\$ 863.99	\$ 863.99
33814		A	090	Y	N	Y	D	N	\$ 1,063.05	\$ 1,063.05
33820		A	090	Y	N	Y	N	N	\$ 673.84	\$ 673.84
33822		A	090	Y	N	Y	D	N	\$ 710.95	\$ 710.95
33824		A	090	Y	N	Y	D	N	\$ 821.09	\$ 821.09
33840		A	090	Y	N	Y	D	N	\$ 863.02	\$ 863.02
33845		A	090	Y	N	Y	D	N	\$ 928.57	\$ 928.57
33851		A	090	Y	N	Y	D	N	\$ 886.64	\$ 886.64
33852		A	090	Y	N	Y	N	N	\$ 976.29	\$ 976.29
33853		A	090	Y	N	Y	D	N	\$ 1,280.92	\$ 1,280.92
33858		A	090	Y	N	Y	D	N	\$ 2,383.49	\$ 2,383.49
33859		A	090	Y	N	Y	D	N	\$ 1,710.86	\$ 1,710.86
33863		A	090	Y	N	Y	D	N	\$ 2,211.42	\$ 2,211.42
33864		A	090	Y	N	Y	D	N	\$ 2,258.89	\$ 2,258.89
33866		A	ZZZ	N	N	D	N	D	\$ 650.94	\$ 650.94
33871		A	090	Y	N	Y	D	N	\$ 2,289.50	\$ 2,289.50
33875		A	090	Y	N	Y	Y	N	\$ 1,917.88	\$ 1,917.88
33877		A	090	Y	N	Y	Y	N	\$ 2,544.00	\$ 2,544.00
33880		A	090	Y	B	Y	Y	N	\$ 1,260.91	\$ 1,260.91
33881		A	090	Y	B	Y	Y	N	\$ 1,080.64	\$ 1,080.64
33883		A	090	Y	N	Y	Y	N	\$ 782.05	\$ 782.05
33884		A	ZZZ	N	N	Y	Y	N	\$ 281.25	\$ 281.25
33886		A	090	Y	N	Y	Y	N	\$ 670.70	\$ 670.70
33889		A	000	Y	Y	Y	Y	N	\$ 559.12	\$ 559.12
33891		A	000	Y	Y	Y	Y	N	\$ 686.61	\$ 686.61
33910		A	090	Y	N	Y	D	N	\$ 1,835.70	\$ 1,835.70
33915		A	090	Y	N	Y	D	N	\$ 964.48	\$ 964.48
33916		A	090	Y	N	Y	D	N	\$ 2,955.87	\$ 2,955.87
33917		A	090	Y	N	Y	D	N	\$ 1,015.57	\$ 1,015.57
33920		A	090	Y	N	Y	D	N	\$ 1,268.62	\$ 1,268.62
33922		A	090	Y	N	Y	D	N	\$ 969.06	\$ 969.06
33924		A	ZZZ	N	N	Y	D	N	\$ 201.24	\$ 201.24
33925		A	090	Y	N	Y	D	N	\$ 1,202.83	\$ 1,202.83
33926		A	090	Y	N	Y	D	N	\$ 1,695.92	\$ 1,695.92
33927		Not Covered	XXX	Y	N	Y	N	N	\$ 1,798.10	\$ 1,798.10
33928		Not Covered	XXX	Y	N	Y	N	N	\$ -	\$ -
33929		Not Covered	ZZZ	N	N	Y	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
33930		C	XXX	N	N	N	N	N	\$ -	\$ -
33933		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
33935		A	090	Y	N	Y	D	Y	\$ 3,461.48	\$ 3,461.48
33940		C	XXX	N	N	N	N	N	\$ -	\$ -
33944		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
33945		A	090	Y	N	Y	D	Y	\$ 3,403.40	\$ 3,403.40
33946		A	XXX	N	N	N	N	N	\$ 217.14	\$ 217.14
33947		A	XXX	N	N	N	N	N	\$ 241.96	\$ 241.96
33948		A	XXX	N	N	N	N	N	\$ 166.53	\$ 166.53
33949		A	XXX	N	N	N	N	N	\$ 161.47	\$ 161.47
33951		A	000	Y	N	D	N	N	\$ 298.12	\$ 298.12
33952		A	000	Y	N	D	N	N	\$ 300.29	\$ 300.29
33953		A	000	Y	N	D	N	N	\$ 333.79	\$ 333.79
33954		A	000	Y	N	D	N	N	\$ 334.99	\$ 334.99
33955		A	000	Y	N	D	D	D	\$ 584.18	\$ 584.18
33956		A	000	Y	N	D	D	D	\$ 588.28	\$ 588.28
33957		A	000	Y	N	D	N	N	\$ 129.42	\$ 129.42
33958		A	000	Y	N	D	N	N	\$ 129.42	\$ 129.42
33959		A	000	Y	N	D	N	N	\$ 165.09	\$ 165.09
33962		A	000	Y	N	D	N	N	\$ 165.09	\$ 165.09
33963		A	000	Y	N	D	D	D	\$ 329.45	\$ 329.45
33964		A	000	Y	N	D	D	D	\$ 347.28	\$ 347.28
33965		A	000	Y	N	D	N	N	\$ 129.42	\$ 129.42
33966		A	000	Y	N	D	N	N	\$ 166.29	\$ 166.29
33967		A	000	Y	N	D	N	N	\$ 182.44	\$ 182.44
33968		A	000	N	N	N	N	N	\$ 23.86	\$ 23.86
33969		A	000	Y	N	D	N	N	\$ 192.08	\$ 192.08
33970		A	000	Y	N	Y	D	N	\$ 248.23	\$ 248.23
33971		A	090	Y	N	N	N	N	\$ 487.54	\$ 487.54
33973		A	000	Y	N	Y	D	N	\$ 355.23	\$ 355.23
33974		A	090	Y	N	N	N	N	\$ 617.92	\$ 617.92
33975		A	XXX	Y	N	Y	N	N	\$ 916.28	\$ 916.28
33976		A	XXX	Y	B	Y	N	N	\$ 1,118.96	\$ 1,118.96
33977		A	XXX	Y	N	Y	N	N	\$ 785.18	\$ 785.18
33978		A	XXX	Y	B	Y	N	N	\$ 934.60	\$ 934.60
33979		A	XXX	Y	N	Y	N	N	\$ 1,371.53	\$ 1,371.53
33980		A	XXX	Y	N	Y	N	N	\$ 1,248.62	\$ 1,248.62
33981		A	XXX	Y	N	Y	N	N	\$ 585.87	\$ 585.87
33982		A	XXX	Y	N	Y	N	N	\$ 1,377.56	\$ 1,377.56
33983		A	XXX	Y	N	Y	N	N	\$ 1,629.64	\$ 1,629.64
33984		A	000	Y	N	D	N	N	\$ 200.51	\$ 200.51
33985		A	000	Y	N	D	D	D	\$ 361.98	\$ 361.98

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
33986		A	000	Y	N	D	D	D	\$ 368.73	\$ 368.73
33987		A	ZZZ	N	N	D	D	D	\$ 147.49	\$ 147.49
33988		A	000	Y	N	D	D	D	\$ 548.52	\$ 548.52
33989		A	000	Y	N	D	D	D	\$ 347.28	\$ 347.28
33990		A	000	Y	N	Y	N	N	\$ 253.77	\$ 253.77
33991		A	000	Y	N	Y	N	N	\$ 331.13	\$ 331.13
33992		A	000	Y	N	Y	N	N	\$ 132.07	\$ 132.07
33993		A	000	Y	N	Y	N	N	\$ 115.92	\$ 115.92
33995		A	000	Y	N	Y	N	N	\$ 254.01	\$ 254.01
33997		A	000	Y	N	Y	N	N	\$ 113.03	\$ 113.03
33999		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
34001		A	090	Y	Y	Y	D	N	\$ 646.60	\$ 646.60
34051		A	090	Y	Y	Y	D	N	\$ 690.22	\$ 690.22
34101		A	090	Y	Y	Y	D	N	\$ 418.38	\$ 418.38
34111		A	090	Y	Y	Y	D	N	\$ 420.30	\$ 420.30
34151		A	090	Y	Y	Y	D	N	\$ 978.22	\$ 978.22
34201		A	090	Y	Y	Y	D	N	\$ 720.83	\$ 720.83
34203		A	090	Y	Y	Y	D	N	\$ 667.09	\$ 667.09
34401		A	090	Y	Y	Y	D	N	\$ 1,025.46	\$ 1,025.46
34421		A	090	Y	Y	Y	D	N	\$ 515.02	\$ 515.02
34451		A	090	Y	Y	Y	D	N	\$ 1,016.54	\$ 1,016.54
34471		A	090	Y	Y	N	D	N	\$ 762.52	\$ 762.52
34490		A	090	Y	Y	N	N	N	\$ 449.22	\$ 449.22
34501		A	090	Y	Y	Y	D	N	\$ 627.56	\$ 627.56
34502		A	090	Y	N	Y	N	N	\$ 1,080.89	\$ 1,080.89
34510		A	090	Y	Y	Y	D	N	\$ 721.07	\$ 721.07
34520		A	090	Y	Y	Y	D	N	\$ 696.97	\$ 696.97
34530		A	090	Y	Y	Y	D	N	\$ 662.03	\$ 662.03
34701		A	090	Y	N	Y	Y	N	\$ 873.38	\$ 873.38
34702		A	090	Y	N	Y	Y	N	\$ 1,306.70	\$ 1,306.70
34703		A	090	Y	N	Y	Y	N	\$ 968.82	\$ 968.82
34704		A	090	Y	N	Y	Y	N	\$ 1,622.41	\$ 1,622.41
34705		A	090	Y	N	Y	Y	N	\$ 1,077.75	\$ 1,077.75
34706		A	090	Y	N	Y	Y	N	\$ 1,624.82	\$ 1,624.82
34707		A	090	Y	Y	Y	Y	N	\$ 820.61	\$ 820.61
34708		A	090	Y	Y	Y	Y	N	\$ 1,309.59	\$ 1,309.59
34709		A	ZZZ	N	N	Y	Y	N	\$ 229.19	\$ 229.19
34710		A	090	Y	N	Y	Y	N	\$ 559.84	\$ 559.84
34711		A	ZZZ	N	N	Y	Y	N	\$ 211.60	\$ 211.60
34712		A	090	Y	N	Y	Y	N	\$ 460.07	\$ 460.07
34713		A	ZZZ	N	Y	Y	Y	N	\$ 88.21	\$ 88.21
34714		A	ZZZ	N	Y	Y	Y	N	\$ 190.39	\$ 190.39

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
34715		A	ZZZ	N	Y	Y	Y	N	\$ 213.04	\$ 213.04
34716		A	ZZZ	N	Y	Y	Y	N	\$ 261.73	\$ 261.73
34717		A	ZZZ	N	N	Y	Y	N	\$ 312.82	\$ 312.82
34718		A	090	Y	N	Y	Y	N	\$ 866.64	\$ 866.64
34808		A	ZZZ	N	N	Y	Y	N	\$ 141.95	\$ 141.95
34812		A	ZZZ	N	Y	Y	Y	N	\$ 146.29	\$ 146.29
34813		A	ZZZ	N	N	Y	Y	N	\$ 168.46	\$ 168.46
34820		A	ZZZ	N	Y	Y	Y	N	\$ 246.78	\$ 246.78
34830		A	090	Y	N	Y	Y	N	\$ 1,249.34	\$ 1,249.34
34831		A	090	Y	N	Y	Y	N	\$ 1,361.41	\$ 1,361.41
34832		A	090	Y	N	Y	Y	N	\$ 1,343.09	\$ 1,343.09
34833		A	ZZZ	N	Y	Y	Y	N	\$ 280.04	\$ 280.04
34834		A	ZZZ	N	Y	Y	Y	N	\$ 92.30	\$ 92.30
34839		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
34841		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34842		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34843		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34844		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34845		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34846		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34847		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
34848		C	YYY	Y	N	Y	Y	N	\$ -	\$ -
35001		A	090	Y	Y	Y	D	N	\$ 791.69	\$ 791.69
35002		A	090	Y	Y	Y	D	N	\$ 803.98	\$ 803.98
35005		A	090	Y	Y	Y	D	N	\$ 702.52	\$ 702.52
35011		A	090	Y	Y	Y	D	N	\$ 707.09	\$ 707.09
35013		A	090	Y	Y	Y	D	N	\$ 885.43	\$ 885.43
35021		A	090	Y	Y	Y	D	N	\$ 877.96	\$ 877.96
35022		A	090	Y	Y	Y	D	N	\$ 1,007.38	\$ 1,007.38
35045		A	090	Y	Y	Y	D	N	\$ 683.48	\$ 683.48
35081		A	090	Y	N	Y	D	N	\$ 1,221.63	\$ 1,221.63
35082		A	090	Y	N	Y	D	N	\$ 1,535.41	\$ 1,535.41
35091		A	090	Y	Y	Y	D	N	\$ 1,269.11	\$ 1,269.11
35092		A	090	Y	Y	Y	D	N	\$ 1,833.05	\$ 1,833.05
35102		A	090	Y	Y	Y	D	N	\$ 1,327.43	\$ 1,327.43
35103		A	090	Y	Y	Y	D	N	\$ 1,576.62	\$ 1,576.62
35111		A	090	Y	Y	Y	D	N	\$ 940.14	\$ 940.14
35112		A	090	Y	Y	Y	D	N	\$ 1,157.52	\$ 1,157.52
35121		A	090	Y	Y	Y	N	N	\$ 1,119.69	\$ 1,119.69
35122		A	090	Y	Y	Y	D	N	\$ 1,339.72	\$ 1,339.72
35131		A	090	Y	Y	Y	D	N	\$ 970.75	\$ 970.75
35132		A	090	Y	Y	Y	D	N	\$ 1,157.52	\$ 1,157.52

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
35141		A	090	Y	Y	Y	D	N	\$ 773.85	\$ 773.85
35142		A	090	Y	Y	Y	D	N	\$ 933.15	\$ 933.15
35151		A	090	Y	Y	Y	D	N	\$ 870.01	\$ 870.01
35152		A	090	Y	Y	Y	D	N	\$ 988.58	\$ 988.58
35180		A	090	Y	N	Y	D	N	\$ 613.83	\$ 613.83
35182		A	090	Y	N	Y	D	N	\$ 1,251.03	\$ 1,251.03
35184		A	090	Y	N	Y	D	N	\$ 681.31	\$ 681.31
35188		A	090	Y	N	Y	D	N	\$ 897.97	\$ 897.97
35189		A	090	Y	N	Y	D	N	\$ 1,069.08	\$ 1,069.08
35190		A	090	Y	N	Y	D	N	\$ 533.09	\$ 533.09
35201		A	090	Y	Y	Y	D	N	\$ 659.38	\$ 659.38
35206		A	090	Y	Y	Y	D	N	\$ 545.62	\$ 545.62
35207		A	090	Y	Y	N	D	N	\$ 511.16	\$ 511.16
35211		A	090	Y	Y	Y	D	N	\$ 973.88	\$ 973.88
35216		A	090	Y	Y	Y	D	N	\$ 1,452.75	\$ 1,452.75
35221		A	090	Y	Y	Y	D	N	\$ 1,031.00	\$ 1,031.00
35226		A	090	Y	Y	Y	D	N	\$ 583.46	\$ 583.46
35231		A	090	Y	Y	Y	D	N	\$ 862.78	\$ 862.78
35236		A	090	Y	Y	Y	D	N	\$ 702.03	\$ 702.03
35241		A	090	Y	Y	Y	D	N	\$ 1,002.80	\$ 1,002.80
35246		A	090	Y	Y	Y	D	N	\$ 1,094.62	\$ 1,094.62
35251		A	090	Y	Y	Y	D	N	\$ 1,216.33	\$ 1,216.33
35256		A	090	Y	Y	Y	D	N	\$ 721.55	\$ 721.55
35261		A	090	Y	Y	Y	D	N	\$ 690.71	\$ 690.71
35266		A	090	Y	Y	Y	D	N	\$ 607.56	\$ 607.56
35271		A	090	Y	Y	Y	D	N	\$ 967.37	\$ 967.37
35276		A	090	Y	Y	Y	D	N	\$ 1,017.50	\$ 1,017.50
35281		A	090	Y	Y	Y	D	N	\$ 1,136.56	\$ 1,136.56
35286		A	090	Y	Y	Y	D	N	\$ 655.52	\$ 655.52
35301		A	090	Y	Y	Y	D	N	\$ 796.51	\$ 796.51
35302		A	090	Y	Y	Y	D	N	\$ 790.00	\$ 790.00
35303		A	090	Y	Y	Y	D	N	\$ 871.46	\$ 871.46
35304		A	090	Y	Y	Y	D	N	\$ 898.45	\$ 898.45
35305		A	090	Y	Y	Y	D	N	\$ 868.08	\$ 868.08
35306		A	ZZZ	N	N	Y	D	N	\$ 317.16	\$ 317.16
35311		A	090	Y	Y	Y	D	N	\$ 1,091.73	\$ 1,091.73
35321		A	090	Y	Y	Y	D	N	\$ 628.05	\$ 628.05
35331		A	090	Y	Y	Y	D	N	\$ 1,022.56	\$ 1,022.56
35341		A	090	Y	Y	Y	D	N	\$ 965.45	\$ 965.45
35351		A	090	Y	Y	Y	D	N	\$ 906.16	\$ 906.16
35355		A	090	Y	Y	Y	D	N	\$ 727.82	\$ 727.82
35361		A	090	Y	Y	Y	D	N	\$ 1,077.27	\$ 1,077.27

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
35363		A	090	Y	Y	Y	D	N	\$ 1,150.05	\$ 1,150.05
35371		A	090	Y	Y	Y	D	N	\$ 574.54	\$ 574.54
35372		A	090	Y	Y	Y	D	N	\$ 687.57	\$ 687.57
35390		A	ZZZ	N	N	Y	D	N	\$ 112.55	\$ 112.55
35400		A	ZZZ	N	N	D	D	N	\$ 105.08	\$ 105.08
35500		A	ZZZ	N	N	Y	D	N	\$ 226.06	\$ 226.06
35501		A	090	Y	Y	Y	D	N	\$ 1,033.65	\$ 1,033.65
35506		A	090	Y	Y	Y	D	N	\$ 901.34	\$ 901.34
35508		A	090	Y	Y	Y	D	N	\$ 937.97	\$ 937.97
35509		A	090	Y	Y	Y	D	N	\$ 1,000.15	\$ 1,000.15
35510		A	090	Y	Y	Y	D	N	\$ 870.25	\$ 870.25
35511		A	090	Y	Y	Y	D	N	\$ 793.37	\$ 793.37
35512		A	090	Y	Y	Y	D	N	\$ 852.90	\$ 852.90
35515		A	090	Y	Y	Y	D	N	\$ 937.97	\$ 937.97
35516		A	090	Y	Y	Y	D	N	\$ 863.50	\$ 863.50
35518		A	090	Y	Y	Y	D	N	\$ 808.56	\$ 808.56
35521		A	090	Y	Y	Y	D	N	\$ 867.36	\$ 867.36
35522		A	090	Y	Y	Y	D	N	\$ 860.37	\$ 860.37
35523		Not Covered	090	Y	Y	Y	D	N	\$ 897.97	\$ 897.97
35525		A	090	Y	Y	Y	D	N	\$ 800.12	\$ 800.12
35526		A	090	Y	Y	Y	D	N	\$ 1,211.99	\$ 1,211.99
35531		A	090	Y	Y	Y	D	N	\$ 1,381.89	\$ 1,381.89
35533		A	090	Y	Y	Y	D	N	\$ 1,066.67	\$ 1,066.67
35535		A	090	Y	Y	Y	D	N	\$ 1,349.12	\$ 1,349.12
35536		A	090	Y	Y	Y	D	N	\$ 1,197.29	\$ 1,197.29
35537		A	090	Y	N	Y	D	N	\$ 1,478.78	\$ 1,478.78
35538		A	090	Y	N	Y	D	N	\$ 1,656.88	\$ 1,656.88
35539		A	090	Y	Y	Y	D	N	\$ 1,554.21	\$ 1,554.21
35540		A	090	Y	Y	N	D	N	\$ 1,733.75	\$ 1,733.75
35556		A	090	Y	Y	Y	D	N	\$ 986.90	\$ 986.90
35558		A	090	Y	Y	Y	D	N	\$ 863.02	\$ 863.02
35560		A	090	Y	Y	Y	D	N	\$ 1,207.89	\$ 1,207.89
35563		A	090	Y	Y	Y	D	N	\$ 936.29	\$ 936.29
35565		A	090	Y	Y	Y	D	N	\$ 925.20	\$ 925.20
35566		A	090	Y	Y	Y	D	N	\$ 1,178.49	\$ 1,178.49
35570		A	090	Y	Y	Y	D	N	\$ 1,042.57	\$ 1,042.57
35571		A	090	Y	Y	Y	D	N	\$ 935.56	\$ 935.56
35572		A	ZZZ	N	N	Y	N	N	\$ 244.62	\$ 244.62
35583		A	090	Y	Y	Y	D	N	\$ 1,017.74	\$ 1,017.74
35585		A	090	Y	Y	Y	D	N	\$ 1,181.86	\$ 1,181.86
35587		A	090	Y	Y	Y	D	N	\$ 958.22	\$ 958.22
35600		A	ZZZ	N	N	Y	D	N	\$ 180.75	\$ 180.75

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
35601		A	090	Y	Y	Y	D	N	\$ 986.41	\$ 986.41
35606		A	090	Y	Y	Y	D	N	\$ 825.67	\$ 825.67
35612		A	090	Y	Y	Y	D	N	\$ 737.22	\$ 737.22
35616		A	090	Y	Y	Y	D	N	\$ 779.15	\$ 779.15
35621		A	090	Y	Y	Y	D	N	\$ 773.13	\$ 773.13
35623		A	090	Y	Y	Y	D	N	\$ 929.54	\$ 929.54
35626		A	090	Y	Y	Y	D	N	\$ 1,117.76	\$ 1,117.76
35631		A	090	Y	Y	Y	D	N	\$ 1,308.87	\$ 1,308.87
35632		A	090	Y	Y	Y	D	N	\$ 1,280.43	\$ 1,280.43
35633		A	090	Y	Y	Y	D	N	\$ 1,401.42	\$ 1,401.42
35634		A	090	Y	Y	Y	D	N	\$ 1,252.72	\$ 1,252.72
35636		A	090	Y	Y	Y	D	N	\$ 1,129.09	\$ 1,129.09
35637		A	090	Y	N	Y	D	N	\$ 1,174.63	\$ 1,174.63
35638		A	090	Y	N	Y	D	N	\$ 1,228.38	\$ 1,228.38
35642		A	090	Y	Y	Y	D	N	\$ 694.80	\$ 694.80
35645		A	090	Y	Y	Y	D	N	\$ 669.26	\$ 669.26
35646		A	090	Y	N	Y	D	N	\$ 1,208.13	\$ 1,208.13
35647		A	090	Y	Y	Y	D	N	\$ 1,093.66	\$ 1,093.66
35650		A	090	Y	Y	Y	D	N	\$ 722.76	\$ 722.76
35654		A	090	Y	N	Y	D	N	\$ 964.24	\$ 964.24
35656		A	090	Y	Y	Y	D	N	\$ 759.63	\$ 759.63
35661		A	090	Y	Y	Y	D	N	\$ 762.28	\$ 762.28
35663		A	090	Y	Y	Y	D	N	\$ 860.61	\$ 860.61
35665		A	090	Y	Y	Y	D	N	\$ 826.15	\$ 826.15
35666		A	090	Y	Y	Y	D	N	\$ 902.06	\$ 902.06
35671		A	090	Y	Y	Y	D	N	\$ 793.37	\$ 793.37
35681		A	ZZZ	N	N	Y	D	N	\$ 57.12	\$ 57.12
35682		A	ZZZ	N	N	D	D	N	\$ 251.36	\$ 251.36
35683		A	ZZZ	N	N	D	D	N	\$ 291.61	\$ 291.61
35685		A	ZZZ	N	N	Y	D	N	\$ 141.23	\$ 141.23
35686		A	ZZZ	N	N	Y	D	N	\$ 114.23	\$ 114.23
35691		A	090	Y	Y	Y	D	N	\$ 667.81	\$ 667.81
35693		A	090	Y	Y	Y	D	N	\$ 586.35	\$ 586.35
35694		A	090	Y	Y	Y	D	N	\$ 697.45	\$ 697.45
35695		A	090	Y	Y	Y	D	N	\$ 724.45	\$ 724.45
35697		A	ZZZ	N	N	Y	Y	N	\$ 105.56	\$ 105.56
35700		A	ZZZ	N	N	Y	D	N	\$ 108.21	\$ 108.21
35701		A	090	Y	Y	Y	D	N	\$ 301.25	\$ 301.25
35702		A	090	Y	Y	Y	D	N	\$ 286.31	\$ 286.31
35703		A	090	Y	Y	Y	D	N	\$ 292.82	\$ 292.82
35800		A	090	Y	N	Y	D	N	\$ 497.67	\$ 497.67
35820		A	090	Y	N	Y	D	N	\$ 1,408.89	\$ 1,408.89

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
35840		A	090	Y	N	Y	D	N	\$ 840.37	\$ 840.37
35860		A	090	Y	N	Y	D	N	\$ 586.11	\$ 586.11
35870		A	090	Y	N	Y	D	N	\$ 881.58	\$ 881.58
35875		A	090	Y	N	N	D	N	\$ 416.45	\$ 416.45
35876		A	090	Y	N	Y	D	N	\$ 665.16	\$ 665.16
35879		A	090	Y	Y	Y	D	N	\$ 649.25	\$ 649.25
35881		A	090	Y	Y	Y	D	N	\$ 719.63	\$ 719.63
35883		A	090	Y	Y	Y	D	N	\$ 848.80	\$ 848.80
35884		A	090	Y	Y	Y	D	N	\$ 877.72	\$ 877.72
35901		A	090	Y	N	Y	D	N	\$ 330.17	\$ 330.17
35903		A	090	Y	N	Y	D	N	\$ 393.55	\$ 393.55
35905		A	090	Y	N	Y	D	N	\$ 1,249.83	\$ 1,249.83
35907		A	090	Y	N	Y	D	N	\$ 1,345.99	\$ 1,345.99
36000		B	XXX	N	N	N	N	N	\$ 6.03	\$ 18.32
36002		A	000	Y	Y	N	N	N	\$ 71.58	\$ 101.22
36005		A	000	Y	Y	D	N	N	\$ 33.50	\$ 181.96
36010		A	XXX	Y	Y	N	N	N	\$ 76.64	\$ 355.72
36011		A	XXX	Y	Y	N	N	N	\$ 109.90	\$ 555.51
36012		A	XXX	Y	Y	N	N	N	\$ 120.74	\$ 566.11
36013		A	XXX	Y	N	N	N	N	\$ 85.07	\$ 521.77
36014		A	XXX	Y	Y	N	N	N	\$ 105.32	\$ 537.19
36015		A	XXX	Y	Y	N	N	N	\$ 117.85	\$ 578.64
36100		A	XXX	Y	Y	N	N	N	\$ 110.62	\$ 382.71
36140		A	XXX	Y	N	N	N	N	\$ 62.90	\$ 328.72
36160		A	XXX	Y	N	N	N	N	\$ 85.07	\$ 366.32
36200		A	000	Y	Y	N	N	N	\$ 98.09	\$ 395.48
36215		A	000	Y	N	N	N	N	\$ 146.05	\$ 696.01
36216		A	000	Y	N	N	N	N	\$ 188.70	\$ 732.88
36217		A	000	Y	N	N	N	N	\$ 228.71	\$ 1,204.52
36218		A	ZZZ	N	N	N	N	N	\$ 34.95	\$ 139.30
36221		A	000	Y	B	N	N	N	\$ 141.23	\$ 678.17
36222		A	000	Y	Y	N	N	N	\$ 198.83	\$ 814.82
36223		A	000	Y	Y	N	N	N	\$ 224.37	\$ 1,063.53
36224		A	000	Y	Y	N	N	N	\$ 252.81	\$ 1,347.67
36225		A	000	Y	Y	N	N	N	\$ 223.41	\$ 1,010.03
36226		A	000	Y	Y	N	N	N	\$ 250.16	\$ 1,289.35
36227		A	ZZZ	N	Y	N	N	N	\$ 82.42	\$ 161.71
36228		A	ZZZ	N	Y	N	N	N	\$ 170.15	\$ 845.91
36245		A	XXX	Y	Y	N	N	N	\$ 163.64	\$ 851.94
36246		A	000	Y	Y	N	N	N	\$ 177.62	\$ 565.63
36247		A	000	Y	Y	N	N	N	\$ 209.43	\$ 970.99
36248		A	ZZZ	N	N	N	N	N	\$ 33.98	\$ 84.35

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
36251		A	000	Y	N	N	N	N	\$ 179.06	\$ 885.19
36252		A	000	Y	B	N	N	N	\$ 251.12	\$ 963.28
36253		A	000	Y	N	N	N	N	\$ 243.65	\$ 1,380.93
36254		A	000	Y	B	N	N	N	\$ 287.27	\$ 1,365.02
36260		A	090	Y	N	N	N	N	\$ 454.04	\$ 454.04
36261		A	090	Y	N	Y	N	N	\$ 281.49	\$ 281.49
36262		A	090	Y	N	N	N	N	\$ 213.53	\$ 213.53
36299		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
36400		A	XXX	Y	N	N	N	N	\$ 13.26	\$ 18.32
36405		A	XXX	Y	N	N	N	N	\$ 10.12	\$ 15.18
36406		A	XXX	Y	N	N	N	N	\$ 5.78	\$ 11.09
36410		A	XXX	Y	N	N	N	N	\$ 6.27	\$ 11.33
36415		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
36416		B	XXX	N	N	N	N	N	\$ -	\$ -
36420		A	XXX	Y	N	D	N	N	\$ 33.98	\$ 33.98
36425		A	XXX	Y	N	N	N	N	\$ 27.72	\$ 27.72
36430		A	XXX	N	N	N	N	N	\$ 22.41	\$ 22.41
36440		A	XXX	Y	N	D	N	N	\$ 34.22	\$ 34.22
36450		A	XXX	Y	N	D	N	N	\$ 116.40	\$ 116.40
36455		A	XXX	Y	N	N	N	N	\$ 89.17	\$ 89.17
36456		Not Covered	XXX	Y	N	D	N	N	\$ 66.76	\$ 66.76
36460		A	XXX	Y	N	Y	N	N	\$ 240.04	\$ 240.04
36465		A	000	Y	Y	N	N	N	\$ 83.39	\$ 927.61
36466		A	000	Y	Y	N	N	N	\$ 107.25	\$ 1,036.06
36468		C	000	Y	N	D	N	N	\$ -	\$ -
36470		Not Covered	000	Y	Y	N	N	N	\$ 26.99	\$ 73.51
36471		Not Covered	000	Y	Y	N	N	N	\$ 52.78	\$ 129.66
36473		Not Covered	000	Y	Y	N	N	N	\$ 125.56	\$ 871.94
36474		Not Covered	ZZZ	N	Y	N	N	N	\$ 62.90	\$ 183.88
36475		A	000	Y	Y	N	N	N	\$ 195.21	\$ 808.07
36476		A	ZZZ	N	Y	N	N	N	\$ 94.47	\$ 198.83
36478		A	000	Y	Y	N	N	N	\$ 193.52	\$ 682.75
36479		A	ZZZ	N	Y	N	N	N	\$ 94.95	\$ 208.22
36481		A	000	Y	N	N	N	N	\$ 224.37	\$ 1,195.60
36482		Not Covered	000	Y	Y	N	N	N	\$ 126.04	\$ 1,168.13
36483		Not Covered	ZZZ	N	Y	N	N	N	\$ 62.42	\$ 96.88
36500		A	000	Y	N	N	N	N	\$ 126.77	\$ 126.77
36510		A	000	Y	N	D	N	N	\$ 35.91	\$ 54.95
36511		A	000	Y	N	N	N	N	\$ 74.23	\$ 74.23
36512		A	000	Y	N	N	N	N	\$ 72.78	\$ 72.78
36513		A	000	Y	N	N	N	N	\$ 73.99	\$ 73.99
36514		A	000	Y	N	N	N	N	\$ 64.35	\$ 399.58

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
36516		A	000	Y	N	N	N	N	\$ 58.56	\$ 1,217.29
36522		A	000	Y	N	N	N	N	\$ 66.03	\$ 1,054.62
36555		A	000	N	N	N	N	N	\$ 58.56	\$ 127.25
36556		A	000	N	N	N	N	N	\$ 58.56	\$ 143.40
36557		A	010	Y	Y	D	N	N	\$ 221.72	\$ 764.69
36558		A	010	Y	Y	D	N	N	\$ 177.14	\$ 548.76
36560		A	010	Y	Y	D	N	N	\$ 265.82	\$ 860.13
36561		A	010	Y	Y	D	N	N	\$ 229.43	\$ 686.85
36563		A	010	Y	N	D	N	N	\$ 253.29	\$ 779.15
36565		A	010	Y	Y	D	N	N	\$ 233.29	\$ 572.62
36566		A	010	Y	Y	D	N	N	\$ 248.71	\$ 2,882.60
36568		A	000	N	N	N	N	N	\$ 63.87	\$ 63.87
36569		A	000	N	N	N	N	N	\$ 64.35	\$ 64.35
36570		A	010	Y	Y	D	N	N	\$ 229.91	\$ 990.27
36571		A	010	Y	Y	D	N	N	\$ 215.70	\$ 864.71
36572		A	000	N	N	N	N	N	\$ 62.18	\$ 283.42
36573		A	000	N	N	N	N	N	\$ 58.08	\$ 258.83
36575		A	000	Y	N	D	N	N	\$ 23.86	\$ 102.43
36576		A	010	Y	N	D	N	N	\$ 126.28	\$ 232.57
36578		A	010	Y	N	D	N	N	\$ 138.58	\$ 302.46
36580		A	000	N	N	N	N	N	\$ 45.31	\$ 134.96
36581		A	010	Y	N	D	N	N	\$ 124.84	\$ 525.38
36582		A	010	Y	N	D	N	N	\$ 197.86	\$ 624.19
36583		A	010	Y	N	D	N	N	\$ 227.99	\$ 813.13
36584		A	000	N	N	N	N	N	\$ 41.21	\$ 223.17
36585		A	010	Y	N	D	N	N	\$ 186.78	\$ 735.05
36589		A	010	Y	N	D	N	N	\$ 93.99	\$ 112.79
36590		A	010	Y	N	D	N	N	\$ 129.66	\$ 153.04
36591		Not Covered	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
36592		Not Covered	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
36593		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
36595		A	000	Y	N	N	N	N	\$ 125.08	\$ 405.84
36596		A	000	Y	N	N	N	N	\$ 29.64	\$ 76.16
36597		A	000	Y	N	N	N	N	\$ 41.69	\$ 80.49
36598		A	000	Y	Y	D	N	N	\$ 24.58	\$ 78.57
36600		A	XXX	Y	N	N	N	N	\$ 11.09	\$ 19.52
36620		A	000	N	N	N	N	N	\$ 30.85	\$ 30.85
36625		A	000	N	N	N	N	N	\$ 73.75	\$ 73.75
36640		A	000	Y	N	N	N	N	\$ 78.57	\$ 78.57
36660		A	000	Y	N	D	N	N	\$ 46.75	\$ 46.75
36680		A	000	Y	N	D	N	N	\$ 41.69	\$ 41.69
36800		A	000	Y	N	N	N	N	\$ 84.59	\$ 84.59

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
36810		A	000	Y	N	N	N	N	\$ 146.53	\$ 146.53
36815		A	000	Y	N	N	N	N	\$ 95.44	\$ 95.44
36818		A	090	Y	N	Y	D	N	\$ 483.21	\$ 483.21
36819		A	090	Y	N	Y	D	N	\$ 512.85	\$ 512.85
36820		A	090	Y	Y	Y	D	N	\$ 505.14	\$ 505.14
36821		A	090	Y	N	Y	D	N	\$ 464.17	\$ 464.17
36823		A	090	Y	N	N	N	N	\$ 980.87	\$ 980.87
36825		A	090	Y	N	Y	D	N	\$ 557.19	\$ 557.19
36830		A	090	Y	N	Y	D	N	\$ 467.06	\$ 467.06
36831		A	090	Y	N	Y	D	N	\$ 430.43	\$ 430.43
36832		A	090	Y	N	Y	D	N	\$ 529.00	\$ 529.00
36833		A	090	Y	N	Y	D	N	\$ 566.83	\$ 566.83
36835		A	090	Y	N	N	N	N	\$ 333.54	\$ 333.54
36838		A	090	Y	Y	Y	D	N	\$ 804.70	\$ 804.70
36860		A	000	Y	N	N	N	N	\$ 77.84	\$ 159.78
36861		A	000	Y	N	N	N	N	\$ 98.33	\$ 98.33
36901		A	000	Y	N	N	N	N	\$ 116.64	\$ 463.93
36902		A	000	Y	N	N	N	N	\$ 165.81	\$ 827.59
36903		A	000	Y	N	N	N	N	\$ 219.31	\$ 3,082.87
36904		A	000	Y	N	N	D	N	\$ 254.98	\$ 1,217.77
36905		A	000	Y	N	N	D	N	\$ 306.79	\$ 1,553.49
36906		A	000	Y	N	N	D	N	\$ 354.27	\$ 3,872.87
36907		A	ZZZ	N	N	N	N	N	\$ 101.94	\$ 422.71
36908		A	ZZZ	N	N	N	N	N	\$ 144.36	\$ 1,144.51
36909		A	ZZZ	N	N	N	N	N	\$ 140.26	\$ 1,296.34
37140		A	090	Y	N	N	D	N	\$ 1,634.46	\$ 1,634.46
37145		A	090	Y	N	Y	N	N	\$ 1,515.41	\$ 1,515.41
37160		A	090	Y	N	Y	D	N	\$ 1,556.14	\$ 1,556.14
37180		A	090	Y	N	Y	D	N	\$ 1,495.89	\$ 1,495.89
37181		A	090	Y	N	Y	D	N	\$ 1,634.46	\$ 1,634.46
37182		A	000	Y	N	D	N	N	\$ 557.67	\$ 557.67
37183		A	000	Y	N	D	N	N	\$ 255.22	\$ 3,938.66
37184		A	000	Y	Y	N	Y	N	\$ 301.25	\$ 1,214.40
37185		A	ZZZ	N	B	N	Y	N	\$ 114.48	\$ 352.10
37186		A	ZZZ	N	B	N	Y	N	\$ 171.35	\$ 835.79
37187		A	000	Y	Y	N	Y	N	\$ 271.61	\$ 1,206.21
37188		A	000	N	Y	N	Y	N	\$ 192.32	\$ 1,028.83
37191		A	000	Y	N	N	N	N	\$ 153.52	\$ 1,447.93
37192		A	000	Y	N	N	N	N	\$ 245.58	\$ 874.11
37193		A	000	Y	N	N	N	N	\$ 240.28	\$ 1,016.78
37195		C	XXX	N	N	D	N	N	\$ -	\$ -
37197		A	000	Y	N	N	N	N	\$ 208.47	\$ 1,042.08

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
37200		A	000	Y	N	N	N	N	\$ 148.22	\$ 148.22
37211		A	000	Y	Y	N	N	N	\$ 269.44	\$ 269.44
37212		A	000	Y	Y	N	N	N	\$ 234.98	\$ 234.98
37213		A	000	Y	N	N	N	N	\$ 161.71	\$ 161.71
37214		A	000	Y	N	N	N	N	\$ 85.56	\$ 85.56
37215		A	090	Y	Y	D	N	N	\$ 696.49	\$ 696.49
37216		A	090	N	N	N	N	N	\$ 662.51	\$ 662.51
37217		A	090	Y	Y	D	N	N	\$ 756.98	\$ 756.98
37218		A	090	Y	Y	D	N	N	\$ 571.65	\$ 571.65
37220		A	000	Y	Y	N	N	N	\$ 281.97	\$ 1,774.72
37221		A	000	Y	Y	D	N	N	\$ 348.00	\$ 2,298.42
37222		A	ZZZ	N	Y	D	N	N	\$ 130.62	\$ 447.06
37223		A	ZZZ	N	Y	D	N	N	\$ 150.38	\$ 1,040.40
37224		A	000	Y	Y	D	N	N	\$ 313.06	\$ 2,095.25
37225		A	000	Y	Y	D	N	N	\$ 423.20	\$ 6,554.24
37226		A	000	Y	Y	D	N	N	\$ 366.56	\$ 5,961.38
37227		A	000	Y	Y	D	N	N	\$ 507.55	\$ 8,396.44
37228		A	000	Y	Y	D	N	N	\$ 381.26	\$ 2,990.57
37229		A	000	Y	Y	D	N	N	\$ 489.95	\$ 6,601.71
37230		A	000	Y	Y	D	N	N	\$ 489.47	\$ 6,284.08
37231		A	000	Y	Y	D	N	N	\$ 525.38	\$ 8,424.64
37232		A	ZZZ	N	Y	D	N	N	\$ 140.26	\$ 606.36
37233		A	ZZZ	N	Y	D	N	N	\$ 228.95	\$ 756.50
37234		A	ZZZ	N	Y	D	N	N	\$ 200.03	\$ 2,476.76
37235		A	ZZZ	N	Y	D	N	N	\$ 275.22	\$ 2,640.16
37236		A	000	Y	Y	D	N	N	\$ 311.13	\$ 2,010.90
37237		A	ZZZ	N	Y	D	N	N	\$ 148.70	\$ 1,024.25
37238		A	000	Y	Y	D	N	N	\$ 214.97	\$ 2,387.11
37239		A	ZZZ	N	Y	D	N	N	\$ 106.52	\$ 1,194.64
37241		A	000	Y	N	N	N	N	\$ 300.29	\$ 3,098.06
37242		A	000	Y	N	N	N	N	\$ 330.17	\$ 4,827.23
37243		A	000	Y	N	N	N	N	\$ 382.47	\$ 5,935.35
37244		A	000	Y	N	N	N	N	\$ 453.32	\$ 4,469.10
37246		A	000	Y	Y	N	N	N	\$ 242.21	\$ 1,265.25
37247		A	ZZZ	N	Y	N	N	N	\$ 119.78	\$ 401.02
37248		A	000	Y	Y	N	N	N	\$ 205.33	\$ 939.66
37249		Not Covered	ZZZ	N	Y	N	N	N	\$ 101.22	\$ 319.81
37252		A	ZZZ	N	N	D	D	N	\$ 63.14	\$ 691.43
37253		A	ZZZ	N	N	D	D	N	\$ 49.89	\$ 117.85
37500		A	090	Y	Y	N	D	N	\$ 443.20	\$ 443.20
37501		Unlstd/Manual	YYY	Y	Y	N	D	D	\$ -	\$ -
37565		A	090	Y	Y	D	D	N	\$ 503.93	\$ 503.93

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
37600		A	090	Y	N	Y	D	N	\$ 506.82	\$ 506.82
37605		A	090	Y	N	Y	D	N	\$ 520.56	\$ 520.56
37606		A	090	Y	N	Y	N	N	\$ 499.83	\$ 499.83
37607		A	090	Y	N	N	D	N	\$ 259.80	\$ 259.80
37609		A	010	Y	Y	N	N	N	\$ 139.78	\$ 210.39
37615		A	090	Y	N	Y	D	N	\$ 367.53	\$ 367.53
37616		A	090	Y	N	Y	D	N	\$ 767.34	\$ 767.34
37617		A	090	Y	N	Y	D	N	\$ 929.06	\$ 929.06
37618		A	090	Y	N	Y	D	N	\$ 269.20	\$ 269.20
37619		A	090	Y	N	Y	N	N	\$ 1,217.29	\$ 1,217.29
37650		A	090	Y	Y	N	D	N	\$ 322.22	\$ 322.22
37660		A	090	Y	Y	Y	D	N	\$ 924.72	\$ 924.72
37700		A	090	Y	Y	N	N	N	\$ 168.94	\$ 168.94
37718		A	090	Y	Y	N	D	N	\$ 294.98	\$ 294.98
37722		A	090	Y	Y	N	D	N	\$ 328.00	\$ 328.00
37735		A	090	Y	Y	N	D	N	\$ 408.74	\$ 408.74
37760		A	090	Y	Y	N	D	N	\$ 436.45	\$ 436.45
37761		A	090	Y	Y	Y	D	N	\$ 372.83	\$ 372.83
37765		A	010	Y	Y	N	D	N	\$ 188.22	\$ 294.50
37766		A	010	Y	Y	N	D	N	\$ 230.88	\$ 344.63
37780		A	090	Y	Y	N	D	N	\$ 162.68	\$ 162.68
37785		A	090	Y	Y	N	N	N	\$ 176.65	\$ 241.00
37788		A	090	Y	N	Y	D	N	\$ 862.54	\$ 862.54
37790		A	090	Y	N	D	N	N	\$ 330.17	\$ 330.17
37799		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
38100		A	090	Y	N	Y	D	N	\$ 807.11	\$ 807.11
38101		A	090	Y	N	Y	D	N	\$ 818.20	\$ 818.20
38102		A	ZZZ	N	N	Y	D	N	\$ 183.40	\$ 183.40
38115		A	090	Y	N	Y	D	N	\$ 891.46	\$ 891.46
38120		A	090	Y	N	Y	D	N	\$ 736.50	\$ 736.50
38129		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
38200		A	000	Y	N	D	N	N	\$ 89.41	\$ 89.41
38204		B	XXX	N	N	N	N	N	\$ 68.69	\$ 68.69
38205		A	000	Y	N	D	N	N	\$ 57.12	\$ 57.12
38206		A	000	Y	N	D	N	N	\$ 57.12	\$ 57.12
38207		A	XXX	N	N	N	N	N	\$ 30.13	\$ 30.13
38208		A	XXX	N	N	N	N	N	\$ 19.52	\$ 19.52
38209		A	XXX	N	N	N	N	N	\$ 8.19	\$ 8.19
38210		A	XXX	N	N	N	N	N	\$ 54.23	\$ 54.23
38211		A	XXX	N	N	N	N	N	\$ 49.41	\$ 49.41
38212		A	XXX	N	N	N	N	N	\$ 32.78	\$ 32.78
38213		A	XXX	N	N	N	N	N	\$ 8.19	\$ 8.19

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
38214		A	XXX	N	N	N	N	N	\$ 27.72	\$ 27.72
38215		A	XXX	N	N	N	N	N	\$ 32.78	\$ 32.78
38220		A	XXX	Y	Y	D	N	N	\$ 47.48	\$ 107.49
38221		A	XXX	Y	Y	D	N	N	\$ 47.24	\$ 103.15
38222		A	XXX	Y	Y	D	N	N	\$ 52.06	\$ 113.27
38230		A	000	Y	N	D	N	N	\$ 141.71	\$ 141.71
38232		Not Covered	000	Y	N	D	N	N	\$ 137.61	\$ 137.61
38240		A	XXX	Y	N	D	N	N	\$ 159.54	\$ 159.54
38241		A	XXX	Y	N	D	N	N	\$ 118.57	\$ 118.57
38242		A	000	Y	N	D	N	N	\$ 85.07	\$ 85.07
38243		Not Covered	000	Y	N	D	N	N	\$ 82.66	\$ 82.66
38300		A	010	Y	N	N	N	N	\$ 140.26	\$ 225.09
38305		A	090	Y	N	N	N	N	\$ 336.92	\$ 336.92
38308		A	090	Y	N	Y	D	N	\$ 316.67	\$ 316.67
38380		A	090	Y	N	Y	D	N	\$ 384.88	\$ 384.88
38381		A	090	Y	N	Y	D	N	\$ 556.47	\$ 556.47
38382		A	090	Y	N	Y	D	N	\$ 471.88	\$ 471.88
38500		A	010	Y	Y	N	N	N	\$ 175.69	\$ 227.75
38505		A	000	Y	Y	N	N	N	\$ 46.51	\$ 79.29
38510		A	010	Y	Y	N	N	N	\$ 287.03	\$ 356.44
38520		A	090	Y	Y	N	N	N	\$ 319.57	\$ 319.57
38525		A	090	Y	Y	N	N	N	\$ 303.18	\$ 303.18
38530		A	090	Y	Y	Y	D	N	\$ 385.60	\$ 385.60
38531		A	090	Y	Y	D	N	N	\$ 306.07	\$ 306.07
38542		A	090	Y	Y	Y	D	N	\$ 351.14	\$ 351.14
38550		A	090	Y	N	D	N	N	\$ 356.44	\$ 356.44
38555		A	090	Y	N	Y	D	N	\$ 710.47	\$ 710.47
38562		A	090	Y	B	Y	D	N	\$ 482.72	\$ 482.72
38564		A	090	Y	N	Y	D	N	\$ 489.23	\$ 489.23
38570		A	010	Y	N	Y	Y	N	\$ 353.31	\$ 353.31
38571		A	010	Y	B	Y	Y	N	\$ 453.80	\$ 453.80
38572		A	010	Y	B	Y	Y	N	\$ 623.95	\$ 623.95
38573		A	010	Y	B	Y	Y	N	\$ 801.33	\$ 801.33
38589		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
38700		A	090	Y	Y	Y	D	N	\$ 542.73	\$ 542.73
38720		A	090	Y	Y	Y	D	N	\$ 911.22	\$ 911.22
38724		A	090	Y	Y	Y	D	N	\$ 982.32	\$ 982.32
38740		A	090	Y	Y	Y	D	N	\$ 484.65	\$ 484.65
38745		A	090	Y	Y	Y	D	N	\$ 612.14	\$ 612.14
38746		A	ZZZ	N	N	Y	D	N	\$ 151.83	\$ 151.83
38747		A	ZZZ	N	N	Y	D	N	\$ 188.22	\$ 188.22
38760		A	090	Y	Y	Y	D	N	\$ 580.09	\$ 580.09

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
38765		A	090	Y	Y	Y	D	N	\$ 903.75	\$ 903.75
38770		A	090	Y	Y	Y	D	N	\$ 550.93	\$ 550.93
38780		A	090	Y	N	Y	D	N	\$ 713.12	\$ 713.12
38790		A	000	Y	Y	N	N	N	\$ 55.43	\$ 55.43
38792		A	000	Y	Y	N	N	N	\$ 23.14	\$ 53.98
38794		A	090	Y	N	D	N	N	\$ 194.97	\$ 194.97
38900		A	ZZZ	N	Y	Y	D	N	\$ 97.12	\$ 97.12
38999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
39000		A	090	Y	N	Y	D	N	\$ 340.53	\$ 340.53
39010		A	090	Y	N	Y	D	N	\$ 546.59	\$ 546.59
39200		A	090	Y	N	Y	D	N	\$ 607.08	\$ 607.08
39220		A	090	Y	N	Y	D	N	\$ 786.14	\$ 786.14
39401		A	000	Y	N	N	N	N	\$ 214.73	\$ 214.73
39402		A	000	Y	N	N	N	N	\$ 281.73	\$ 281.73
39499		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
39501		A	090	Y	N	Y	D	N	\$ 594.79	\$ 594.79
39503		A	090	Y	N	Y	D	N	\$ 4,097.24	\$ 4,097.24
39540		A	090	Y	N	Y	D	N	\$ 602.98	\$ 602.98
39541		A	090	Y	N	Y	D	N	\$ 655.52	\$ 655.52
39545		A	090	Y	N	Y	D	N	\$ 620.58	\$ 620.58
39560		A	090	Y	N	Y	D	N	\$ 554.06	\$ 554.06
39561		A	090	Y	N	Y	D	N	\$ 862.54	\$ 862.54
39599		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
40490		A	000	Y	N	N	N	N	\$ 47.24	\$ 81.70
40500		A	090	Y	N	N	N	N	\$ 241.00	\$ 339.81
40510		A	090	Y	N	N	N	N	\$ 232.81	\$ 321.74
40520		A	090	Y	N	N	N	N	\$ 237.14	\$ 329.45
40525		A	090	Y	N	N	N	N	\$ 370.90	\$ 370.90
40527		A	090	Y	N	D	N	N	\$ 418.38	\$ 418.38
40530		A	090	Y	N	N	N	N	\$ 268.96	\$ 364.63
40650		A	090	Y	N	D	N	N	\$ 206.78	\$ 312.58
40652		A	090	Y	N	D	N	N	\$ 237.63	\$ 338.85
40654		A	090	Y	N	N	N	N	\$ 280.52	\$ 380.30
40700		A	090	Y	N	D	N	N	\$ 681.07	\$ 681.07
40701		A	090	Y	B	Y	N	N	\$ 807.35	\$ 807.35
40702		A	090	Y	B	Y	N	N	\$ 676.49	\$ 676.49
40720		A	090	Y	Y	D	N	N	\$ 694.56	\$ 694.56
40761		A	090	Y	N	N	N	N	\$ 732.64	\$ 732.64
40799		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
40800		A	010	Y	N	N	N	N	\$ 78.81	\$ 134.24
40801		A	010	Y	N	N	N	N	\$ 132.07	\$ 192.32
40804		A	010	Y	N	D	N	N	\$ 74.71	\$ 125.32

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
40805		A	010	Y	N	D	N	N	\$ 132.55	\$ 188.94
40806		A	000	Y	N	D	N	N	\$ 18.56	\$ 63.87
40808		A	010	Y	N	N	N	N	\$ 57.36	\$ 107.97
40810		A	010	Y	N	N	N	N	\$ 79.77	\$ 139.30
40812		A	010	Y	N	N	N	N	\$ 123.39	\$ 187.50
40814		A	090	Y	N	N	N	N	\$ 189.19	\$ 247.27
40816		A	090	Y	N	N	N	N	\$ 200.03	\$ 262.21
40818		A	090	Y	N	D	N	N	\$ 178.10	\$ 243.89
40819		A	090	Y	N	D	N	N	\$ 132.55	\$ 178.34
40820		A	010	Y	N	N	N	N	\$ 109.66	\$ 170.15
40830		A	010	Y	N	D	N	N	\$ 109.17	\$ 182.44
40831		A	010	Y	N	D	N	N	\$ 150.87	\$ 231.84
40840		A	090	Y	N	Y	N	N	\$ 420.79	\$ 561.53
40842		A	090	Y	N	D	N	N	\$ 455.49	\$ 612.86
40843		A	090	Y	B	Y	N	N	\$ 592.62	\$ 797.23
40844		A	090	Y	N	Y	N	N	\$ 797.23	\$ 1,001.11
40845		A	090	Y	N	D	N	N	\$ 818.68	\$ 990.51
40899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
41000		A	010	Y	N	N	N	N	\$ 71.34	\$ 102.67
41005		A	010	Y	N	D	N	N	\$ 72.54	\$ 140.26
41006		A	090	Y	N	D	N	N	\$ 152.07	\$ 220.52
41007		A	090	Y	N	D	N	N	\$ 146.53	\$ 215.94
41008		A	090	Y	N	D	N	N	\$ 170.87	\$ 256.42
41009		A	090	Y	N	D	N	N	\$ 186.53	\$ 274.02
41010		A	010	Y	N	D	N	N	\$ 71.10	\$ 140.02
41015		A	090	Y	N	D	N	N	\$ 200.03	\$ 263.17
41016		A	090	Y	N	D	N	N	\$ 229.91	\$ 307.03
41017		A	090	Y	N	D	N	N	\$ 227.75	\$ 304.62
41018		A	090	Y	N	D	N	N	\$ 264.38	\$ 341.74
41019		A	000	Y	N	D	D	D	\$ 326.31	\$ 326.31
41100		A	010	Y	N	N	N	N	\$ 70.85	\$ 120.26
41105		A	010	Y	N	N	N	N	\$ 72.78	\$ 120.74
41108		A	010	Y	N	N	N	N	\$ 60.01	\$ 107.25
41110		A	010	Y	N	N	N	N	\$ 85.56	\$ 148.22
41112		A	090	Y	N	N	N	N	\$ 159.54	\$ 220.27
41113		A	090	Y	N	N	N	N	\$ 176.17	\$ 239.07
41114		A	090	Y	N	D	N	N	\$ 410.18	\$ 410.18
41115		A	010	Y	N	D	N	N	\$ 96.40	\$ 170.15
41116		A	090	Y	N	N	N	N	\$ 141.23	\$ 218.59
41120		A	090	Y	N	Y	D	N	\$ 707.34	\$ 707.34
41130		A	090	Y	N	Y	D	N	\$ 877.96	\$ 877.96
41135		A	090	Y	N	Y	D	N	\$ 1,456.85	\$ 1,456.85

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
41140		A	090	Y	N	Y	D	N	\$ 1,464.56	\$ 1,464.56
41145		A	090	Y	N	Y	D	N	\$ 1,852.57	\$ 1,852.57
41150		A	090	Y	N	Y	D	N	\$ 1,473.72	\$ 1,473.72
41153		A	090	Y	N	Y	D	N	\$ 1,606.51	\$ 1,606.51
41155		A	090	Y	N	Y	D	N	\$ 2,024.16	\$ 2,024.16
41250		A	010	Y	N	D	N	N	\$ 103.39	\$ 185.81
41251		A	010	Y	N	D	N	N	\$ 122.19	\$ 205.33
41252		A	010	Y	N	D	N	N	\$ 140.99	\$ 216.18
41510		A	090	Y	N	D	N	N	\$ 295.95	\$ 295.95
41512		Not Covered	090	Y	N	D	N	N	\$ 441.99	\$ 441.99
41520		A	090	Y	N	D	N	N	\$ 163.88	\$ 237.39
41530		A	000	Y	N	D	N	N	\$ 251.36	\$ 619.85
41599		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
41800		A	010	Y	N	N	N	N	\$ 101.46	\$ 193.04
41805		A	010	Y	N	D	N	N	\$ 130.14	\$ 203.89
41806		A	010	Y	N	D	N	N	\$ 186.05	\$ 271.61
41820		C	000	Y	N	D	N	N	\$ -	\$ -
41821		C	000	Y	N	D	N	N	\$ -	\$ -
41822		A	010	Y	N	D	N	N	\$ 132.55	\$ 230.88
41823		A	090	Y	N	D	N	N	\$ 237.39	\$ 340.77
41825		A	010	Y	N	N	N	N	\$ 78.33	\$ 142.67
41826		A	010	Y	N	N	N	N	\$ 134.00	\$ 204.13
41827		A	090	Y	N	N	N	N	\$ 192.80	\$ 287.75
41828		A	010	Y	N	D	N	N	\$ 150.14	\$ 233.05
41830		A	010	Y	N	D	N	N	\$ 209.67	\$ 307.76
41850		C	000	Y	N	D	N	N	\$ -	\$ -
41870		C	000	Y	N	D	N	N	\$ -	\$ -
41872		A	090	Y	N	D	N	N	\$ 196.17	\$ 300.29
41874		A	090	Y	N	D	N	N	\$ 161.95	\$ 253.53
41899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
42000		A	010	Y	N	D	N	N	\$ 69.41	\$ 103.39
42100		A	010	Y	N	N	N	N	\$ 71.10	\$ 96.16
42104		A	010	Y	N	N	N	N	\$ 88.69	\$ 140.74
42106		A	010	Y	N	N	N	N	\$ 109.41	\$ 170.39
42107		A	090	Y	N	N	N	N	\$ 223.89	\$ 307.28
42120		A	090	Y	N	Y	D	N	\$ 671.43	\$ 671.43
42140		A	090	Y	N	N	N	N	\$ 103.15	\$ 194.25
42145		A	090	Y	N	N	N	N	\$ 463.20	\$ 463.20
42160		A	010	Y	N	D	N	N	\$ 95.44	\$ 153.04
42180		A	010	Y	N	D	N	N	\$ 123.15	\$ 167.50
42182		A	010	Y	N	D	N	N	\$ 172.32	\$ 218.59
42200		A	090	Y	N	Y	N	N	\$ 631.66	\$ 631.66

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
42205		A	090	Y	N	Y	N	N	\$ 659.86	\$ 659.86
42210		A	090	Y	N	Y	N	N	\$ 735.05	\$ 735.05
42215		A	090	Y	N	Y	N	N	\$ 476.94	\$ 476.94
42220		A	090	Y	N	Y	N	N	\$ 391.63	\$ 391.63
42225		A	090	Y	N	Y	N	N	\$ 655.76	\$ 655.76
42226		A	090	Y	N	Y	N	N	\$ 596.23	\$ 596.23
42227		A	090	Y	N	Y	N	N	\$ 557.19	\$ 557.19
42235		A	090	Y	N	Y	N	N	\$ 486.82	\$ 486.82
42260		A	090	Y	N	Y	N	N	\$ 448.02	\$ 564.42
42280		A	010	Y	N	D	N	N	\$ 73.02	\$ 116.89
42281		A	010	Y	N	D	N	N	\$ 106.28	\$ 148.70
42299		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
42300		A	010	Y	N	N	N	N	\$ 102.18	\$ 140.99
42305		A	090	Y	N	D	N	N	\$ 285.34	\$ 285.34
42310		A	010	Y	N	D	N	N	\$ 87.48	\$ 113.27
42320		A	010	Y	N	D	N	N	\$ 117.85	\$ 170.63
42330		A	010	Y	N	N	N	N	\$ 109.17	\$ 152.79
42335		A	090	Y	N	N	N	N	\$ 171.59	\$ 276.19
42340		A	090	Y	Y	D	N	N	\$ 226.54	\$ 340.53
42400		A	000	Y	N	N	N	N	\$ 35.19	\$ 65.79
42405		A	010	Y	N	N	N	N	\$ 151.35	\$ 199.31
42408		A	090	Y	N	D	N	N	\$ 230.64	\$ 353.79
42409		A	090	Y	N	Y	N	N	\$ 150.14	\$ 250.88
42410		A	090	Y	Y	Y	D	N	\$ 423.44	\$ 423.44
42415		A	090	Y	Y	Y	D	N	\$ 714.32	\$ 714.32
42420		A	090	Y	Y	Y	D	N	\$ 802.53	\$ 802.53
42425		A	090	Y	Y	Y	D	N	\$ 565.87	\$ 565.87
42426		A	090	Y	Y	Y	D	N	\$ 915.32	\$ 915.32
42440		A	090	Y	Y	Y	D	N	\$ 277.39	\$ 277.39
42450		A	090	Y	N	D	N	N	\$ 241.72	\$ 308.96
42500		A	090	Y	N	D	N	N	\$ 229.19	\$ 294.26
42505		A	090	Y	N	N	N	N	\$ 305.11	\$ 376.68
42507		A	090	Y	B	Y	N	N	\$ 332.82	\$ 332.82
42509		A	090	Y	B	D	N	N	\$ 555.26	\$ 555.26
42510		A	090	Y	B	Y	D	N	\$ 411.15	\$ 411.15
42550		A	000	Y	N	N	N	N	\$ 42.18	\$ 102.67
42600		A	090	Y	N	D	N	N	\$ 234.98	\$ 349.45
42650		A	000	Y	N	N	N	N	\$ 38.32	\$ 50.61
42660		A	000	Y	N	D	N	N	\$ 58.32	\$ 78.81
42665		A	090	Y	N	D	N	N	\$ 139.54	\$ 237.14
42699		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
42700		A	010	Y	N	N	N	N	\$ 89.17	\$ 126.04

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
42720		A	010	Y	N	D	N	N	\$ 260.76	\$ 301.01
42725		A	090	Y	N	Y	D	N	\$ 539.84	\$ 539.84
42800		A	010	Y	N	N	N	N	\$ 75.43	\$ 103.63
42804		A	010	Y	N	N	N	N	\$ 76.88	\$ 133.27
42806		A	010	Y	N	N	N	N	\$ 89.89	\$ 149.66
42808		A	010	Y	N	N	N	N	\$ 109.17	\$ 150.87
42809		A	010	Y	N	N	N	N	\$ 84.11	\$ 131.83
42810		A	090	Y	Y	Y	N	N	\$ 186.05	\$ 254.50
42815		A	090	Y	Y	Y	D	N	\$ 363.43	\$ 363.43
42820		A	090	Y	N	D	N	N	\$ 193.76	\$ 193.76
42821		A	090	Y	N	D	N	N	\$ 202.20	\$ 202.20
42825		A	090	Y	N	D	N	N	\$ 175.93	\$ 175.93
42826		A	090	Y	N	N	N	N	\$ 167.98	\$ 167.98
42830		A	090	Y	N	D	N	N	\$ 138.33	\$ 138.33
42831		A	090	Y	N	D	N	N	\$ 150.14	\$ 150.14
42835		A	090	Y	N	D	N	N	\$ 128.45	\$ 128.45
42836		A	090	Y	N	D	N	N	\$ 160.99	\$ 160.99
42842		A	090	Y	N	D	N	N	\$ 675.04	\$ 675.04
42844		A	090	Y	N	Y	D	N	\$ 924.48	\$ 924.48
42845		A	090	Y	N	Y	D	N	\$ 1,500.71	\$ 1,500.71
42860		A	090	Y	N	D	N	N	\$ 125.32	\$ 125.32
42870		A	090	Y	N	D	N	N	\$ 388.73	\$ 388.73
42890		A	090	Y	N	Y	D	N	\$ 956.53	\$ 956.53
42892		A	090	Y	N	Y	D	N	\$ 1,255.13	\$ 1,255.13
42894		A	090	Y	N	Y	D	N	\$ 1,592.77	\$ 1,592.77
42900		A	010	Y	N	D	N	N	\$ 224.61	\$ 224.61
42950		A	090	Y	N	Y	D	N	\$ 532.13	\$ 532.13
42953		A	090	Y	N	Y	N	N	\$ 640.82	\$ 640.82
42955		A	090	Y	N	Y	N	N	\$ 505.14	\$ 505.14
42960		A	010	Y	N	D	N	N	\$ 108.93	\$ 108.93
42961		A	090	Y	N	Y	N	N	\$ 278.60	\$ 278.60
42962		A	090	Y	N	N	N	N	\$ 346.08	\$ 346.08
42970		A	090	Y	N	N	N	N	\$ 274.98	\$ 274.98
42971		A	090	Y	N	Y	N	N	\$ 304.38	\$ 304.38
42972		A	090	Y	N	Y	N	N	\$ 340.53	\$ 340.53
42999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
43020		A	090	Y	N	Y	D	N	\$ 388.97	\$ 388.97
43030		A	090	Y	N	Y	D	N	\$ 350.66	\$ 350.66
43045		A	090	Y	N	Y	D	N	\$ 905.44	\$ 905.44
43100		A	090	Y	N	Y	D	N	\$ 425.12	\$ 425.12
43101		A	090	Y	N	Y	D	N	\$ 701.79	\$ 701.79
43107		A	090	Y	N	Y	D	N	\$ 2,080.31	\$ 2,080.31

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
43108		A	090	Y	N	Y	D	N	\$ 3,130.35	\$ 3,130.35
43112		A	090	Y	N	Y	Y	N	\$ 2,437.72	\$ 2,437.72
43113		A	090	Y	N	Y	Y	N	\$ 3,052.99	\$ 3,052.99
43116		A	090	Y	N	Y	D	N	\$ 3,501.73	\$ 3,501.73
43117		A	090	Y	N	Y	Y	N	\$ 2,277.21	\$ 2,277.21
43118		A	090	Y	N	Y	Y	N	\$ 2,549.78	\$ 2,549.78
43121		A	090	Y	N	Y	Y	N	\$ 2,001.99	\$ 2,001.99
43122		A	090	Y	N	Y	D	N	\$ 1,780.03	\$ 1,780.03
43123		A	090	Y	N	Y	D	N	\$ 3,165.54	\$ 3,165.54
43124		A	090	Y	N	Y	D	N	\$ 2,669.56	\$ 2,669.56
43130		A	090	Y	N	Y	D	N	\$ 538.88	\$ 538.88
43135		A	090	Y	N	Y	D	N	\$ 1,029.55	\$ 1,029.55
43180		A	090	Y	N	N	N	N	\$ 370.66	\$ 370.66
43191		A	000	Y	N	N	N	N	\$ 104.59	\$ 104.59
43192		A	000	Y	N	N	N	N	\$ 114.72	\$ 114.72
43193		A	000	Y	N	N	N	N	\$ 114.23	\$ 114.23
43194		A	000	Y	N	N	N	N	\$ 131.83	\$ 131.83
43195		A	000	Y	N	N	N	N	\$ 124.36	\$ 124.36
43196		A	000	Y	N	N	N	N	\$ 132.31	\$ 132.31
43197		A	000	Y	N	N	N	N	\$ 56.88	\$ 127.49
43198		A	000	Y	N	N	N	N	\$ 67.48	\$ 140.50
43200		A	000	Y	N	N	N	N	\$ 59.29	\$ 168.70
43201		A	000	Y	N	N	N	N	\$ 69.65	\$ 167.74
43202		A	000	Y	N	N	N	N	\$ 69.41	\$ 232.57
43204		A	000	Y	N	N	N	N	\$ 91.34	\$ 91.34
43205		A	000	Y	N	N	N	N	\$ 95.20	\$ 95.20
43206		Not Covered	000	Y	N	N	N	N	\$ 89.89	\$ 197.14
43210		A	000	Y	N	N	N	N	\$ 297.15	\$ 297.15
43211		A	000	Y	N	N	N	N	\$ 159.06	\$ 159.06
43212		A	000	Y	N	N	N	N	\$ 130.62	\$ 130.62
43213		A	000	Y	N	N	N	N	\$ 177.38	\$ 820.61
43214		A	000	Y	N	N	N	N	\$ 131.35	\$ 131.35
43215		A	000	Y	N	N	N	N	\$ 96.16	\$ 261.00
43216		A	000	Y	N	N	N	N	\$ 90.38	\$ 269.92
43217		A	000	Y	N	N	N	N	\$ 108.45	\$ 277.15
43220		A	000	Y	N	N	N	N	\$ 80.01	\$ 633.83
43226		A	000	Y	N	N	N	N	\$ 89.17	\$ 249.19
43227		A	000	Y	N	N	N	N	\$ 112.07	\$ 407.77
43229		A	000	Y	N	N	N	N	\$ 134.00	\$ 473.57
43231		A	000	Y	N	N	Y	N	\$ 107.73	\$ 107.73
43232		A	000	Y	N	N	Y	N	\$ 134.96	\$ 134.96
43233		A	000	Y	N	N	N	N	\$ 157.13	\$ 157.13

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
43235		A	000	Y	N	N	N	N	\$ 83.15	\$ 193.76
43236		A	000	Y	N	N	N	N	\$ 93.51	\$ 260.04
43237		A	000	Y	N	N	N	N	\$ 132.55	\$ 132.55
43238		A	000	Y	N	N	N	N	\$ 157.61	\$ 157.61
43239		A	000	Y	N	N	N	N	\$ 93.51	\$ 247.75
43240		A	000	Y	N	N	N	N	\$ 266.31	\$ 266.31
43241		A	000	Y	N	N	N	N	\$ 96.40	\$ 96.40
43242		A	000	Y	N	N	N	N	\$ 178.10	\$ 178.10
43243		A	000	Y	N	N	N	N	\$ 161.23	\$ 161.23
43244		A	000	Y	N	N	N	N	\$ 166.05	\$ 166.05
43245		A	000	Y	N	N	N	N	\$ 120.26	\$ 397.17
43246		A	000	Y	N	D	Y	N	\$ 136.89	\$ 136.89
43247		A	000	Y	N	N	N	N	\$ 120.02	\$ 253.53
43248		A	000	Y	N	N	N	N	\$ 112.31	\$ 269.20
43249		A	000	Y	N	N	N	N	\$ 104.11	\$ 723.96
43250		A	000	Y	N	N	N	N	\$ 116.89	\$ 300.05
43251		A	000	Y	N	N	N	N	\$ 133.03	\$ 328.24
43252		Not Covered	000	Y	N	N	N	N	\$ 114.23	\$ 223.17
43253		A	000	Y	N	N	N	N	\$ 178.10	\$ 178.10
43254		A	000	Y	N	N	N	N	\$ 183.16	\$ 183.16
43255		A	000	Y	N	N	N	N	\$ 135.92	\$ 430.43
43257		Not Covered	000	Y	N	N	N	N	\$ 157.86	\$ 157.86
43259		A	000	Y	N	N	N	N	\$ 153.28	\$ 153.28
43260		A	000	Y	N	N	N	N	\$ 219.07	\$ 219.07
43261		A	000	Y	N	N	N	N	\$ 229.91	\$ 229.91
43262		A	000	Y	N	N	N	N	\$ 242.93	\$ 242.93
43263		A	000	Y	N	N	N	N	\$ 243.17	\$ 243.17
43264		A	000	Y	N	N	N	N	\$ 247.51	\$ 247.51
43265		A	000	Y	N	N	N	N	\$ 294.98	\$ 294.98
43266		A	000	Y	N	N	N	N	\$ 148.46	\$ 148.46
43270		A	000	Y	N	N	N	N	\$ 152.31	\$ 485.86
43273		A	ZZZ	N	N	D	N	N	\$ 81.94	\$ 81.94
43274		A	000	Y	N	N	N	N	\$ 314.99	\$ 314.99
43275		A	000	Y	N	N	N	N	\$ 255.94	\$ 255.94
43276		A	000	Y	N	N	N	N	\$ 328.00	\$ 328.00
43277		A	000	Y	N	N	N	N	\$ 257.39	\$ 257.39
43278		A	000	Y	N	N	N	N	\$ 294.26	\$ 294.26
43279		A	090	Y	N	Y	D	N	\$ 903.03	\$ 903.03
43280		A	090	Y	N	Y	D	N	\$ 756.98	\$ 756.98
43281		A	090	Y	N	Y	D	N	\$ 1,084.26	\$ 1,084.26
43282		A	090	Y	N	Y	D	N	\$ 1,219.94	\$ 1,219.94
43283		A	ZZZ	N	N	Y	D	N	\$ 112.07	\$ 112.07

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
43284		Not Covered	090	Y	N	Y	D	N	\$ 453.80	\$ 453.80
43285		Not Covered	090	Y	N	Y	D	N	\$ 467.54	\$ 467.54
43286		A	090	Y	N	Y	D	N	\$ 2,227.08	\$ 2,227.08
43287		A	090	Y	N	Y	Y	N	\$ 2,498.21	\$ 2,498.21
43288		A	090	Y	N	Y	Y	N	\$ 2,628.11	\$ 2,628.11
43289		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
43300		A	090	Y	N	Y	D	N	\$ 417.17	\$ 417.17
43305		A	090	Y	N	Y	D	N	\$ 745.17	\$ 745.17
43310		A	090	Y	N	Y	D	N	\$ 1,037.75	\$ 1,037.75
43312		A	090	Y	N	Y	D	N	\$ 1,117.28	\$ 1,117.28
43313		A	090	Y	N	Y	D	N	\$ 1,911.61	\$ 1,911.61
43314		A	090	Y	N	Y	D	N	\$ 2,064.41	\$ 2,064.41
43320		A	090	Y	N	Y	D	N	\$ 981.59	\$ 981.59
43325		A	090	Y	N	Y	D	N	\$ 954.12	\$ 954.12
43327		A	090	Y	N	Y	D	N	\$ 572.38	\$ 572.38
43328		A	090	Y	N	Y	D	N	\$ 787.11	\$ 787.11
43330		A	090	Y	N	Y	D	N	\$ 938.94	\$ 938.94
43331		A	090	Y	N	Y	D	N	\$ 934.36	\$ 934.36
43332		A	090	Y	N	Y	D	N	\$ 807.35	\$ 807.35
43333		A	090	Y	N	Y	D	N	\$ 885.19	\$ 885.19
43334		A	090	Y	N	Y	D	N	\$ 874.35	\$ 874.35
43335		A	090	Y	N	Y	D	N	\$ 936.77	\$ 936.77
43336		A	090	Y	N	Y	D	N	\$ 1,016.78	\$ 1,016.78
43337		A	090	Y	N	Y	D	N	\$ 1,084.26	\$ 1,084.26
43338		A	ZZZ	N	N	Y	D	N	\$ 81.70	\$ 81.70
43340		A	090	Y	N	Y	D	N	\$ 969.30	\$ 969.30
43341		A	090	Y	N	Y	D	N	\$ 977.26	\$ 977.26
43351		A	090	Y	N	Y	D	N	\$ 916.28	\$ 916.28
43352		A	090	Y	N	Y	D	N	\$ 742.04	\$ 742.04
43360		A	090	Y	N	Y	D	N	\$ 1,574.94	\$ 1,574.94
43361		A	090	Y	N	Y	D	N	\$ 1,893.78	\$ 1,893.78
43400		A	090	Y	N	Y	D	N	\$ 1,071.00	\$ 1,071.00
43405		A	090	Y	N	Y	D	N	\$ 1,014.37	\$ 1,014.37
43410		A	090	Y	N	Y	D	N	\$ 692.39	\$ 692.39
43415		A	090	Y	N	Y	D	N	\$ 1,785.57	\$ 1,785.57
43420		A	090	Y	N	D	D	N	\$ 687.09	\$ 687.09
43425		A	090	Y	N	Y	D	N	\$ 1,007.14	\$ 1,007.14
43450		A	000	Y	N	N	N	N	\$ 53.50	\$ 121.71
43453		A	000	Y	N	N	N	N	\$ 57.84	\$ 557.67
43460		A	000	Y	N	N	N	N	\$ 144.12	\$ 144.12
43496		C	090	Y	N	Y	D	N	\$ -	\$ -
43499		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
43500		A	090	Y	N	Y	D	N	\$ 547.55	\$ 547.55
43501		A	090	Y	N	Y	D	N	\$ 944.48	\$ 944.48
43502		A	090	Y	N	Y	D	N	\$ 1,073.17	\$ 1,073.17
43510		A	090	Y	N	Y	D	N	\$ 663.96	\$ 663.96
43520		A	090	Y	N	Y	D	N	\$ 478.39	\$ 478.39
43605		A	090	Y	N	Y	D	N	\$ 585.39	\$ 585.39
43610		A	090	Y	N	Y	D	N	\$ 687.33	\$ 687.33
43611		A	090	Y	N	Y	D	N	\$ 856.51	\$ 856.51
43620		A	090	Y	N	Y	D	N	\$ 1,397.32	\$ 1,397.32
43621		A	090	Y	N	Y	D	N	\$ 1,599.04	\$ 1,599.04
43622		A	090	Y	N	Y	D	N	\$ 1,630.37	\$ 1,630.37
43631		A	090	Y	N	Y	D	N	\$ 1,017.98	\$ 1,017.98
43632		A	090	Y	N	Y	D	N	\$ 1,428.41	\$ 1,428.41
43633		A	090	Y	N	Y	D	N	\$ 1,351.05	\$ 1,351.05
43634		A	090	Y	N	Y	D	N	\$ 1,498.30	\$ 1,498.30
43635		A	ZZZ	N	N	Y	D	N	\$ 79.29	\$ 79.29
43640		A	090	Y	N	Y	D	N	\$ 826.87	\$ 826.87
43641		A	090	Y	N	Y	D	N	\$ 844.95	\$ 844.95
43644		A	090	Y	N	Y	D	N	\$ 1,220.18	\$ 1,220.18
43645		A	090	Y	N	Y	D	N	\$ 1,290.80	\$ 1,290.80
43647		C	YYY	Y	N	Y	D	N	\$ -	\$ -
43648		C	YYY	Y	N	Y	D	N	\$ -	\$ -
43651		A	090	Y	N	Y	D	N	\$ 456.94	\$ 456.94
43652		A	090	Y	N	Y	D	N	\$ 534.78	\$ 534.78
43653		A	090	Y	N	Y	D	N	\$ 399.82	\$ 399.82
43659		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
43752		A	000	N	N	N	N	N	\$ 27.96	\$ 27.96
43753		A	000	N	N	Y	N	N	\$ 15.67	\$ 15.67
43754		A	000	N	N	Y	N	N	\$ 24.10	\$ 135.44
43755		A	000	N	N	Y	N	N	\$ 39.77	\$ 125.32
43756		A	000	N	N	Y	N	N	\$ 33.98	\$ 176.41
43757		A	000	N	N	Y	N	N	\$ 51.57	\$ 238.59
43761		A	000	Y	N	N	N	N	\$ 72.30	\$ 84.35
43762		A	000	Y	N	N	N	N	\$ 26.75	\$ 150.87
43763		A	000	Y	N	N	N	N	\$ 57.84	\$ 227.75
43770		A	090	Y	N	Y	D	N	\$ 787.35	\$ 787.35
43771		A	090	Y	N	Y	D	N	\$ 896.76	\$ 896.76
43772		A	090	Y	N	Y	D	N	\$ 664.20	\$ 664.20
43773		A	090	Y	N	Y	D	N	\$ 896.76	\$ 896.76
43774		A	090	Y	N	Y	D	N	\$ 673.11	\$ 673.11
43775		A	090	Y	N	Y	D	N	\$ 788.55	\$ 788.55
43800		A	090	Y	N	Y	D	N	\$ 652.63	\$ 652.63

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
43810		A	090	Y	N	Y	D	N	\$ 713.84	\$ 713.84
43820		A	090	Y	N	Y	D	N	\$ 941.83	\$ 941.83
43825		A	090	Y	N	Y	D	N	\$ 920.38	\$ 920.38
43830		A	090	Y	N	Y	D	N	\$ 488.51	\$ 488.51
43831		A	090	Y	N	Y	D	N	\$ 419.82	\$ 419.82
43832		A	090	Y	N	Y	D	N	\$ 730.95	\$ 730.95
43840		A	090	Y	N	Y	D	N	\$ 952.91	\$ 952.91
43842		A	090	N	N	N	N	N	\$ 782.05	\$ 782.05
43843		A	090	Y	N	Y	Y	N	\$ 901.34	\$ 901.34
43845		Not Covered	090	Y	N	Y	D	N	\$ 1,363.34	\$ 1,363.34
43846		A	090	Y	N	Y	D	N	\$ 1,158.97	\$ 1,158.97
43847		A	090	Y	N	Y	D	N	\$ 1,270.79	\$ 1,270.79
43848		A	090	Y	N	Y	D	N	\$ 1,356.59	\$ 1,356.59
43850		A	090	Y	N	Y	D	N	\$ 1,146.44	\$ 1,146.44
43855		A	090	Y	N	Y	D	N	\$ 1,190.06	\$ 1,190.06
43860		A	090	Y	N	Y	D	N	\$ 1,146.44	\$ 1,146.44
43865		A	090	Y	N	Y	D	N	\$ 1,204.04	\$ 1,204.04
43870		A	090	Y	N	Y	D	N	\$ 495.01	\$ 495.01
43880		A	090	Y	N	Y	D	N	\$ 1,112.46	\$ 1,112.46
43881		C	YYY	Y	N	Y	D	N	\$ -	\$ -
43882		C	YYY	Y	N	Y	D	N	\$ -	\$ -
43886		Not Covered	090	Y	N	Y	D	N	\$ 251.12	\$ 251.12
43887		Not Covered	090	Y	N	Y	D	N	\$ 225.82	\$ 225.82
43888		Not Covered	090	Y	N	Y	D	N	\$ 320.77	\$ 320.77
43999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
44005		A	090	Y	N	Y	D	N	\$ 765.18	\$ 765.18
44010		A	090	Y	N	Y	D	N	\$ 594.79	\$ 594.79
44015		A	ZZZ	N	N	Y	D	N	\$ 100.50	\$ 100.50
44020		A	090	Y	N	Y	D	N	\$ 682.99	\$ 682.99
44021		A	090	Y	N	Y	D	N	\$ 682.27	\$ 682.27
44025		A	090	Y	N	Y	D	N	\$ 683.24	\$ 683.24
44050		A	090	Y	N	Y	D	N	\$ 654.56	\$ 654.56
44055		A	090	Y	N	Y	D	N	\$ 1,045.70	\$ 1,045.70
44100		A	000	Y	N	N	N	N	\$ 72.78	\$ 72.78
44110		A	090	Y	N	Y	D	N	\$ 589.00	\$ 589.00
44111		A	090	Y	N	Y	D	N	\$ 678.17	\$ 678.17
44120		A	090	Y	N	Y	D	N	\$ 856.03	\$ 856.03
44121		A	ZZZ	N	N	Y	D	N	\$ 170.15	\$ 170.15
44125		A	090	Y	N	Y	D	N	\$ 823.02	\$ 823.02
44126		A	090	Y	N	Y	D	N	\$ 1,738.57	\$ 1,738.57
44127		A	090	Y	N	Y	D	N	\$ 2,010.90	\$ 2,010.90
44128		A	ZZZ	N	N	Y	D	N	\$ 173.04	\$ 173.04

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
44130		A	090	Y	N	Y	D	N	\$ 918.93	\$ 918.93
44132		C	XXX	N	N	D	N	N	\$ -	\$ -
44133		C	XXX	N	N	D	N	N	\$ -	\$ -
44135		C	XXX	N	N	D	N	N	\$ -	\$ -
44136		C	XXX	N	N	D	N	N	\$ -	\$ -
44137		Unlstd/Manual	XXX	Y	N	Y	D	N	\$ -	\$ -
44139		A	ZZZ	N	N	Y	D	N	\$ 84.83	\$ 84.83
44140		A	090	Y	N	Y	D	N	\$ 937.49	\$ 937.49
44141		A	090	Y	N	Y	D	N	\$ 1,269.11	\$ 1,269.11
44143		A	090	Y	N	Y	D	N	\$ 1,159.93	\$ 1,159.93
44144		A	090	Y	N	Y	D	N	\$ 1,233.44	\$ 1,233.44
44145		A	090	Y	N	Y	D	N	\$ 1,148.61	\$ 1,148.61
44146		A	090	Y	N	Y	D	N	\$ 1,461.18	\$ 1,461.18
44147		A	090	Y	N	Y	D	N	\$ 1,351.77	\$ 1,351.77
44150		A	090	Y	N	Y	D	N	\$ 1,289.11	\$ 1,289.11
44151		A	090	Y	N	Y	D	N	\$ 1,511.07	\$ 1,511.07
44155		A	090	Y	N	Y	D	N	\$ 1,431.06	\$ 1,431.06
44156		A	090	Y	N	Y	D	N	\$ 1,617.59	\$ 1,617.59
44157		A	090	Y	N	Y	D	N	\$ 1,535.41	\$ 1,535.41
44158		A	090	Y	N	Y	D	N	\$ 1,573.25	\$ 1,573.25
44160		A	090	Y	N	Y	D	N	\$ 864.95	\$ 864.95
44180		A	090	Y	N	Y	D	N	\$ 642.99	\$ 642.99
44186		A	090	Y	N	Y	D	N	\$ 454.53	\$ 454.53
44187		A	090	Y	N	Y	D	N	\$ 753.37	\$ 753.37
44188		A	090	Y	N	Y	D	N	\$ 842.78	\$ 842.78
44202		A	090	Y	N	Y	D	N	\$ 968.34	\$ 968.34
44203		A	ZZZ	N	N	Y	D	N	\$ 168.94	\$ 168.94
44204		A	090	Y	N	Y	D	N	\$ 1,069.08	\$ 1,069.08
44205		A	090	Y	N	Y	D	N	\$ 927.37	\$ 927.37
44206		A	090	Y	N	Y	D	N	\$ 1,215.60	\$ 1,215.60
44207		A	090	Y	N	Y	D	N	\$ 1,258.74	\$ 1,258.74
44208		A	090	Y	N	Y	D	N	\$ 1,366.71	\$ 1,366.71
44210		A	090	Y	N	Y	D	N	\$ 1,217.29	\$ 1,217.29
44211		A	090	Y	N	Y	D	N	\$ 1,440.70	\$ 1,440.70
44212		A	090	Y	N	Y	D	N	\$ 1,396.84	\$ 1,396.84
44213		A	ZZZ	N	N	Y	D	N	\$ 131.10	\$ 131.10
44227		A	090	Y	N	Y	D	N	\$ 1,159.21	\$ 1,159.21
44238		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
44300		A	090	Y	N	Y	D	N	\$ 588.04	\$ 588.04
44310		A	090	Y	N	Y	D	N	\$ 721.55	\$ 721.55
44312		A	090	Y	N	D	N	N	\$ 410.66	\$ 410.66
44314		A	090	Y	N	Y	D	N	\$ 695.29	\$ 695.29

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
44316		A	090	Y	N	Y	D	N	\$ 993.88	\$ 993.88
44320		A	090	Y	N	Y	D	N	\$ 835.07	\$ 835.07
44322		A	090	Y	N	Y	D	N	\$ 694.80	\$ 694.80
44340		A	090	Y	N	N	D	N	\$ 427.53	\$ 427.53
44345		A	090	Y	N	Y	D	N	\$ 726.86	\$ 726.86
44346		A	090	Y	N	Y	D	N	\$ 821.81	\$ 821.81
44360		A	000	Y	N	N	N	N	\$ 96.88	\$ 96.88
44361		A	000	Y	N	N	N	N	\$ 107.49	\$ 107.49
44363		A	000	Y	N	D	N	N	\$ 129.90	\$ 129.90
44364		A	000	Y	N	D	N	N	\$ 138.58	\$ 138.58
44365		A	000	Y	N	D	N	N	\$ 123.15	\$ 123.15
44366		A	000	Y	N	N	N	N	\$ 162.43	\$ 162.43
44369		A	000	Y	N	D	N	N	\$ 166.53	\$ 166.53
44370		A	000	Y	N	D	N	N	\$ 180.03	\$ 180.03
44372		A	000	Y	N	N	N	N	\$ 162.92	\$ 162.92
44373		A	000	Y	N	N	N	N	\$ 130.86	\$ 130.86
44376		A	000	Y	N	D	N	N	\$ 192.56	\$ 192.56
44377		A	000	Y	N	D	N	N	\$ 203.16	\$ 203.16
44378		A	000	Y	N	D	N	N	\$ 261.24	\$ 261.24
44379		A	000	Y	N	D	N	N	\$ 277.15	\$ 277.15
44380		A	000	Y	N	N	N	N	\$ 37.60	\$ 126.28
44381		A	000	Y	N	N	N	N	\$ 56.39	\$ 647.33
44382		A	000	Y	N	N	N	N	\$ 49.41	\$ 194.97
44384		A	000	Y	N	N	N	N	\$ 105.56	\$ 105.56
44385		A	000	Y	N	N	N	N	\$ 48.44	\$ 138.58
44386		A	000	Y	N	N	N	N	\$ 59.77	\$ 203.65
44388		A	000	Y	N	N	N	N	\$ 106.76	\$ 208.95
44389		A	000	Y	N	N	N	N	\$ 117.13	\$ 272.57
44390		A	000	Y	N	N	N	N	\$ 142.67	\$ 268.47
44391		A	000	Y	N	N	N	N	\$ 156.41	\$ 441.03
44392		A	000	Y	N	N	N	N	\$ 135.68	\$ 255.94
44394		A	000	Y	N	N	N	N	\$ 153.28	\$ 291.61
44401		A	000	Y	N	N	N	N	\$ 164.12	\$ 1,718.81
44402		A	000	Y	N	N	N	N	\$ 177.14	\$ 177.14
44403		A	000	Y	N	N	N	N	\$ 206.54	\$ 206.54
44404		A	000	Y	N	N	N	N	\$ 116.64	\$ 274.02
44405		A	000	Y	N	N	N	N	\$ 123.87	\$ 372.10
44406		A	000	Y	N	N	N	N	\$ 155.69	\$ 155.69
44407		A	000	Y	N	N	N	N	\$ 186.53	\$ 186.53
44408		A	000	Y	N	N	N	N	\$ 157.13	\$ 157.13
44500		A	000	N	N	D	N	N	\$ 13.50	\$ 13.50
44602		A	090	Y	N	Y	D	N	\$ 989.06	\$ 989.06

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
44603		A	090	Y	N	Y	D	N	\$ 1,132.70	\$ 1,132.70
44604		A	090	Y	N	Y	D	N	\$ 739.39	\$ 739.39
44605		A	090	Y	N	Y	D	N	\$ 905.44	\$ 905.44
44615		A	090	Y	N	Y	D	N	\$ 747.58	\$ 747.58
44620		A	090	Y	N	Y	D	N	\$ 600.09	\$ 600.09
44625		A	090	Y	N	Y	D	N	\$ 700.35	\$ 700.35
44626		A	090	Y	N	Y	D	N	\$ 1,116.07	\$ 1,116.07
44640		A	090	Y	N	Y	D	N	\$ 975.33	\$ 975.33
44650		A	090	Y	N	Y	D	N	\$ 1,004.97	\$ 1,004.97
44660		A	090	Y	N	Y	D	N	\$ 926.40	\$ 926.40
44661		A	090	Y	N	Y	D	N	\$ 1,078.96	\$ 1,078.96
44680		A	090	Y	N	Y	D	N	\$ 756.98	\$ 756.98
44700		A	090	Y	N	Y	D	N	\$ 688.06	\$ 688.06
44701		A	ZZZ	N	N	Y	D	N	\$ 120.02	\$ 120.02
44705		A	XXX	N	N	N	N	N	\$ 49.41	\$ 73.75
44715		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
44720		Not Covered	XXX	Y	N	Y	D	N	\$ 194.73	\$ 194.73
44721		Not Covered	XXX	Y	N	Y	D	N	\$ 271.85	\$ 271.85
44799		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
44800		A	090	Y	N	Y	D	N	\$ 534.54	\$ 534.54
44820		A	090	Y	N	Y	D	N	\$ 586.35	\$ 586.35
44850		A	090	Y	N	Y	D	N	\$ 520.08	\$ 520.08
44899		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
44900		A	090	Y	N	Y	D	N	\$ 549.00	\$ 549.00
44950		A	090	Y	N	Y	D	N	\$ 450.19	\$ 450.19
44955		A	ZZZ	N	N	Y	D	N	\$ 58.32	\$ 58.32
44960		A	090	Y	N	Y	D	N	\$ 614.79	\$ 614.79
44970		A	090	Y	N	Y	Y	N	\$ 419.10	\$ 419.10
44979		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
45000		A	090	Y	N	N	N	N	\$ 289.68	\$ 289.68
45005		A	010	Y	N	N	N	N	\$ 110.38	\$ 201.96
45020		A	090	Y	N	N	N	N	\$ 394.28	\$ 394.28
45100		A	090	Y	N	N	N	N	\$ 203.16	\$ 203.16
45108		A	090	Y	N	N	D	N	\$ 256.42	\$ 256.42
45110		A	090	Y	N	Y	D	N	\$ 1,260.67	\$ 1,260.67
45111		A	090	Y	N	Y	D	N	\$ 751.68	\$ 751.68
45112		A	090	Y	N	Y	D	N	\$ 1,285.25	\$ 1,285.25
45113		A	090	Y	N	Y	D	N	\$ 1,276.34	\$ 1,276.34
45114		A	090	Y	N	Y	D	N	\$ 1,278.75	\$ 1,278.75
45116		A	090	Y	N	Y	D	N	\$ 1,053.89	\$ 1,053.89
45119		A	090	Y	N	Y	D	N	\$ 1,285.49	\$ 1,285.49
45120		A	090	Y	N	Y	D	N	\$ 1,122.10	\$ 1,122.10

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
45121		A	090	Y	N	Y	D	N	\$ 1,225.97	\$ 1,225.97
45123		A	090	Y	N	Y	D	N	\$ 765.18	\$ 765.18
45126		A	090	Y	N	Y	D	N	\$ 1,890.16	\$ 1,890.16
45130		A	090	Y	N	Y	D	N	\$ 742.52	\$ 742.52
45135		A	090	Y	N	Y	D	N	\$ 879.65	\$ 879.65
45136		A	090	Y	N	Y	D	N	\$ 1,218.01	\$ 1,218.01
45150		A	090	Y	N	D	N	N	\$ 290.65	\$ 290.65
45160		A	090	Y	N	Y	D	N	\$ 716.73	\$ 716.73
45171		A	090	Y	N	Y	D	N	\$ 419.34	\$ 419.34
45172		A	090	Y	N	Y	D	N	\$ 562.01	\$ 562.01
45190		A	090	Y	N	N	D	N	\$ 479.59	\$ 479.59
45300		A	000	Y	N	N	N	N	\$ 33.02	\$ 85.07
45303		A	000	Y	N	N	N	N	\$ 57.36	\$ 628.29
45305		A	000	Y	N	N	N	N	\$ 49.65	\$ 117.37
45307		A	000	Y	N	D	N	N	\$ 64.83	\$ 132.79
45308		A	000	Y	N	N	N	N	\$ 58.08	\$ 134.48
45309		A	000	Y	N	N	N	N	\$ 61.94	\$ 139.06
45315		A	000	Y	N	N	N	N	\$ 74.23	\$ 151.83
45317		A	000	Y	N	N	N	N	\$ 74.95	\$ 144.12
45320		A	000	Y	N	N	N	N	\$ 73.02	\$ 148.94
45321		A	000	Y	N	N	N	N	\$ 72.06	\$ 72.06
45327		A	000	Y	N	N	N	N	\$ 81.22	\$ 81.22
45330		A	000	Y	N	N	N	N	\$ 37.11	\$ 119.54
45331		A	000	Y	N	N	N	N	\$ 48.20	\$ 186.78
45332		A	000	Y	N	N	N	N	\$ 70.85	\$ 180.99
45333		A	000	Y	N	N	N	N	\$ 63.38	\$ 215.45
45334		A	000	Y	N	N	N	N	\$ 79.05	\$ 340.53
45335		A	000	Y	N	N	N	N	\$ 44.83	\$ 186.53
45337		A	000	Y	N	N	N	N	\$ 78.57	\$ 78.57
45338		A	000	Y	N	N	N	N	\$ 81.46	\$ 196.66
45340		A	000	Y	N	N	N	N	\$ 52.30	\$ 303.18
45341		A	000	Y	N	N	N	N	\$ 83.63	\$ 83.63
45342		A	000	Y	N	N	N	N	\$ 114.96	\$ 114.96
45346		A	000	Y	N	N	N	N	\$ 108.69	\$ 1,665.79
45347		A	000	Y	N	N	N	N	\$ 104.59	\$ 104.59
45349		A	000	Y	N	N	N	N	\$ 134.72	\$ 134.72
45350		A	000	Y	N	N	N	N	\$ 67.96	\$ 432.35
45378		A	000	Y	N	N	N	N	\$ 126.04	\$ 226.06
45379		A	000	Y	N	N	N	N	\$ 162.19	\$ 289.44
45380		A	000	Y	N	N	N	N	\$ 136.41	\$ 289.20
45381		A	000	Y	N	N	N	N	\$ 136.41	\$ 291.37
45382		A	000	Y	N	N	N	N	\$ 175.69	\$ 459.35

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
45384		A	000	Y	N	N	N	N	\$ 155.69	\$ 325.83
45385		A	000	Y	N	N	N	N	\$ 172.56	\$ 303.18
45386		A	000	Y	N	N	N	N	\$ 143.88	\$ 409.22
45388		A	000	Y	N	N	N	N	\$ 184.61	\$ 1,777.38
45389		A	000	Y	N	N	N	N	\$ 197.14	\$ 197.14
45390		A	000	Y	N	N	N	N	\$ 225.82	\$ 225.82
45391		A	000	Y	N	N	N	N	\$ 174.48	\$ 174.48
45392		A	000	Y	N	N	N	N	\$ 207.26	\$ 207.26
45393		A	000	Y	N	N	N	N	\$ 173.28	\$ 173.28
45395		A	090	Y	N	Y	D	N	\$ 1,348.40	\$ 1,348.40
45397		A	090	Y	N	Y	D	N	\$ 1,459.74	\$ 1,459.74
45398		A	000	Y	N	N	N	N	\$ 160.99	\$ 541.05
45399		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
45400		A	090	Y	N	Y	D	N	\$ 776.74	\$ 776.74
45402		A	090	Y	N	Y	D	N	\$ 1,042.33	\$ 1,042.33
45499		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
45500		A	090	Y	N	D	N	N	\$ 391.38	\$ 391.38
45505		A	090	Y	N	N	N	N	\$ 407.53	\$ 407.53
45520		A	000	Y	N	N	N	N	\$ 26.03	\$ 105.32
45540		A	090	Y	N	Y	D	N	\$ 726.37	\$ 726.37
45541		A	090	Y	N	Y	D	N	\$ 650.22	\$ 650.22
45550		A	090	Y	N	Y	D	N	\$ 1,009.31	\$ 1,009.31
45560		A	090	Y	N	Y	D	N	\$ 474.29	\$ 474.29
45562		A	090	Y	N	Y	D	N	\$ 780.36	\$ 780.36
45563		A	090	Y	N	Y	D	N	\$ 1,161.62	\$ 1,161.62
45800		A	090	Y	N	Y	D	N	\$ 889.53	\$ 889.53
45805		A	090	Y	N	Y	D	N	\$ 1,029.55	\$ 1,029.55
45820		A	090	Y	N	Y	D	N	\$ 891.46	\$ 891.46
45825		A	090	Y	N	Y	D	N	\$ 1,076.31	\$ 1,076.31
45900		A	010	Y	N	D	N	N	\$ 146.77	\$ 146.77
45905		A	010	Y	N	N	N	N	\$ 114.48	\$ 114.48
45910		A	010	Y	N	N	N	N	\$ 130.14	\$ 130.14
45915		A	010	Y	N	N	N	N	\$ 156.65	\$ 235.46
45990		A	000	Y	N	D	D	D	\$ 72.30	\$ 72.30
45999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
46020		A	010	Y	N	N	N	N	\$ 159.78	\$ 189.19
46030		A	010	Y	N	D	N	N	\$ 60.49	\$ 100.26
46040		A	090	Y	N	N	N	N	\$ 287.03	\$ 372.10
46045		A	090	Y	N	N	N	N	\$ 299.32	\$ 299.32
46050		A	010	Y	N	N	N	N	\$ 67.24	\$ 151.83
46060		A	090	Y	N	N	N	N	\$ 327.76	\$ 327.76
46070		A	090	Y	N	D	N	N	\$ 182.20	\$ 182.20

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
46080		A	010	Y	N	N	N	N	\$ 108.93	\$ 188.70
46083		A	010	Y	N	N	N	N	\$ 73.75	\$ 135.68
46200		A	090	Y	N	N	N	N	\$ 222.68	\$ 312.10
46220		A	010	Y	N	N	N	N	\$ 81.22	\$ 160.51
46221		A	010	Y	N	N	N	N	\$ 129.18	\$ 188.70
46230		A	010	Y	N	N	N	N	\$ 117.61	\$ 203.40
46250		A	090	Y	N	N	N	N	\$ 216.18	\$ 320.05
46255		A	090	Y	N	N	N	N	\$ 242.93	\$ 350.17
46257		A	090	Y	N	N	N	N	\$ 289.92	\$ 289.92
46258		A	090	Y	N	D	N	N	\$ 328.24	\$ 328.24
46260		A	090	Y	N	N	N	N	\$ 328.24	\$ 328.24
46261		A	090	Y	N	N	N	N	\$ 357.89	\$ 357.89
46262		A	090	Y	N	N	N	N	\$ 380.54	\$ 380.54
46270		A	090	Y	N	N	N	N	\$ 268.96	\$ 356.44
46275		A	090	Y	N	N	N	N	\$ 282.93	\$ 375.00
46280		A	090	Y	N	N	N	N	\$ 323.18	\$ 323.18
46285		A	090	Y	N	N	N	N	\$ 282.93	\$ 373.31
46288		A	090	Y	N	N	N	N	\$ 376.68	\$ 376.68
46320		A	010	Y	N	N	N	N	\$ 76.64	\$ 138.58
46500		A	010	Y	N	N	N	N	\$ 122.43	\$ 204.85
46505		A	010	Y	Y	N	N	N	\$ 167.98	\$ 207.74
46600		A	000	Y	N	N	N	N	\$ 26.99	\$ 76.40
46601		Not Covered	000	Y	N	N	N	N	\$ 64.59	\$ 99.77
46604		A	000	Y	N	N	N	N	\$ 44.34	\$ 442.24
46606		A	000	Y	N	N	N	N	\$ 51.57	\$ 182.68
46607		Not Covered	000	Y	N	N	N	N	\$ 87.48	\$ 139.54
46608		A	000	Y	N	N	N	N	\$ 58.08	\$ 193.04
46610		A	000	Y	N	N	N	N	\$ 54.71	\$ 181.71
46611		A	000	Y	N	N	N	N	\$ 54.47	\$ 146.29
46612		A	000	Y	N	N	N	N	\$ 66.03	\$ 221.96
46614		A	000	Y	N	N	N	N	\$ 43.14	\$ 108.21
46615		A	000	Y	N	N	N	N	\$ 61.70	\$ 117.61
46700		A	090	Y	N	N	N	N	\$ 446.57	\$ 446.57
46705		A	090	Y	N	Y	D	N	\$ 391.14	\$ 391.14
46706		A	010	Y	N	N	N	N	\$ 122.43	\$ 122.43
46707		Not Covered	090	Y	N	D	N	N	\$ 344.15	\$ 344.15
46710		A	090	Y	N	Y	D	N	\$ 776.02	\$ 776.02
46712		A	090	Y	N	Y	D	N	\$ 1,563.13	\$ 1,563.13
46715		A	090	Y	N	Y	N	N	\$ 383.19	\$ 383.19
46716		A	090	Y	N	Y	D	N	\$ 849.28	\$ 849.28
46730		A	090	Y	N	Y	D	N	\$ 1,380.69	\$ 1,380.69
46735		A	090	Y	N	Y	D	N	\$ 1,593.73	\$ 1,593.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
46740		A	090	Y	N	Y	D	N	\$ 1,508.42	\$ 1,508.42
46742		A	090	Y	N	Y	D	N	\$ 1,748.70	\$ 1,748.70
46744		A	090	Y	N	Y	D	N	\$ 2,480.61	\$ 2,480.61
46746		A	090	Y	N	Y	D	N	\$ 2,736.31	\$ 2,736.31
46748		A	090	Y	N	Y	D	N	\$ 2,968.64	\$ 2,968.64
46750		A	090	Y	N	Y	D	N	\$ 515.26	\$ 515.26
46751		A	090	Y	N	Y	D	N	\$ 461.27	\$ 461.27
46753		A	090	Y	N	N	N	N	\$ 429.46	\$ 429.46
46754		A	010	Y	N	D	N	N	\$ 157.37	\$ 222.20
46760		A	090	Y	N	Y	D	N	\$ 742.52	\$ 742.52
46761		A	090	Y	N	Y	D	N	\$ 631.90	\$ 631.90
46900		A	010	Y	N	N	N	N	\$ 90.62	\$ 156.41
46910		A	010	Y	N	N	N	N	\$ 90.62	\$ 174.24
46916		A	010	Y	N	N	N	N	\$ 93.03	\$ 165.81
46917		A	010	Y	N	N	N	N	\$ 86.28	\$ 279.56
46922		A	010	Y	N	N	N	N	\$ 92.30	\$ 202.68
46924		A	010	Y	N	N	N	N	\$ 122.43	\$ 358.85
46930		A	090	Y	N	D	N	N	\$ 100.50	\$ 142.91
46940		A	010	Y	N	N	N	N	\$ 98.81	\$ 172.80
46942		A	010	Y	N	D	N	N	\$ 87.97	\$ 163.64
46945		A	090	Y	N	N	N	N	\$ 225.82	\$ 225.82
46946		A	090	Y	N	N	N	N	\$ 255.46	\$ 255.46
46947		A	090	Y	N	N	N	N	\$ 264.62	\$ 264.62
46948		A	090	Y	N	N	N	N	\$ 302.21	\$ 302.21
46999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
47000		A	000	Y	N	N	N	N	\$ 59.77	\$ 199.31
47001		A	ZZZ	N	N	N	D	N	\$ 73.26	\$ 73.26
47010		A	090	Y	N	Y	D	N	\$ 846.63	\$ 846.63
47015		A	090	Y	N	Y	D	N	\$ 816.27	\$ 816.27
47100		A	090	Y	N	Y	D	N	\$ 589.49	\$ 589.49
47120		A	090	Y	N	Y	D	N	\$ 1,635.91	\$ 1,635.91
47122		A	090	Y	N	Y	D	N	\$ 2,405.90	\$ 2,405.90
47125		A	090	Y	N	Y	D	N	\$ 2,161.53	\$ 2,161.53
47130		A	090	Y	N	Y	D	N	\$ 2,325.17	\$ 2,325.17
47133		C	XXX	N	N	N	N	N	\$ -	\$ -
47135		A	090	Y	N	Y	D	Y	\$ 3,759.36	\$ 3,759.36
47140		A	090	Y	N	Y	D	Y	\$ 2,497.72	\$ 2,497.72
47141		A	090	Y	N	Y	D	Y	\$ 2,988.88	\$ 2,988.88
47142		A	090	Y	N	Y	D	N	\$ 3,297.60	\$ 3,297.60
47143		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
47144		Not Covered	090	Y	N	Y	D	N	\$ -	\$ -
47145		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
47146		Not Covered	XXX	Y	N	Y	D	N	\$ 232.08	\$ 232.08
47147		Not Covered	XXX	Y	N	Y	D	N	\$ 269.92	\$ 269.92
47300		A	090	Y	N	Y	D	N	\$ 793.13	\$ 793.13
47350		A	090	Y	N	Y	D	N	\$ 957.73	\$ 957.73
47360		A	090	Y	N	Y	D	N	\$ 1,319.72	\$ 1,319.72
47361		A	090	Y	N	Y	D	N	\$ 2,123.45	\$ 2,123.45
47362		A	090	Y	N	Y	D	N	\$ 996.29	\$ 996.29
47370		A	090	Y	N	Y	D	N	\$ 876.28	\$ 876.28
47371		A	090	Y	N	Y	D	N	\$ 883.27	\$ 883.27
47379		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
47380		A	090	Y	N	Y	D	N	\$ 1,011.48	\$ 1,011.48
47381		A	090	Y	N	Y	D	N	\$ 1,041.84	\$ 1,041.84
47382		A	010	Y	N	N	N	N	\$ 503.69	\$ 2,638.95
47383		A	010	Y	N	N	N	N	\$ 303.66	\$ 4,114.83
47399		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
47400		A	090	Y	N	Y	D	N	\$ 1,516.37	\$ 1,516.37
47420		A	090	Y	N	Y	D	N	\$ 934.84	\$ 934.84
47425		A	090	Y	N	Y	D	N	\$ 960.87	\$ 960.87
47460		A	090	Y	N	Y	D	N	\$ 890.74	\$ 890.74
47480		A	090	Y	N	Y	D	N	\$ 610.45	\$ 610.45
47490		A	010	Y	N	N	N	N	\$ 220.76	\$ 220.76
47531		A	000	Y	N	N	N	N	\$ 47.96	\$ 267.99
47532		A	000	Y	N	N	N	N	\$ 145.32	\$ 556.47
47533		A	000	Y	N	N	N	N	\$ 180.75	\$ 795.30
47534		A	000	Y	N	N	N	N	\$ 252.09	\$ 888.09
47535		A	000	Y	N	N	N	N	\$ 133.03	\$ 613.83
47536		A	000	Y	N	N	N	N	\$ 89.41	\$ 437.42
47537		A	000	Y	N	N	N	N	\$ 64.83	\$ 311.85
47538		A	000	Y	N	N	N	N	\$ 160.51	\$ 2,625.94
47539		A	000	Y	N	N	N	N	\$ 287.27	\$ 2,895.62
47540		A	000	Y	N	N	N	N	\$ 299.56	\$ 2,960.44
47541		A	000	Y	N	N	N	N	\$ 227.02	\$ 784.94
47542		A	ZZZ	N	N	N	N	N	\$ 92.79	\$ 334.75
47543		A	ZZZ	N	N	N	N	N	\$ 98.09	\$ 280.28
47544		A	ZZZ	N	N	N	N	N	\$ 107.00	\$ 597.68
47550		A	ZZZ	N	N	Y	D	N	\$ 116.64	\$ 116.64
47552		A	000	Y	N	N	D	N	\$ 189.67	\$ 189.67
47553		A	000	Y	N	N	N	N	\$ 192.08	\$ 192.08
47554		A	000	Y	N	N	D	N	\$ 362.95	\$ 362.95
47555		A	000	Y	N	N	N	N	\$ 228.71	\$ 228.71
47556		A	000	Y	N	N	N	N	\$ 258.83	\$ 258.83
47562		A	090	Y	N	Y	D	N	\$ 460.55	\$ 460.55

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
47563		A	090	Y	N	Y	D	N	\$ 501.28	\$ 501.28
47564		A	090	Y	N	Y	D	N	\$ 781.56	\$ 781.56
47570		A	090	Y	N	Y	D	N	\$ 543.70	\$ 543.70
47579		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
47600		A	090	Y	N	Y	D	N	\$ 748.06	\$ 748.06
47605		A	090	Y	N	Y	D	N	\$ 789.28	\$ 789.28
47610		A	090	Y	N	Y	D	N	\$ 879.65	\$ 879.65
47612		A	090	Y	N	Y	D	N	\$ 896.76	\$ 896.76
47620		A	090	Y	N	Y	D	N	\$ 968.82	\$ 968.82
47700		A	090	Y	N	Y	D	N	\$ 740.59	\$ 740.59
47701		A	090	Y	N	D	N	N	\$ 1,222.11	\$ 1,222.11
47711		A	090	Y	N	Y	D	N	\$ 1,091.97	\$ 1,091.97
47712		A	090	Y	N	Y	D	N	\$ 1,406.72	\$ 1,406.72
47715		A	090	Y	N	Y	D	N	\$ 933.88	\$ 933.88
47720		A	090	Y	N	Y	D	N	\$ 809.76	\$ 809.76
47721		A	090	Y	N	Y	D	N	\$ 951.47	\$ 951.47
47740		A	090	Y	N	Y	D	N	\$ 921.83	\$ 921.83
47741		A	090	Y	N	Y	D	N	\$ 1,037.75	\$ 1,037.75
47760		A	090	Y	N	Y	D	N	\$ 1,581.44	\$ 1,581.44
47765		A	090	Y	N	Y	D	N	\$ 2,140.32	\$ 2,140.32
47780		A	090	Y	N	Y	D	N	\$ 1,740.02	\$ 1,740.02
47785		A	090	Y	N	Y	D	N	\$ 2,277.93	\$ 2,277.93
47800		A	090	Y	N	Y	D	N	\$ 1,092.94	\$ 1,092.94
47801		A	090	Y	N	Y	D	N	\$ 781.56	\$ 781.56
47802		A	090	Y	N	Y	D	N	\$ 1,072.45	\$ 1,072.45
47900		A	090	Y	N	Y	D	N	\$ 950.99	\$ 950.99
47999		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
48000		A	090	Y	N	Y	D	N	\$ 1,326.22	\$ 1,326.22
48001		A	090	Y	N	Y	D	N	\$ 1,627.23	\$ 1,627.23
48020		A	090	Y	N	Y	D	N	\$ 827.11	\$ 827.11
48100		A	090	Y	N	Y	D	N	\$ 615.76	\$ 615.76
48102		A	010	Y	N	N	N	N	\$ 161.47	\$ 349.93
48105		A	090	Y	N	Y	D	N	\$ 1,994.03	\$ 1,994.03
48120		A	090	Y	N	Y	D	N	\$ 776.26	\$ 776.26
48140		A	090	Y	N	Y	D	N	\$ 1,096.31	\$ 1,096.31
48145		A	090	Y	N	Y	D	N	\$ 1,148.85	\$ 1,148.85
48146		A	090	Y	N	Y	D	N	\$ 1,323.33	\$ 1,323.33
48148		A	090	Y	N	Y	D	N	\$ 877.48	\$ 877.48
48150		A	090	Y	N	Y	D	N	\$ 2,188.04	\$ 2,188.04
48152		A	090	Y	N	Y	D	N	\$ 2,034.76	\$ 2,034.76
48153		A	090	Y	N	Y	D	N	\$ 2,182.50	\$ 2,182.50
48154		A	090	Y	N	Y	D	N	\$ 2,044.16	\$ 2,044.16

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
48155		A	090	Y	N	Y	D	N	\$ 1,272.48	\$ 1,272.48
48160		C	XXX	N	N	N	N	N	\$ -	\$ -
48400		A	ZZZ	N	N	D	N	N	\$ 75.67	\$ 75.67
48500		A	090	Y	N	Y	D	N	\$ 805.42	\$ 805.42
48510		A	090	Y	N	Y	D	N	\$ 768.07	\$ 768.07
48520		A	090	Y	N	Y	D	N	\$ 773.61	\$ 773.61
48540		A	090	Y	N	Y	D	N	\$ 921.58	\$ 921.58
48545		A	090	Y	N	Y	D	N	\$ 946.65	\$ 946.65
48547		A	090	Y	N	Y	D	N	\$ 1,262.60	\$ 1,262.60
48548		A	090	Y	N	Y	D	N	\$ 1,176.56	\$ 1,176.56
48550		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
48551		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
48552		Not Covered	XXX	Y	N	Y	D	N	\$ 166.77	\$ 166.77
48554		A	090	Y	N	Y	Y	Y	\$ 1,781.23	\$ 1,781.23
48556		A	090	Y	N	Y	Y	Y	\$ 888.57	\$ 888.57
48999		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
49000		A	090	Y	N	Y	D	N	\$ 535.26	\$ 535.26
49002		A	090	Y	N	Y	D	N	\$ 730.71	\$ 730.71
49010		A	090	Y	N	Y	D	N	\$ 646.12	\$ 646.12
49013		Not Covered	000	Y	N	N	N	N	\$ 303.42	\$ 303.42
49014		Not Covered	000	Y	N	N	N	N	\$ 250.16	\$ 250.16
49020		A	090	Y	N	Y	N	N	\$ 1,113.18	\$ 1,113.18
49040		A	090	Y	N	Y	D	N	\$ 702.27	\$ 702.27
49060		A	090	Y	N	N	D	N	\$ 766.14	\$ 766.14
49062		A	090	Y	N	Y	D	N	\$ 536.71	\$ 536.71
49082		A	000	Y	N	N	N	N	\$ 49.65	\$ 139.30
49083		A	000	Y	N	N	N	N	\$ 71.82	\$ 195.69
49084		A	000	Y	N	N	N	N	\$ 75.67	\$ 75.67
49180		A	000	Y	N	N	N	N	\$ 57.36	\$ 113.51
49185		A	000	N	N	N	N	N	\$ 80.98	\$ 801.81
49203		A	090	Y	N	Y	D	N	\$ 830.49	\$ 830.49
49204		A	090	Y	N	Y	D	N	\$ 1,058.23	\$ 1,058.23
49205		A	090	Y	N	Y	D	N	\$ 1,215.12	\$ 1,215.12
49215		A	090	Y	N	Y	D	N	\$ 1,545.29	\$ 1,545.29
49250		A	090	Y	N	N	D	N	\$ 406.57	\$ 406.57
49255		A	090	Y	N	Y	D	N	\$ 545.62	\$ 545.62
49320		A	010	Y	N	Y	N	N	\$ 227.75	\$ 227.75
49321		A	010	Y	N	Y	Y	N	\$ 238.83	\$ 238.83
49322		A	010	Y	N	Y	Y	N	\$ 260.76	\$ 260.76
49323		A	090	Y	N	Y	Y	N	\$ 440.31	\$ 440.31
49324		A	010	Y	N	Y	Y	N	\$ 271.85	\$ 271.85
49325		A	010	Y	N	Y	Y	N	\$ 290.41	\$ 290.41

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
49326		A	ZZZ	N	N	Y	D	N	\$ 134.00	\$ 134.00
49327		A	ZZZ	N	N	Y	D	N	\$ 92.79	\$ 92.79
49329		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
49400		A	000	Y	N	N	N	N	\$ 62.90	\$ 99.05
49402		A	090	Y	N	N	D	N	\$ 596.96	\$ 596.96
49405		A	000	Y	N	N	N	N	\$ 133.51	\$ 581.53
49406		A	000	Y	N	N	N	N	\$ 133.51	\$ 581.77
49407		A	000	Y	N	N	N	N	\$ 142.67	\$ 487.30
49411		A	000	Y	N	D	N	N	\$ 124.60	\$ 319.81
49412		A	ZZZ	N	N	D	D	N	\$ 58.32	\$ 58.32
49418		A	000	Y	N	D	N	N	\$ 137.85	\$ 712.88
49419		A	090	Y	N	N	N	N	\$ 295.95	\$ 295.95
49421		A	000	Y	N	N	N	N	\$ 160.75	\$ 160.75
49422		A	000	Y	N	N	N	N	\$ 156.17	\$ 156.17
49423		A	000	Y	N	D	N	N	\$ 48.44	\$ 391.14
49424		A	000	Y	N	D	N	N	\$ 25.31	\$ 116.40
49425		A	090	Y	N	Y	D	N	\$ 486.58	\$ 486.58
49426		A	090	Y	N	N	N	N	\$ 466.58	\$ 466.58
49427		A	000	Y	N	D	N	N	\$ 26.99	\$ 26.99
49428		A	010	Y	N	N	N	N	\$ 301.25	\$ 301.25
49429		A	010	Y	N	N	N	N	\$ 321.25	\$ 321.25
49435		A	ZZZ	N	N	Y	D	N	\$ 84.83	\$ 84.83
49436		A	010	Y	N	Y	D	N	\$ 129.66	\$ 129.66
49440		A	010	Y	N	D	N	N	\$ 138.09	\$ 578.88
49441		A	010	Y	N	D	N	N	\$ 163.40	\$ 658.41
49442		A	010	Y	N	D	N	N	\$ 138.82	\$ 550.93
49446		A	000	Y	N	D	N	N	\$ 100.50	\$ 554.06
49450		A	000	Y	N	D	N	N	\$ 45.31	\$ 409.22
49451		A	000	Y	N	D	N	N	\$ 60.73	\$ 441.75
49452		A	000	Y	N	D	N	N	\$ 93.99	\$ 539.84
49460		A	000	Y	N	D	N	N	\$ 33.50	\$ 455.01
49465		A	000	Y	N	D	N	N	\$ 20.97	\$ 92.79
49491		A	090	Y	Y	Y	D	N	\$ 557.19	\$ 557.19
49492		A	090	Y	Y	Y	D	N	\$ 671.43	\$ 671.43
49495		A	090	Y	Y	Y	D	N	\$ 284.38	\$ 284.38
49496		A	090	Y	Y	Y	D	N	\$ 427.78	\$ 427.78
49500		A	090	Y	Y	Y	D	N	\$ 286.55	\$ 286.55
49501		A	090	Y	Y	Y	D	N	\$ 422.47	\$ 422.47
49505		A	090	Y	Y	Y	D	N	\$ 362.95	\$ 362.95
49507		A	090	Y	Y	Y	D	N	\$ 408.01	\$ 408.01
49520		A	090	Y	Y	Y	D	N	\$ 441.51	\$ 441.51
49521		A	090	Y	Y	Y	D	N	\$ 500.56	\$ 500.56

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
49525		A	090	Y	Y	Y	D	N	\$ 399.34	\$ 399.34
49540		A	090	Y	Y	Y	D	N	\$ 475.01	\$ 475.01
49550		A	090	Y	Y	Y	D	N	\$ 401.99	\$ 401.99
49553		A	090	Y	Y	Y	D	N	\$ 440.55	\$ 440.55
49555		A	090	Y	Y	Y	D	N	\$ 420.30	\$ 420.30
49557		A	090	Y	Y	Y	D	N	\$ 504.41	\$ 504.41
49560		A	090	Y	Y	Y	D	N	\$ 514.78	\$ 514.78
49561		A	090	Y	Y	Y	D	N	\$ 650.46	\$ 650.46
49565		A	090	Y	Y	Y	D	N	\$ 535.98	\$ 535.98
49566		A	090	Y	Y	Y	D	N	\$ 656.48	\$ 656.48
49568		A	ZZZ	N	N	Y	D	N	\$ 188.46	\$ 188.46
49570		A	090	Y	Y	Y	D	N	\$ 289.92	\$ 289.92
49572		A	090	Y	Y	Y	D	N	\$ 360.30	\$ 360.30
49580		A	090	Y	N	Y	D	N	\$ 230.88	\$ 230.88
49582		A	090	Y	N	Y	D	N	\$ 335.71	\$ 335.71
49585		A	090	Y	N	Y	D	N	\$ 309.44	\$ 309.44
49587		A	090	Y	N	Y	D	N	\$ 330.41	\$ 330.41
49590		A	090	Y	Y	Y	D	N	\$ 399.82	\$ 399.82
49600		A	090	Y	N	Y	D	N	\$ 512.85	\$ 512.85
49605		A	090	Y	N	Y	D	N	\$ 3,479.32	\$ 3,479.32
49606		A	090	Y	N	Y	D	N	\$ 797.23	\$ 797.23
49610		A	090	Y	N	Y	D	N	\$ 483.69	\$ 483.69
49611		A	090	Y	N	Y	D	N	\$ 425.12	\$ 425.12
49650		A	090	Y	Y	Y	D	N	\$ 298.60	\$ 298.60
49651		A	090	Y	Y	Y	D	N	\$ 389.22	\$ 389.22
49652		A	090	Y	Y	Y	D	N	\$ 519.60	\$ 519.60
49653		A	090	Y	Y	Y	D	N	\$ 650.46	\$ 650.46
49654		A	090	Y	Y	Y	D	N	\$ 590.69	\$ 590.69
49655		A	090	Y	Y	Y	D	N	\$ 723.48	\$ 723.48
49656		A	090	Y	Y	Y	D	N	\$ 641.78	\$ 641.78
49657		A	090	Y	Y	Y	D	N	\$ 925.92	\$ 925.92
49659		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
49900		A	090	Y	N	Y	D	N	\$ 564.42	\$ 564.42
49904		A	090	Y	N	N	D	D	\$ 962.07	\$ 962.07
49905		A	ZZZ	N	N	Y	Y	N	\$ 248.47	\$ 248.47
49906		Unlstd/Manual	090	Y	N	N	D	N	\$ -	\$ -
49999		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
50010		A	090	Y	Y	Y	D	N	\$ 506.82	\$ 506.82
50020		A	090	Y	N	N	D	N	\$ 690.47	\$ 690.47
50040		A	090	Y	Y	N	D	N	\$ 629.25	\$ 629.25
50045		A	090	Y	Y	Y	D	N	\$ 634.79	\$ 634.79
50060		A	090	Y	Y	Y	D	N	\$ 777.47	\$ 777.47

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
50065		A	090	Y	Y	Y	N	N	\$ 824.70	\$ 824.70
50070		A	090	Y	Y	Y	D	N	\$ 808.56	\$ 808.56
50075		A	090	Y	Y	Y	D	N	\$ 994.61	\$ 994.61
50080		A	090	Y	Y	N	N	N	\$ 592.14	\$ 592.14
50081		A	090	Y	Y	Y	D	N	\$ 871.46	\$ 871.46
50100		A	090	Y	Y	Y	D	N	\$ 756.74	\$ 756.74
50120		A	090	Y	Y	Y	D	N	\$ 646.60	\$ 646.60
50125		A	090	Y	Y	Y	D	N	\$ 669.50	\$ 669.50
50130		A	090	Y	Y	Y	D	N	\$ 703.48	\$ 703.48
50135		A	090	Y	Y	Y	D	N	\$ 764.69	\$ 764.69
50200		A	000	Y	Y	N	N	N	\$ 86.04	\$ 346.80
50205		A	090	Y	Y	Y	D	N	\$ 522.97	\$ 522.97
50220		A	090	Y	Y	Y	D	N	\$ 721.07	\$ 721.07
50225		A	090	Y	Y	Y	D	N	\$ 821.81	\$ 821.81
50230		A	090	Y	Y	Y	Y	N	\$ 876.76	\$ 876.76
50234		A	090	Y	Y	Y	D	N	\$ 891.22	\$ 891.22
50236		A	090	Y	Y	Y	D	N	\$ 1,000.63	\$ 1,000.63
50240		A	090	Y	Y	Y	D	N	\$ 904.23	\$ 904.23
50250		A	090	Y	N	Y	D	N	\$ 829.76	\$ 829.76
50280		A	090	Y	Y	Y	D	N	\$ 662.03	\$ 662.03
50290		A	090	Y	N	Y	D	N	\$ 612.38	\$ 612.38
50300		C	XXX	N	N	N	N	N	\$ -	\$ -
50320		A	090	Y	Y	Y	D	N	\$ 1,044.98	\$ 1,044.98
50323		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
50325		Not Covered	XXX	Y	N	Y	D	N	\$ -	\$ -
50327		Not Covered	XXX	Y	N	Y	D	N	\$ 153.04	\$ 153.04
50328		Not Covered	XXX	Y	N	Y	D	N	\$ 133.27	\$ 133.27
50329		Not Covered	XXX	Y	N	Y	D	N	\$ 127.25	\$ 127.25
50340		A	090	Y	Y	Y	D	N	\$ 658.89	\$ 658.89
50360		A	090	Y	N	Y	Y	Y	\$ 1,689.41	\$ 1,689.41
50365		A	090	Y	Y	Y	Y	Y	\$ 1,996.93	\$ 1,996.93
50370		A	090	Y	N	Y	D	N	\$ 838.68	\$ 838.68
50380		A	090	Y	N	Y	D	N	\$ 1,399.97	\$ 1,399.97
50382		A	000	Y	Y	N	N	N	\$ 174.24	\$ 694.56
50384		A	000	Y	Y	N	N	N	\$ 156.89	\$ 582.98
50385		A	000	Y	Y	D	N	N	\$ 148.94	\$ 691.19
50386		A	000	Y	Y	D	N	N	\$ 110.14	\$ 492.36
50387		A	000	Y	Y	D	N	N	\$ 57.12	\$ 364.87
50389		A	000	Y	Y	N	N	N	\$ 36.63	\$ 263.17
50390		A	000	Y	Y	N	N	N	\$ 65.07	\$ 65.07
50391		A	000	Y	Y	N	N	N	\$ 67.24	\$ 84.83
50396		A	000	Y	Y	D	N	N	\$ 77.60	\$ 77.60

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
50400		A	090	Y	Y	Y	D	N	\$ 787.83	\$ 787.83
50405		A	090	Y	Y	Y	D	N	\$ 952.19	\$ 952.19
50430		A	000	Y	Y	D	N	N	\$ 104.11	\$ 396.20
50431		A	000	Y	Y	N	N	N	\$ 43.62	\$ 193.28
50432		A	000	Y	Y	N	N	N	\$ 138.82	\$ 589.97
50433		A	000	Y	Y	N	N	N	\$ 173.04	\$ 748.79
50434		A	000	Y	Y	N	N	N	\$ 129.90	\$ 598.64
50435		A	000	Y	Y	N	N	N	\$ 66.52	\$ 382.95
50436		A	000	Y	Y	N	N	N	\$ 101.70	\$ 101.70
50437		A	000	Y	Y	N	N	N	\$ 169.91	\$ 169.91
50500		A	090	Y	N	Y	D	N	\$ 859.89	\$ 859.89
50520		A	090	Y	N	Y	D	N	\$ 811.21	\$ 811.21
50525		A	090	Y	N	Y	D	N	\$ 1,032.44	\$ 1,032.44
50526		A	090	Y	N	Y	N	N	\$ 1,106.67	\$ 1,106.67
50540		A	090	Y	B	Y	D	N	\$ 782.05	\$ 782.05
50541		A	090	Y	Y	Y	D	N	\$ 627.32	\$ 627.32
50542		A	090	Y	Y	Y	D	N	\$ 796.99	\$ 796.99
50543		A	090	Y	Y	Y	D	N	\$ 1,016.54	\$ 1,016.54
50544		A	090	Y	Y	Y	D	N	\$ 850.01	\$ 850.01
50545		A	090	Y	Y	Y	D	N	\$ 913.87	\$ 913.87
50546		A	090	Y	Y	Y	D	N	\$ 823.26	\$ 823.26
50547		A	090	Y	Y	Y	D	N	\$ 1,117.52	\$ 1,117.52
50548		A	090	Y	Y	Y	D	N	\$ 921.10	\$ 921.10
50549		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
50551		A	000	Y	Y	D	N	N	\$ 200.51	\$ 243.89
50553		A	000	Y	Y	N	N	N	\$ 214.49	\$ 261.24
50555		A	000	Y	Y	D	N	N	\$ 232.32	\$ 278.60
50557		A	000	Y	Y	D	N	N	\$ 235.70	\$ 283.42
50561		A	000	Y	Y	D	N	N	\$ 269.20	\$ 321.49
50562		A	090	Y	N	Y	D	N	\$ 394.52	\$ 394.52
50570		A	000	Y	Y	D	N	N	\$ 335.95	\$ 335.95
50572		A	000	Y	Y	D	N	N	\$ 363.43	\$ 363.43
50574		A	000	Y	Y	D	N	N	\$ 386.32	\$ 386.32
50575		A	000	Y	Y	N	N	N	\$ 488.51	\$ 488.51
50576		A	000	Y	Y	D	N	N	\$ 385.36	\$ 385.36
50580		A	000	Y	Y	D	N	N	\$ 415.73	\$ 415.73
50590		A	090	Y	Y	N	N	N	\$ 386.81	\$ 496.46
50592		A	010	Y	Y	N	N	N	\$ 232.57	\$ 1,975.24
50593		A	010	Y	Y	Y	N	N	\$ 310.17	\$ 2,652.21
50600		A	090	Y	Y	Y	D	N	\$ 639.61	\$ 639.61
50605		A	090	Y	Y	Y	D	N	\$ 693.36	\$ 693.36
50606		A	ZZZ	N	Y	N	N	N	\$ 102.67	\$ 373.07

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
50610		A	090	Y	Y	Y	D	N	\$ 643.95	\$ 643.95
50620		A	090	Y	Y	Y	D	N	\$ 616.24	\$ 616.24
50630		A	090	Y	Y	Y	D	N	\$ 608.53	\$ 608.53
50650		A	090	Y	Y	Y	D	N	\$ 707.58	\$ 707.58
50660		A	090	Y	N	Y	D	N	\$ 779.64	\$ 779.64
50684		A	000	Y	Y	N	N	N	\$ 33.50	\$ 80.01
50686		A	000	Y	N	D	N	N	\$ 59.29	\$ 93.51
50688		A	010	Y	N	N	N	N	\$ 51.09	\$ 51.09
50690		A	000	Y	N	N	N	N	\$ 46.27	\$ 74.95
50693		A	000	Y	Y	N	N	N	\$ 138.09	\$ 667.09
50694		A	000	Y	Y	N	N	N	\$ 180.75	\$ 745.41
50695		A	000	Y	Y	N	N	N	\$ 233.05	\$ 901.34
50700		A	090	Y	Y	Y	D	N	\$ 630.46	\$ 630.46
50705		A	ZZZ	N	Y	N	N	N	\$ 122.43	\$ 1,217.05
50706		A	ZZZ	N	Y	N	N	N	\$ 124.36	\$ 582.98
50715		A	090	Y	Y	Y	D	N	\$ 826.39	\$ 826.39
50722		A	090	Y	N	Y	D	N	\$ 706.85	\$ 706.85
50725		A	090	Y	N	Y	D	N	\$ 751.20	\$ 751.20
50727		A	090	Y	N	Y	Y	N	\$ 344.87	\$ 344.87
50728		A	090	Y	N	Y	Y	N	\$ 501.28	\$ 501.28
50740		A	090	Y	Y	Y	D	N	\$ 857.96	\$ 857.96
50750		A	090	Y	Y	Y	N	N	\$ 786.38	\$ 786.38
50760		A	090	Y	Y	Y	D	N	\$ 782.05	\$ 782.05
50770		A	090	Y	N	Y	D	N	\$ 786.38	\$ 786.38
50780		A	090	Y	Y	Y	D	N	\$ 760.11	\$ 760.11
50782		A	090	Y	Y	Y	Y	N	\$ 732.64	\$ 732.64
50783		A	090	Y	Y	Y	Y	N	\$ 768.55	\$ 768.55
50785		A	090	Y	Y	Y	D	N	\$ 829.04	\$ 829.04
50800		A	090	Y	Y	Y	D	N	\$ 629.49	\$ 629.49
50810		A	090	Y	N	Y	D	N	\$ 981.83	\$ 981.83
50815		A	090	Y	Y	Y	D	N	\$ 834.10	\$ 834.10
50820		A	090	Y	Y	Y	D	N	\$ 897.24	\$ 897.24
50825		A	090	Y	N	Y	D	N	\$ 1,132.46	\$ 1,132.46
50830		A	090	Y	N	Y	D	N	\$ 1,231.27	\$ 1,231.27
50840		A	090	Y	Y	Y	D	N	\$ 838.92	\$ 838.92
50845		A	090	Y	N	Y	D	N	\$ 852.66	\$ 852.66
50860		A	090	Y	Y	Y	D	N	\$ 643.71	\$ 643.71
50900		A	090	Y	Y	Y	D	N	\$ 573.34	\$ 573.34
50920		A	090	Y	N	Y	D	N	\$ 600.09	\$ 600.09
50930		A	090	Y	N	Y	D	N	\$ 750.96	\$ 750.96
50940		A	090	Y	Y	Y	D	N	\$ 604.43	\$ 604.43
50945		A	090	Y	Y	Y	D	N	\$ 662.99	\$ 662.99

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
50947		A	090	Y	Y	Y	D	N	\$ 947.37	\$ 947.37
50948		A	090	Y	Y	Y	D	N	\$ 874.59	\$ 874.59
50949		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
50951		A	000	Y	Y	D	N	N	\$ 209.43	\$ 255.94
50953		A	000	Y	Y	D	N	N	\$ 222.44	\$ 270.40
50955		A	000	Y	Y	D	N	N	\$ 239.80	\$ 288.24
50957		A	000	Y	Y	D	N	N	\$ 241.24	\$ 291.13
50961		A	000	Y	Y	D	N	N	\$ 216.18	\$ 262.69
50970		A	000	Y	Y	D	N	N	\$ 252.81	\$ 252.81
50972		A	000	Y	Y	D	N	N	\$ 243.89	\$ 243.89
50974		A	000	Y	Y	D	N	N	\$ 322.70	\$ 322.70
50976		A	000	Y	Y	D	N	N	\$ 318.12	\$ 318.12
50980		A	000	Y	Y	D	N	N	\$ 242.69	\$ 242.69
51020		A	090	Y	N	Y	D	N	\$ 317.64	\$ 317.64
51030		A	090	Y	N	D	N	N	\$ 320.05	\$ 320.05
51040		A	090	Y	N	Y	D	N	\$ 195.21	\$ 195.21
51045		A	090	Y	N	Y	N	N	\$ 342.70	\$ 342.70
51050		A	090	Y	N	Y	D	N	\$ 320.05	\$ 320.05
51060		A	090	Y	N	Y	D	N	\$ 395.00	\$ 395.00
51065		A	090	Y	N	D	N	N	\$ 393.55	\$ 393.55
51080		A	090	Y	N	Y	D	N	\$ 275.95	\$ 275.95
51100		A	000	Y	N	N	N	N	\$ 26.75	\$ 48.68
51101		A	000	Y	N	N	N	N	\$ 35.67	\$ 98.81
51102		A	000	Y	N	N	N	N	\$ 98.81	\$ 160.27
51500		A	090	Y	N	Y	D	N	\$ 432.84	\$ 432.84
51520		A	090	Y	N	Y	D	N	\$ 403.92	\$ 403.92
51525		A	090	Y	N	Y	D	N	\$ 586.11	\$ 586.11
51530		A	090	Y	N	Y	D	N	\$ 524.18	\$ 524.18
51535		A	090	Y	Y	Y	D	N	\$ 531.16	\$ 531.16
51550		A	090	Y	N	Y	D	N	\$ 657.45	\$ 657.45
51555		A	090	Y	N	Y	D	N	\$ 863.50	\$ 863.50
51565		A	090	Y	N	Y	D	N	\$ 878.93	\$ 878.93
51570		A	090	Y	N	Y	D	N	\$ 1,004.25	\$ 1,004.25
51575		A	090	Y	B	Y	D	N	\$ 1,244.28	\$ 1,244.28
51580		A	090	Y	N	Y	D	N	\$ 1,295.38	\$ 1,295.38
51585		A	090	Y	B	Y	D	N	\$ 1,441.90	\$ 1,441.90
51590		A	090	Y	N	Y	D	N	\$ 1,322.61	\$ 1,322.61
51595		A	090	Y	B	Y	D	N	\$ 1,495.65	\$ 1,495.65
51596		A	090	Y	N	Y	D	N	\$ 1,610.36	\$ 1,610.36
51597		A	090	Y	N	Y	D	N	\$ 1,567.95	\$ 1,567.95
51600		A	000	Y	N	N	N	N	\$ 30.37	\$ 137.61
51605		A	000	Y	N	N	N	N	\$ 26.03	\$ 26.03

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
51610		A	000	Y	N	N	N	N	\$ 42.66	\$ 82.18
51700		A	000	Y	N	N	N	N	\$ 21.45	\$ 50.85
51701		A	000	Y	N	N	N	N	\$ 17.35	\$ 29.88
51702		A	000	Y	N	N	N	N	\$ 17.11	\$ 40.73
51703		A	000	Y	N	N	N	N	\$ 52.30	\$ 96.64
51705		A	000	Y	N	N	N	N	\$ 34.95	\$ 63.14
51710		A	000	Y	N	N	N	N	\$ 53.50	\$ 88.69
51715		A	000	Y	N	D	N	N	\$ 137.13	\$ 240.04
51720		A	000	Y	N	N	N	N	\$ 30.13	\$ 57.84
51725	26	A	000	Y	N	D	N	N	\$ 52.06	\$ 52.06
51725	TC	A	000	Y	N	D	N	N	\$ 93.03	\$ 93.03
51725		A	000	Y	N	D	N	N	\$ 145.32	\$ 145.32
51726	26	A	000	Y	N	N	N	N	\$ 57.84	\$ 57.84
51726	TC	A	000	Y	N	N	N	N	\$ 135.68	\$ 135.68
51726		A	000	Y	N	N	N	N	\$ 193.76	\$ 193.76
51727	26	A	000	Y	N	D	N	N	\$ 72.54	\$ 72.54
51727	TC	A	000	Y	N	D	N	N	\$ 160.75	\$ 160.75
51727		A	000	Y	N	D	N	N	\$ 233.29	\$ 233.29
51728	26	A	000	Y	N	D	N	N	\$ 70.85	\$ 70.85
51728	TC	A	000	Y	N	D	N	N	\$ 164.36	\$ 164.36
51728		A	000	Y	N	D	N	N	\$ 235.22	\$ 235.22
51729	26	A	000	Y	N	D	N	N	\$ 86.52	\$ 86.52
51729	TC	A	000	Y	N	D	N	N	\$ 164.36	\$ 164.36
51729		A	000	Y	N	D	N	N	\$ 250.88	\$ 250.88
51736	26	A	XXX	Y	N	D	N	N	\$ 5.54	\$ 5.54
51736	TC	A	XXX	Y	N	D	N	N	\$ 3.13	\$ 3.13
51736		A	XXX	Y	N	D	N	N	\$ 8.68	\$ 8.68
51741	26	A	XXX	Y	N	N	N	N	\$ 5.78	\$ 5.78
51741	TC	A	XXX	Y	N	N	N	N	\$ 3.37	\$ 3.37
51741		A	XXX	Y	N	N	N	N	\$ 9.40	\$ 9.40
51784	26	A	XXX	Y	N	N	N	N	\$ 25.31	\$ 25.31
51784	TC	A	XXX	Y	N	N	N	N	\$ 17.59	\$ 17.59
51784		A	XXX	Y	N	N	N	N	\$ 42.90	\$ 42.90
51785	26	A	XXX	Y	N	D	N	N	\$ 65.31	\$ 65.31
51785	TC	A	XXX	Y	N	D	N	N	\$ 209.43	\$ 209.43
51785		A	XXX	Y	N	D	N	N	\$ 274.98	\$ 274.98
51792	26	A	000	Y	N	D	N	N	\$ 37.11	\$ 37.11
51792	TC	A	000	Y	N	D	N	N	\$ 131.35	\$ 131.35
51792		A	000	Y	N	D	N	N	\$ 168.70	\$ 168.70
51797	26	A	ZZZ	N	N	D	N	N	\$ 26.75	\$ 26.75
51797	TC	A	ZZZ	N	N	D	N	N	\$ 90.62	\$ 90.62
51797		A	ZZZ	N	N	D	N	N	\$ 117.37	\$ 117.37

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
51798		A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
51800		A	090	Y	N	Y	D	N	\$ 711.19	\$ 711.19
51820		A	090	Y	B	Y	D	N	\$ 739.15	\$ 739.15
51840		A	090	Y	N	Y	D	N	\$ 469.95	\$ 469.95
51841		A	090	Y	N	Y	D	N	\$ 544.18	\$ 544.18
51845		A	090	Y	N	Y	D	N	\$ 395.96	\$ 395.96
51860		A	090	Y	N	Y	D	N	\$ 509.23	\$ 509.23
51865		A	090	Y	N	Y	D	N	\$ 614.07	\$ 614.07
51880		A	090	Y	N	Y	D	N	\$ 317.40	\$ 317.40
51900		A	090	Y	N	Y	D	N	\$ 560.33	\$ 560.33
51920		A	090	Y	N	Y	D	N	\$ 519.11	\$ 519.11
51925		A	090	Y	N	Y	D	N	\$ 737.46	\$ 737.46
51940		A	090	Y	N	Y	D	N	\$ 1,121.37	\$ 1,121.37
51960		A	090	Y	N	Y	D	N	\$ 944.00	\$ 944.00
51980		A	090	Y	N	Y	D	N	\$ 485.62	\$ 485.62
51990		A	090	Y	N	Y	D	N	\$ 508.51	\$ 508.51
51992		A	090	Y	N	Y	D	N	\$ 575.03	\$ 575.03
51999		Unlstd/Manual	YYY	N	N	D	D	D	\$ -	\$ -
52000		A	000	Y	N	N	N	N	\$ 54.71	\$ 149.42
52001		A	000	Y	N	N	N	N	\$ 195.93	\$ 288.96
52005		A	000	Y	N	N	N	N	\$ 89.65	\$ 198.34
52007		A	000	Y	Y	N	N	N	\$ 112.55	\$ 306.55
52010		A	000	Y	N	N	N	N	\$ 112.07	\$ 258.35
52204		A	000	Y	N	N	N	N	\$ 95.92	\$ 253.05
52214		A	000	Y	N	N	N	N	\$ 121.22	\$ 490.44
52224		A	000	Y	N	N	N	N	\$ 139.54	\$ 512.13
52234		A	000	Y	N	N	N	N	\$ 167.01	\$ 167.01
52235		A	000	Y	N	N	N	N	\$ 196.66	\$ 196.66
52240		A	000	Y	N	N	N	N	\$ 267.27	\$ 267.27
52250		A	000	Y	N	N	N	N	\$ 162.68	\$ 162.68
52260		A	000	Y	N	N	N	N	\$ 143.40	\$ 143.40
52265		A	000	Y	N	N	N	N	\$ 110.86	\$ 251.36
52270		A	000	Y	N	N	N	N	\$ 124.12	\$ 275.22
52275		A	000	Y	N	N	N	N	\$ 168.94	\$ 356.92
52276		A	000	Y	N	N	N	N	\$ 180.27	\$ 180.27
52277		A	000	Y	N	D	N	N	\$ 220.27	\$ 220.27
52281		A	000	Y	N	N	N	N	\$ 102.91	\$ 215.94
52282		A	000	Y	N	N	N	N	\$ 228.71	\$ 228.71
52283		A	000	Y	N	N	N	N	\$ 137.37	\$ 228.95
52285		A	000	Y	N	N	N	N	\$ 133.51	\$ 226.54
52287		A	000	Y	N	N	N	N	\$ 115.68	\$ 250.16
52290		A	000	Y	B	N	N	N	\$ 165.81	\$ 165.81

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
52300		A	000	Y	B	D	N	N	\$ 191.11	\$ 191.11
52301		A	000	Y	B	D	N	N	\$ 197.86	\$ 197.86
52305		A	000	Y	N	N	N	N	\$ 189.91	\$ 189.91
52310		A	000	Y	N	N	N	N	\$ 102.91	\$ 202.44
52315		A	000	Y	N	N	N	N	\$ 187.50	\$ 313.30
52317		A	000	Y	N	N	N	N	\$ 236.90	\$ 586.84
52318		A	000	Y	N	N	N	N	\$ 323.90	\$ 323.90
52320		A	000	Y	Y	N	N	N	\$ 167.98	\$ 167.98
52325		A	000	Y	Y	N	N	N	\$ 218.59	\$ 218.59
52327		A	000	Y	Y	N	N	N	\$ 180.99	\$ 180.99
52330		A	000	Y	Y	N	N	N	\$ 179.79	\$ 396.20
52332		A	000	Y	Y	N	N	N	\$ 105.56	\$ 283.18
52334		A	000	Y	N	N	N	N	\$ 124.36	\$ 124.36
52341		A	000	Y	Y	N	N	N	\$ 193.28	\$ 193.28
52342		A	000	Y	Y	N	N	N	\$ 210.39	\$ 210.39
52343		A	000	Y	Y	N	N	N	\$ 234.01	\$ 234.01
52344		A	000	Y	Y	N	N	N	\$ 251.36	\$ 251.36
52345		A	000	Y	Y	D	N	N	\$ 268.72	\$ 268.72
52346		A	000	Y	Y	D	N	N	\$ 304.62	\$ 304.62
52351		A	000	Y	N	N	N	N	\$ 206.06	\$ 206.06
52352		A	000	Y	Y	N	N	N	\$ 241.00	\$ 241.00
52353		A	000	Y	Y	N	N	N	\$ 267.27	\$ 267.27
52354		A	000	Y	Y	N	N	N	\$ 284.62	\$ 284.62
52355		A	000	Y	Y	N	N	N	\$ 318.60	\$ 318.60
52356		A	000	Y	Y	N	N	N	\$ 283.90	\$ 283.90
52400		A	090	Y	N	N	N	N	\$ 325.11	\$ 325.11
52402		A	000	Y	N	N	N	N	\$ 182.92	\$ 182.92
52441		A	000	Y	N	N	N	N	\$ 143.15	\$ 866.88
52442		A	ZZZ	N	N	N	N	N	\$ 35.43	\$ 609.73
52450		A	090	Y	N	N	N	N	\$ 319.33	\$ 319.33
52500		A	090	Y	N	N	N	N	\$ 331.86	\$ 331.86
52601		A	090	Y	N	N	N	N	\$ 496.46	\$ 496.46
52630		A	090	Y	N	N	N	N	\$ 271.85	\$ 271.85
52640		A	090	Y	N	N	N	N	\$ 213.29	\$ 213.29
52647		A	090	Y	N	N	N	N	\$ 441.51	\$ 1,058.47
52648		A	090	Y	N	N	N	N	\$ 470.19	\$ 1,093.18
52649		A	090	Y	N	D	N	N	\$ 561.53	\$ 561.53
52700		A	090	Y	N	D	N	N	\$ 298.84	\$ 298.84
53000		A	010	Y	N	N	N	N	\$ 99.53	\$ 99.53
53010		A	090	Y	N	N	N	N	\$ 197.86	\$ 197.86
53020		A	000	Y	N	N	N	N	\$ 65.79	\$ 65.79
53025		A	000	Y	N	D	N	N	\$ 45.79	\$ 45.79

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
53040		A	090	Y	N	D	N	N	\$ 265.34	\$ 265.34
53060		A	010	Y	N	N	N	N	\$ 113.51	\$ 127.97
53080		A	090	Y	N	N	N	N	\$ 283.90	\$ 283.90
53085		A	090	Y	N	Y	D	N	\$ 441.03	\$ 441.03
53200		A	000	Y	N	N	N	N	\$ 96.64	\$ 106.76
53210		A	090	Y	N	Y	D	N	\$ 524.18	\$ 524.18
53215		A	090	Y	N	Y	D	N	\$ 631.66	\$ 631.66
53220		A	090	Y	N	D	N	N	\$ 305.83	\$ 305.83
53230		A	090	Y	N	Y	D	N	\$ 414.76	\$ 414.76
53235		A	090	Y	N	Y	D	N	\$ 430.19	\$ 430.19
53240		A	090	Y	N	N	N	N	\$ 287.03	\$ 287.03
53250		A	090	Y	N	N	N	N	\$ 267.27	\$ 267.27
53260		A	010	Y	N	N	N	N	\$ 123.39	\$ 139.54
53265		A	010	Y	N	N	N	N	\$ 128.45	\$ 153.76
53270		A	010	Y	N	N	N	N	\$ 124.60	\$ 141.47
53275		A	010	Y	N	N	N	N	\$ 178.82	\$ 178.82
53400		A	090	Y	N	Y	D	N	\$ 543.94	\$ 543.94
53405		A	090	Y	N	Y	D	N	\$ 595.03	\$ 595.03
53410		A	090	Y	N	Y	D	N	\$ 668.05	\$ 668.05
53415		A	090	Y	N	Y	D	N	\$ 771.68	\$ 771.68
53420		A	090	Y	N	N	D	N	\$ 573.82	\$ 573.82
53425		A	090	Y	N	Y	D	N	\$ 638.89	\$ 638.89
53430		A	090	Y	N	Y	D	N	\$ 666.12	\$ 666.12
53431		A	090	Y	N	Y	D	N	\$ 786.62	\$ 786.62
53440		A	090	Y	N	Y	D	N	\$ 512.85	\$ 512.85
53442		A	090	Y	N	Y	N	N	\$ 532.37	\$ 532.37
53444		A	090	Y	N	Y	D	N	\$ 540.08	\$ 540.08
53445		A	090	Y	N	Y	D	N	\$ 512.85	\$ 512.85
53446		A	090	Y	N	Y	D	N	\$ 435.97	\$ 435.97
53447		A	090	Y	N	Y	D	N	\$ 549.00	\$ 549.00
53448		A	090	Y	N	Y	D	N	\$ 871.22	\$ 871.22
53449		A	090	Y	N	Y	D	N	\$ 416.69	\$ 416.69
53450		A	090	Y	N	N	N	N	\$ 276.43	\$ 276.43
53460		A	090	Y	N	D	N	N	\$ 310.41	\$ 310.41
53500		A	090	Y	N	Y	D	N	\$ 512.37	\$ 512.37
53502		A	090	Y	N	N	N	N	\$ 329.45	\$ 329.45
53505		A	090	Y	N	Y	N	N	\$ 329.21	\$ 329.21
53510		A	090	Y	N	Y	D	N	\$ 429.46	\$ 429.46
53515		A	090	Y	N	Y	D	N	\$ 541.53	\$ 541.53
53520		A	090	Y	N	N	N	N	\$ 378.61	\$ 378.61
53600		A	000	Y	N	N	N	N	\$ 43.62	\$ 58.80
53601		A	000	Y	N	N	N	N	\$ 36.87	\$ 56.15

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
53605		A	000	Y	N	N	N	N	\$ 44.34	\$ 44.34
53620		A	000	Y	N	N	N	N	\$ 59.53	\$ 107.00
53621		A	000	Y	N	N	N	N	\$ 48.92	\$ 100.74
53660		A	000	Y	N	N	N	N	\$ 28.20	\$ 48.92
53661		A	000	Y	N	N	N	N	\$ 27.47	\$ 48.44
53665		A	000	Y	N	N	N	N	\$ 26.51	\$ 26.51
53850		A	090	Y	N	N	N	N	\$ 237.14	\$ 979.91
53852		A	090	Y	N	N	N	N	\$ 254.26	\$ 954.84
53854		Not Covered	090	Y	N	N	N	N	\$ 254.50	\$ 1,144.99
53855		Not Covered	000	Y	N	D	N	N	\$ 56.64	\$ 459.35
53860		Not Covered	090	Y	N	D	N	N	\$ 151.11	\$ 1,487.21
53899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
54000		A	010	Y	N	D	N	N	\$ 73.51	\$ 105.80
54001		A	010	Y	N	N	N	N	\$ 94.23	\$ 129.90
54015		A	010	Y	N	D	N	N	\$ 207.74	\$ 207.74
54050		A	010	Y	N	N	N	N	\$ 69.17	\$ 90.86
54055		A	010	Y	N	N	N	N	\$ 62.66	\$ 86.76
54056		A	010	Y	N	N	N	N	\$ 71.34	\$ 92.30
54057		A	010	Y	N	N	N	N	\$ 63.62	\$ 91.58
54060		A	010	Y	N	N	N	N	\$ 87.24	\$ 127.01
54065		A	010	Y	N	N	N	N	\$ 112.79	\$ 145.32
54100		A	000	Y	N	N	N	N	\$ 80.98	\$ 132.07
54105		A	010	Y	N	N	N	N	\$ 144.36	\$ 183.88
54110		A	090	Y	N	Y	N	N	\$ 425.37	\$ 425.37
54111		A	090	Y	N	Y	D	N	\$ 544.66	\$ 544.66
54112		A	090	Y	N	Y	D	N	\$ 638.17	\$ 638.17
54115		A	090	Y	N	Y	N	N	\$ 287.27	\$ 306.07
54120		A	090	Y	N	Y	D	N	\$ 428.98	\$ 428.98
54125		A	090	Y	N	Y	D	N	\$ 556.23	\$ 556.23
54130		A	090	Y	B	Y	D	N	\$ 814.10	\$ 814.10
54135		A	090	Y	B	Y	N	N	\$ 1,032.44	\$ 1,032.44
54150		A	000	Y	N	D	N	N	\$ 67.24	\$ 101.46
54160		A	010	Y	N	N	N	N	\$ 98.57	\$ 146.77
54161		A	010	Y	N	N	N	N	\$ 133.51	\$ 133.51
54162		A	010	Y	N	N	N	N	\$ 135.20	\$ 173.28
54163		A	010	Y	N	N	N	N	\$ 146.05	\$ 146.05
54164		A	010	Y	N	N	N	N	\$ 128.69	\$ 128.69
54200		A	010	Y	N	N	N	N	\$ 56.39	\$ 74.23
54205		A	090	Y	N	Y	N	N	\$ 360.30	\$ 360.30
54220		A	000	Y	N	N	N	N	\$ 91.58	\$ 144.84
54230		A	000	Y	N	N	N	N	\$ 53.26	\$ 68.44
54231		A	000	Y	N	N	N	N	\$ 78.33	\$ 94.47

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
54235		A	000	Y	N	N	N	N	\$ 49.16	\$ 58.80
54240	26	A	000	N	N	D	N	N	\$ 45.07	\$ 45.07
54240	TC	A	000	N	N	D	N	N	\$ 23.62	\$ 23.62
54240		A	000	N	N	D	N	N	\$ 68.69	\$ 68.69
54250	26	A	000	N	N	D	N	N	\$ 73.99	\$ 73.99
54250	TC	A	000	N	N	D	N	N	\$ 8.19	\$ 8.19
54250		A	000	N	N	D	N	N	\$ 82.42	\$ 82.42
54300		A	090	Y	N	Y	D	N	\$ 439.34	\$ 439.34
54304		A	090	Y	N	Y	N	N	\$ 509.23	\$ 509.23
54308		A	090	Y	N	Y	D	N	\$ 487.30	\$ 487.30
54312		A	090	Y	N	Y	D	N	\$ 556.71	\$ 556.71
54316		A	090	Y	N	Y	D	N	\$ 678.66	\$ 678.66
54318		A	090	Y	N	Y	D	N	\$ 483.93	\$ 483.93
54322		A	090	Y	N	Y	N	N	\$ 532.61	\$ 532.61
54324		A	090	Y	N	Y	D	N	\$ 659.86	\$ 659.86
54326		A	090	Y	N	Y	D	N	\$ 642.27	\$ 642.27
54328		A	090	Y	N	Y	D	N	\$ 638.17	\$ 638.17
54332		A	090	Y	N	Y	D	N	\$ 689.50	\$ 689.50
54336		A	090	Y	N	Y	D	N	\$ 810.97	\$ 810.97
54340		A	090	Y	N	Y	D	N	\$ 386.56	\$ 386.56
54344		A	090	Y	N	Y	D	N	\$ 643.47	\$ 643.47
54348		A	090	Y	N	Y	D	N	\$ 689.50	\$ 689.50
54352		A	090	Y	N	Y	D	N	\$ 966.41	\$ 966.41
54360		A	090	Y	N	Y	D	N	\$ 490.92	\$ 490.92
54380		A	090	Y	N	Y	D	N	\$ 543.94	\$ 543.94
54385		A	090	Y	N	Y	D	N	\$ 633.35	\$ 633.35
54390		A	090	Y	N	Y	D	N	\$ 847.12	\$ 847.12
54400		A	090	Y	N	N	D	N	\$ 360.78	\$ 360.78
54401		A	090	Y	N	N	D	N	\$ 444.65	\$ 444.65
54405		A	090	Y	N	Y	D	N	\$ 550.93	\$ 550.93
54406		A	090	Y	N	Y	D	N	\$ 497.67	\$ 497.67
54408		A	090	Y	N	Y	D	N	\$ 537.91	\$ 537.91
54410		A	090	Y	N	Y	D	N	\$ 586.59	\$ 586.59
54411		A	090	Y	N	Y	D	N	\$ 703.96	\$ 703.96
54415		A	090	Y	N	Y	D	N	\$ 359.09	\$ 359.09
54416		A	090	Y	N	Y	D	N	\$ 484.41	\$ 484.41
54417		A	090	Y	N	Y	D	N	\$ 611.90	\$ 611.90
54420		A	090	Y	N	Y	N	N	\$ 479.11	\$ 479.11
54430		A	090	Y	B	Y	N	N	\$ 434.04	\$ 434.04
54435		A	090	Y	N	N	N	N	\$ 279.80	\$ 279.80
54437		A	090	Y	N	Y	D	N	\$ 459.11	\$ 459.11
54438		A	090	Y	N	Y	D	N	\$ 911.70	\$ 911.70

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
54440		C	090	Y	N	Y	D	N	\$ -	\$ -
54450		A	000	Y	N	N	N	N	\$ 39.52	\$ 46.27
54500		A	000	Y	Y	D	N	N	\$ 50.13	\$ 50.13
54505		A	010	Y	Y	D	N	N	\$ 142.19	\$ 142.19
54512		A	090	Y	Y	N	D	N	\$ 367.53	\$ 367.53
54520		A	090	Y	Y	N	N	N	\$ 221.96	\$ 221.96
54522		A	090	Y	Y	Y	D	N	\$ 400.06	\$ 400.06
54530		A	090	Y	Y	Y	D	N	\$ 344.39	\$ 344.39
54535		A	090	Y	Y	Y	N	N	\$ 506.34	\$ 506.34
54550		A	090	Y	Y	Y	N	N	\$ 333.79	\$ 333.79
54560		A	090	Y	Y	Y	D	N	\$ 468.26	\$ 468.26
54600		A	090	Y	Y	N	N	N	\$ 306.55	\$ 306.55
54620		A	010	Y	Y	N	N	N	\$ 203.40	\$ 203.40
54640		A	090	Y	Y	D	N	N	\$ 296.67	\$ 296.67
54650		A	090	Y	Y	Y	N	N	\$ 484.17	\$ 484.17
54660		A	090	Y	Y	D	N	N	\$ 241.00	\$ 241.00
54670		A	090	Y	Y	D	N	N	\$ 275.46	\$ 275.46
54680		A	090	Y	Y	Y	D	N	\$ 536.47	\$ 536.47
54690		A	090	Y	Y	Y	D	N	\$ 447.06	\$ 447.06
54692		A	090	Y	Y	N	N	N	\$ 516.22	\$ 516.22
54699		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
54700		A	010	Y	Y	N	N	N	\$ 144.60	\$ 144.60
54800		A	000	Y	Y	D	N	N	\$ 85.07	\$ 85.07
54830		A	090	Y	Y	D	N	N	\$ 251.36	\$ 251.36
54840		A	090	Y	Y	N	N	N	\$ 218.11	\$ 218.11
54860		A	090	Y	N	N	N	N	\$ 283.42	\$ 283.42
54861		A	090	Y	N	D	N	N	\$ 385.36	\$ 385.36
54865		A	090	Y	N	D	N	N	\$ 242.21	\$ 242.21
54900		A	090	Y	N	D	N	N	\$ 544.66	\$ 544.66
54901		A	090	Y	B	D	N	N	\$ 721.80	\$ 721.80
55000		A	000	Y	Y	N	N	N	\$ 56.88	\$ 79.29
55040		A	090	Y	N	N	N	N	\$ 228.71	\$ 228.71
55041		A	090	Y	B	N	N	N	\$ 346.80	\$ 346.80
55060		A	090	Y	Y	D	N	N	\$ 257.15	\$ 257.15
55100		A	010	Y	N	N	N	N	\$ 112.07	\$ 151.11
55110		A	090	Y	N	N	N	N	\$ 262.21	\$ 262.21
55120		A	090	Y	N	D	N	N	\$ 238.83	\$ 238.83
55150		A	090	Y	N	Y	D	N	\$ 333.79	\$ 333.79
55175		A	090	Y	N	D	N	N	\$ 246.30	\$ 246.30
55180		A	090	Y	N	D	N	N	\$ 470.43	\$ 470.43
55200		A	090	Y	B	D	N	N	\$ 187.02	\$ 265.10
55250		A	090	Y	B	N	N	N	\$ 152.55	\$ 230.16

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
55300		A	000	Y	B	D	N	N	\$ 127.73	\$ 127.73
55400		Not Covered	090	Y	Y	Y	D	N	\$ 339.57	\$ 339.57
55500		A	090	Y	Y	D	N	N	\$ 267.27	\$ 267.27
55520		A	090	Y	Y	Y	D	N	\$ 315.23	\$ 315.23
55530		A	090	Y	Y	N	D	N	\$ 238.11	\$ 238.11
55535		A	090	Y	Y	Y	D	N	\$ 291.13	\$ 291.13
55540		A	090	Y	Y	N	D	N	\$ 384.64	\$ 384.64
55550		A	090	Y	Y	Y	D	N	\$ 290.41	\$ 290.41
55559		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
55600		A	090	Y	Y	D	N	N	\$ 285.34	\$ 285.34
55605		A	090	Y	Y	D	N	N	\$ 354.51	\$ 354.51
55650		A	090	Y	Y	Y	D	N	\$ 488.99	\$ 488.99
55680		A	090	Y	Y	D	N	N	\$ 234.49	\$ 234.49
55700		A	000	Y	N	N	N	N	\$ 89.17	\$ 162.92
55705		A	010	Y	N	N	D	N	\$ 180.03	\$ 180.03
55706		A	010	Y	N	Y	D	N	\$ 253.29	\$ 253.29
55720		A	090	Y	N	Y	D	N	\$ 307.28	\$ 307.28
55725		A	090	Y	N	Y	D	N	\$ 402.95	\$ 402.95
55801		A	090	Y	N	Y	D	N	\$ 746.14	\$ 746.14
55810		A	090	Y	N	Y	D	N	\$ 894.11	\$ 894.11
55812		A	090	Y	N	Y	D	N	\$ 1,097.76	\$ 1,097.76
55815		A	090	Y	B	Y	D	N	\$ 1,203.55	\$ 1,203.55
55821		A	090	Y	N	Y	D	N	\$ 595.51	\$ 595.51
55831		A	090	Y	N	Y	D	N	\$ 644.68	\$ 644.68
55840		A	090	Y	N	Y	D	N	\$ 797.71	\$ 797.71
55842		A	090	Y	N	Y	D	N	\$ 799.40	\$ 799.40
55845		A	090	Y	B	Y	D	N	\$ 929.30	\$ 929.30
55860		A	090	Y	N	N	D	N	\$ 596.96	\$ 596.96
55862		A	090	Y	N	Y	D	N	\$ 747.10	\$ 747.10
55865		A	090	Y	B	Y	D	N	\$ 910.74	\$ 910.74
55866		A	090	Y	N	Y	D	N	\$ 984.49	\$ 984.49
55870		Not Covered	000	Y	N	N	D	N	\$ 96.40	\$ 116.89
55873		A	090	Y	N	N	N	N	\$ 520.08	\$ 3,919.62
55874		Not Covered	000	Y	N	N	D	D	\$ 111.10	\$ 1,944.87
55875		A	090	Y	N	D	N	N	\$ 523.45	\$ 523.45
55876		A	000	Y	N	N	D	D	\$ 67.72	\$ 97.85
55880		Not Covered	090	Y	N	N	N	N	\$ 668.53	\$ 668.53
55899		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
55920		A	000	Y	N	D	N	N	\$ 308.48	\$ 308.48
55970		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
55980		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
56405		A	010	Y	N	N	Y	N	\$ 83.15	\$ 93.51

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
56420		A	010	Y	N	N	N	N	\$ 73.26	\$ 114.48
56440		A	010	Y	N	N	N	N	\$ 123.87	\$ 123.87
56441		A	010	Y	N	D	N	N	\$ 101.94	\$ 117.85
56442		A	000	Y	N	D	N	N	\$ 31.57	\$ 31.57
56501		A	010	Y	N	N	N	N	\$ 86.28	\$ 119.05
56515		A	010	Y	N	N	N	N	\$ 142.43	\$ 178.82
56605		A	000	Y	N	N	Y	N	\$ 40.97	\$ 62.66
56606		A	ZZZ	N	N	N	Y	N	\$ 20.49	\$ 26.27
56620		A	090	Y	N	Y	D	N	\$ 385.84	\$ 385.84
56625		A	090	Y	N	Y	D	N	\$ 448.02	\$ 448.02
56630		A	090	Y	N	Y	D	N	\$ 650.46	\$ 650.46
56631		A	090	Y	N	Y	Y	N	\$ 806.39	\$ 806.39
56632		A	090	Y	B	Y	Y	N	\$ 967.13	\$ 967.13
56633		A	090	Y	N	Y	Y	N	\$ 836.99	\$ 836.99
56634		A	090	Y	N	Y	Y	N	\$ 880.61	\$ 880.61
56637		A	090	Y	N	Y	Y	N	\$ 1,025.94	\$ 1,025.94
56640		A	090	Y	Y	Y	D	N	\$ 1,040.40	\$ 1,040.40
56700		A	010	Y	N	Y	D	N	\$ 136.17	\$ 136.17
56740		A	010	Y	Y	N	N	N	\$ 214.01	\$ 214.01
56800		A	010	Y	N	Y	D	N	\$ 171.35	\$ 171.35
56805		A	090	Y	N	Y	D	N	\$ 804.46	\$ 804.46
56810		A	010	Y	N	Y	Y	N	\$ 184.12	\$ 184.12
56820		A	000	Y	N	N	N	N	\$ 58.08	\$ 81.94
56821		A	000	Y	N	N	N	N	\$ 78.33	\$ 110.14
57000		A	010	Y	N	D	N	N	\$ 136.17	\$ 136.17
57010		A	090	Y	N	D	N	N	\$ 310.41	\$ 310.41
57020		A	000	Y	N	D	N	N	\$ 55.91	\$ 80.98
57022		A	010	Y	N	D	N	N	\$ 122.91	\$ 122.91
57023		A	010	Y	N	D	N	N	\$ 218.83	\$ 218.83
57061		A	010	Y	N	N	N	N	\$ 74.47	\$ 103.39
57065		A	010	Y	N	N	N	N	\$ 125.32	\$ 159.06
57100		A	000	Y	N	N	N	N	\$ 45.55	\$ 67.48
57105		A	010	Y	N	N	N	N	\$ 95.20	\$ 112.79
57106		A	090	Y	N	Y	D	N	\$ 358.37	\$ 358.37
57107		A	090	Y	N	Y	D	N	\$ 992.68	\$ 992.68
57109		A	090	Y	B	Y	D	N	\$ 1,181.14	\$ 1,181.14
57110		A	090	Y	N	Y	D	N	\$ 624.67	\$ 624.67
57111		A	090	Y	B	Y	D	N	\$ 1,181.14	\$ 1,181.14
57120		A	090	Y	N	Y	D	N	\$ 361.02	\$ 361.02
57130		A	010	Y	N	Y	D	N	\$ 116.16	\$ 148.22
57135		A	010	Y	N	N	N	N	\$ 126.28	\$ 159.54
57150		A	000	Y	N	N	N	N	\$ 18.56	\$ 38.08

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
57155		A	000	Y	N	N	Y	N	\$ 191.35	\$ 256.67
57156		A	000	Y	N	D	N	N	\$ 100.98	\$ 146.05
57160		A	000	Y	N	N	N	N	\$ 32.54	\$ 48.44
57170		A	000	Y	N	D	N	N	\$ 33.50	\$ 50.61
57180		A	010	Y	N	N	N	N	\$ 80.74	\$ 125.56
57200		A	090	Y	N	Y	D	N	\$ 220.76	\$ 220.76
57210		A	090	Y	N	Y	D	N	\$ 265.82	\$ 265.82
57220		A	090	Y	N	Y	D	N	\$ 232.08	\$ 232.08
57230		A	090	Y	N	Y	D	N	\$ 284.38	\$ 284.38
57240		A	090	Y	N	Y	D	N	\$ 418.38	\$ 418.38
57250		A	090	Y	N	Y	D	N	\$ 420.79	\$ 420.79
57260		A	090	Y	N	Y	D	N	\$ 535.74	\$ 535.74
57265		A	090	Y	N	Y	D	N	\$ 601.78	\$ 601.78
57267		A	ZZZ	N	N	Y	D	N	\$ 175.21	\$ 175.21
57268		A	090	Y	N	Y	D	N	\$ 343.18	\$ 343.18
57270		A	090	Y	N	Y	D	N	\$ 558.88	\$ 558.88
57280		A	090	Y	N	Y	D	N	\$ 665.40	\$ 665.40
57282		A	090	Y	N	Y	D	N	\$ 476.22	\$ 476.22
57283		A	090	Y	N	Y	D	N	\$ 479.59	\$ 479.59
57284		A	090	Y	N	Y	Y	N	\$ 572.62	\$ 572.62
57285		A	090	Y	N	Y	Y	N	\$ 475.73	\$ 475.73
57287		A	090	Y	N	Y	D	N	\$ 498.39	\$ 498.39
57288		A	090	Y	N	Y	D	N	\$ 506.10	\$ 506.10
57289		A	090	Y	N	Y	D	N	\$ 543.70	\$ 543.70
57291		A	090	Y	N	Y	N	N	\$ 375.96	\$ 375.96
57292		A	090	Y	N	Y	D	N	\$ 571.89	\$ 571.89
57295		A	090	Y	N	Y	D	N	\$ 340.05	\$ 340.05
57296		A	090	Y	N	Y	D	N	\$ 655.76	\$ 655.76
57300		A	090	Y	N	Y	D	N	\$ 410.91	\$ 410.91
57305		A	090	Y	N	Y	D	N	\$ 674.08	\$ 674.08
57307		A	090	Y	N	Y	D	N	\$ 726.86	\$ 726.86
57308		A	090	Y	N	Y	D	N	\$ 448.02	\$ 448.02
57310		A	090	Y	N	Y	D	N	\$ 329.45	\$ 329.45
57311		A	090	Y	N	Y	D	N	\$ 373.55	\$ 373.55
57320		A	090	Y	N	Y	D	N	\$ 379.82	\$ 379.82
57330		A	090	Y	N	Y	D	N	\$ 520.08	\$ 520.08
57335		A	090	Y	N	Y	D	N	\$ 812.41	\$ 812.41
57400		A	000	Y	N	D	N	N	\$ 90.13	\$ 90.13
57410		A	000	Y	N	N	N	N	\$ 72.06	\$ 72.06
57415		A	010	Y	N	D	N	N	\$ 117.61	\$ 117.61
57420		A	000	Y	N	N	N	N	\$ 61.94	\$ 86.52
57421		A	000	Y	N	N	N	N	\$ 84.11	\$ 116.89

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
57423		A	090	Y	N	Y	Y	N	\$ 640.10	\$ 640.10
57425		A	090	Y	N	Y	D	N	\$ 671.43	\$ 671.43
57426		A	090	Y	N	Y	D	N	\$ 595.03	\$ 595.03
57452		A	000	Y	N	N	N	N	\$ 62.18	\$ 82.90
57454		A	000	Y	N	N	N	N	\$ 92.30	\$ 113.27
57455		A	000	Y	N	N	N	N	\$ 75.43	\$ 106.76
57456		A	000	Y	N	N	N	N	\$ 70.13	\$ 100.02
57460		A	000	Y	N	N	N	N	\$ 110.62	\$ 209.43
57461		A	000	Y	N	N	N	N	\$ 128.21	\$ 234.49
57465		Not Covered	ZZZ	N	N	D	N	N	\$ 30.13	\$ 38.32
57500		A	000	Y	N	N	N	N	\$ 51.33	\$ 99.77
57505		A	010	Y	N	N	N	N	\$ 70.37	\$ 95.20
57510		A	010	Y	N	N	N	N	\$ 77.60	\$ 107.73
57511		A	010	Y	N	N	N	N	\$ 97.36	\$ 126.28
57513		A	010	Y	N	N	N	N	\$ 97.36	\$ 129.42
57520		A	090	Y	N	N	N	N	\$ 197.86	\$ 232.08
57522		A	090	Y	N	N	N	N	\$ 172.07	\$ 200.51
57530		A	090	Y	N	Y	D	N	\$ 250.40	\$ 250.40
57531		A	090	Y	B	Y	D	N	\$ 1,282.60	\$ 1,282.60
57540		A	090	Y	N	Y	D	N	\$ 546.11	\$ 546.11
57545		A	090	Y	N	Y	D	N	\$ 575.03	\$ 575.03
57550		A	090	Y	N	Y	D	N	\$ 292.09	\$ 292.09
57555		A	090	Y	N	Y	D	N	\$ 424.16	\$ 424.16
57556		A	090	Y	N	Y	D	N	\$ 401.75	\$ 401.75
57558		A	010	Y	N	N	N	N	\$ 85.07	\$ 101.70
57700		A	090	Y	N	D	N	N	\$ 234.73	\$ 234.73
57720		A	090	Y	N	Y	N	N	\$ 224.61	\$ 224.61
57800		A	000	Y	N	N	N	N	\$ 33.02	\$ 50.13
58100		A	000	Y	N	N	N	N	\$ 44.59	\$ 67.96
58110		A	ZZZ	N	N	D	N	N	\$ 28.68	\$ 34.70
58120		A	010	Y	N	N	N	N	\$ 157.86	\$ 196.42
58140		A	090	Y	N	Y	D	N	\$ 644.19	\$ 644.19
58145		A	090	Y	N	Y	D	N	\$ 388.97	\$ 388.97
58146		A	090	Y	N	Y	D	N	\$ 802.05	\$ 802.05
58150		A	090	Y	N	Y	D	N	\$ 697.21	\$ 697.21
58152		A	090	Y	N	Y	D	N	\$ 859.89	\$ 859.89
58180		A	090	Y	N	Y	D	N	\$ 662.75	\$ 662.75
58200		A	090	Y	N	Y	D	N	\$ 930.98	\$ 930.98
58210		A	090	Y	B	Y	D	N	\$ 1,251.75	\$ 1,251.75
58240		A	090	Y	N	Y	D	N	\$ 2,008.98	\$ 2,008.98
58260		A	090	Y	N	Y	D	N	\$ 578.16	\$ 578.16
58262		A	090	Y	N	Y	Y	N	\$ 640.10	\$ 640.10

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
58263		A	090	Y	N	Y	Y	N	\$ 687.57	\$ 687.57
58267		A	090	Y	N	Y	D	N	\$ 738.91	\$ 738.91
58270		A	090	Y	N	Y	D	N	\$ 617.68	\$ 617.68
58275		A	090	Y	N	Y	D	N	\$ 683.96	\$ 683.96
58280		A	090	Y	N	Y	D	N	\$ 733.12	\$ 733.12
58285		A	090	Y	N	Y	D	N	\$ 970.27	\$ 970.27
58290		A	090	Y	N	Y	D	N	\$ 799.40	\$ 799.40
58291		A	090	Y	N	Y	Y	N	\$ 865.19	\$ 865.19
58292		A	090	Y	N	Y	Y	N	\$ 912.67	\$ 912.67
58294		A	090	Y	N	Y	D	N	\$ 846.15	\$ 846.15
58300		A	XXX	N	N	N	N	N	\$ 34.95	\$ 67.24
58301		A	000	Y	N	D	N	N	\$ 46.51	\$ 72.06
58321		Not Covered	000	Y	N	D	N	N	\$ 33.74	\$ 53.98
58322		Not Covered	000	Y	N	D	N	N	\$ 40.01	\$ 60.25
58323		Not Covered	000	Y	N	D	N	N	\$ 8.68	\$ 10.36
58340		A	000	Y	N	N	N	N	\$ 38.80	\$ 146.77
58345		A	010	Y	Y	Y	Y	N	\$ 198.10	\$ 198.10
58346		A	090	Y	N	N	N	N	\$ 323.18	\$ 323.18
58350		Not Covered	010	Y	Y	N	N	N	\$ 61.46	\$ 93.51
58353		A	010	Y	N	N	Y	N	\$ 157.37	\$ 643.23
58356		A	010	Y	N	Y	Y	N	\$ 246.78	\$ 1,163.07
58400		A	090	Y	N	Y	D	N	\$ 313.78	\$ 313.78
58410		A	090	Y	N	Y	D	N	\$ 563.70	\$ 563.70
58520		A	090	Y	N	Y	D	N	\$ 551.65	\$ 551.65
58540		A	090	Y	N	Y	N	N	\$ 634.07	\$ 634.07
58541		A	090	Y	N	Y	Y	N	\$ 502.00	\$ 502.00
58542		A	090	Y	N	Y	Y	N	\$ 573.34	\$ 573.34
58543		A	090	Y	N	Y	Y	N	\$ 582.26	\$ 582.26
58544		A	090	Y	N	Y	Y	N	\$ 627.08	\$ 627.08
58545		A	090	Y	N	Y	Y	N	\$ 623.23	\$ 623.23
58546		A	090	Y	N	Y	Y	N	\$ 774.33	\$ 774.33
58548		A	090	Y	B	Y	Y	N	\$ 1,289.59	\$ 1,289.59
58550		A	090	Y	N	Y	Y	N	\$ 609.01	\$ 609.01
58552		A	090	Y	N	Y	Y	N	\$ 677.93	\$ 677.93
58553		A	090	Y	N	Y	Y	N	\$ 779.64	\$ 779.64
58554		A	090	Y	N	Y	Y	N	\$ 906.40	\$ 906.40
58555		A	000	Y	N	D	Y	N	\$ 104.84	\$ 233.05
58558		A	000	Y	N	N	Y	N	\$ 159.78	\$ 906.16
58559		A	000	Y	N	N	Y	N	\$ 197.38	\$ 197.38
58560		A	000	Y	N	Y	Y	N	\$ 217.86	\$ 217.86
58561		A	000	Y	N	D	Y	N	\$ 248.47	\$ 248.47
58562		A	000	Y	N	N	Y	N	\$ 153.76	\$ 281.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
58563		A	000	Y	N	D	Y	N	\$ 170.87	\$ 1,359.48
58565		A	090	Y	B	N	Y	N	\$ 311.61	\$ 1,157.28
58570		A	090	Y	N	Y	Y	N	\$ 551.41	\$ 551.41
58571		A	090	Y	N	Y	Y	N	\$ 620.82	\$ 620.82
58572		A	090	Y	N	Y	Y	N	\$ 714.57	\$ 714.57
58573		A	090	Y	N	Y	Y	N	\$ 837.48	\$ 837.48
58575		A	090	Y	B	Y	Y	N	\$ 1,320.20	\$ 1,320.20
58578		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
58579		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
58600		A	090	Y	B	Y	D	N	\$ 254.26	\$ 254.26
58605		A	090	Y	B	Y	N	N	\$ 229.67	\$ 229.67
58611		A	ZZZ	N	N	Y	N	N	\$ 53.26	\$ 53.26
58615		A	010	Y	N	Y	N	N	\$ 173.76	\$ 173.76
58660		A	090	Y	N	Y	Y	N	\$ 470.91	\$ 470.91
58661		A	010	Y	Y	Y	Y	N	\$ 254.74	\$ 254.74
58662		A	090	Y	N	Y	Y	N	\$ 491.40	\$ 491.40
58670		A	090	Y	N	N	Y	N	\$ 254.74	\$ 254.74
58671		A	090	Y	N	N	Y	N	\$ 254.74	\$ 254.74
58672		A	090	Y	Y	Y	N	N	\$ 507.79	\$ 507.79
58673		A	090	Y	Y	Y	N	N	\$ 551.65	\$ 551.65
58674		Not Covered	090	Y	N	Y	Y	N	\$ 563.22	\$ 563.22
58679		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
58700		A	090	Y	B	Y	D	N	\$ 547.31	\$ 547.31
58720		A	090	Y	B	Y	D	N	\$ 516.95	\$ 516.95
58740		A	090	Y	N	Y	D	N	\$ 621.54	\$ 621.54
58750		Not Covered	090	Y	Y	Y	D	N	\$ 629.49	\$ 629.49
58752		A	090	Y	Y	Y	N	N	\$ 628.05	\$ 628.05
58760		A	090	Y	Y	Y	D	N	\$ 567.56	\$ 567.56
58770		A	090	Y	Y	Y	N	N	\$ 595.99	\$ 595.99
58800		A	090	Y	B	N	N	N	\$ 213.77	\$ 241.48
58805		A	090	Y	B	Y	D	N	\$ 290.41	\$ 290.41
58820		A	090	Y	Y	Y	N	N	\$ 227.50	\$ 227.50
58822		A	090	Y	Y	Y	D	N	\$ 492.12	\$ 492.12
58825		A	090	Y	N	Y	D	N	\$ 488.75	\$ 488.75
58900		A	090	Y	B	Y	D	N	\$ 296.19	\$ 296.19
58920		A	090	Y	B	Y	D	N	\$ 492.85	\$ 492.85
58925		A	090	Y	B	Y	D	N	\$ 526.10	\$ 526.10
58940		A	090	Y	B	Y	D	N	\$ 376.68	\$ 376.68
58943		A	090	Y	N	Y	D	N	\$ 806.63	\$ 806.63
58950		A	090	Y	B	Y	D	N	\$ 783.25	\$ 783.25
58951		A	090	Y	B	Y	D	N	\$ 988.10	\$ 988.10
58952		A	090	Y	B	Y	D	N	\$ 1,125.71	\$ 1,125.71

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
58953		A	090	Y	B	Y	D	N	\$ 1,375.87	\$ 1,375.87
58954		A	090	Y	B	Y	D	N	\$ 1,489.86	\$ 1,489.86
58956		A	090	Y	B	Y	D	N	\$ 932.91	\$ 932.91
58957		A	090	Y	B	Y	D	N	\$ 1,089.32	\$ 1,089.32
58958		A	090	Y	B	Y	D	N	\$ 1,149.33	\$ 1,149.33
58960		A	090	Y	N	Y	D	N	\$ 670.22	\$ 670.22
58970		Not Covered	000	Y	N	D	N	N	\$ 136.17	\$ 162.19
58974		Not Covered	000	Y	N	Y	D	N	\$ -	\$ -
58976		Not Covered	000	Y	N	Y	D	N	\$ 147.25	\$ 175.21
58999		Unlstd/Manual	YYY	Y	N	N	D	D	\$ -	\$ -
59000		A	000	Y	N	N	N	N	\$ 55.43	\$ 79.53
59001		A	000	Y	N	N	N	N	\$ 124.84	\$ 124.84
59012		A	000	Y	N	D	N	N	\$ 141.95	\$ 141.95
59015		A	000	Y	N	D	N	N	\$ 92.30	\$ 107.73
59020	26	A	000	N	N	D	N	N	\$ 25.55	\$ 25.55
59020	TC	A	000	N	N	D	N	N	\$ 20.49	\$ 20.49
59020		A	000	N	N	D	N	N	\$ 46.27	\$ 46.27
59025	26	A	000	N	N	D	N	N	\$ 20.97	\$ 20.97
59025	TC	A	000	N	N	D	N	N	\$ 11.81	\$ 11.81
59025		A	000	N	N	D	N	N	\$ 32.78	\$ 32.78
59030		A	000	Y	N	D	N	N	\$ 79.29	\$ 79.29
59050		Not Covered	XXX	N	N	D	N	N	\$ 35.67	\$ 35.67
59051		Not Covered	XXX	N	N	D	N	N	\$ 29.64	\$ 29.64
59070		A	000	Y	N	Y	N	N	\$ 217.14	\$ 275.46
59072		A	000	Y	N	N	N	N	\$ 367.77	\$ 367.77
59074		A	000	Y	N	Y	N	N	\$ 217.14	\$ 264.86
59076		A	000	Y	N	Y	N	N	\$ 367.77	\$ 367.77
59100		A	090	Y	N	Y	D	N	\$ 597.44	\$ 597.44
59120		A	090	Y	N	Y	D	N	\$ 569.00	\$ 569.00
59121		A	090	Y	N	Y	D	N	\$ 569.72	\$ 569.72
59130		A	090	Y	N	D	N	N	\$ 663.96	\$ 663.96
59135		A	090	Y	N	D	N	N	\$ 655.76	\$ 655.76
59136		A	090	Y	N	Y	N	N	\$ 629.49	\$ 629.49
59140		A	090	Y	N	Y	N	N	\$ 287.75	\$ 287.75
59150		A	090	Y	N	Y	N	N	\$ 552.13	\$ 552.13
59151		A	090	Y	N	Y	N	N	\$ 538.64	\$ 538.64
59160		A	010	Y	N	D	N	N	\$ 129.42	\$ 176.89
59200		A	000	Y	N	N	N	N	\$ 31.57	\$ 65.79
59300		A	000	Y	N	D	N	N	\$ 102.67	\$ 152.07
59320		A	000	Y	N	D	N	N	\$ 105.56	\$ 105.56
59325		A	000	Y	N	D	N	N	\$ 169.42	\$ 169.42
59350		A	000	Y	N	Y	N	N	\$ 198.10	\$ 198.10

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
59400		Not Covered	MMM	Y	N	N	N	N	\$ 2,184.81	\$ 2,184.81
59409		A	MMM	Y	N	D	N	N	\$ 749.28	\$ 749.28
59410		A	MMM	Y	N	N	N	N	\$ 983.87	\$ 983.87
59412		A	MMM	N	N	D	N	N	\$ 94.85	\$ 94.85
59414		A	MMM	Y	N	D	N	N	\$ 85.30	\$ 85.30
59425		Not Covered	MMM	N	N	D	N	N	\$ 406.47	\$ 504.19
59426		Not Covered	MMM	N	N	D	N	N	\$ 743.87	\$ 922.12
59430		A	MMM	Y	N	N	N	N	\$ 167.74	\$ 231.40
59510		Not Covered	MMM	Y	N	N	N	N	\$ 2,422.26	\$ 2,422.26
59514		A	MMM	Y	N	Y	D	N	\$ 850.82	\$ 850.82
59515		A	MMM	Y	N	N	N	N	\$ 1,214.95	\$ 1,214.95
59525		A	ZZZ	N	N	Y	D	N	\$ 341.26	\$ 341.26
59610		Not Covered	MMM	Y	N	D	N	N	\$ 2,293.99	\$ 2,293.99
59612		A	MMM	Y	N	D	N	N	\$ 850.82	\$ 850.82
59614		A	MMM	Y	N	D	N	N	\$ 1,072.67	\$ 1,072.67
59618		Not Covered	MMM	Y	N	D	N	N	\$ 2,450.27	\$ 2,450.27
59620		A	MMM	Y	N	Y	N	N	\$ 879.46	\$ 879.46
59622		A	MMM	Y	N	D	N	N	\$ 1,256.97	\$ 1,256.97
59812		A	090	Y	N	N	N	N	\$ 212.80	\$ 244.37
59820		A	090	Y	N	N	N	N	\$ 260.28	\$ 290.89
59821		A	090	Y	N	D	N	N	\$ 257.63	\$ 289.44
59830		A	090	Y	N	D	N	N	\$ 318.84	\$ 318.84
59840		A	010	Y	N	D	N	N	\$ 151.59	\$ 167.50
59841		A	010	Y	N	D	N	N	\$ 258.35	\$ 289.20
59850		A	090	Y	N	D	N	N	\$ 271.13	\$ 271.13
59851		A	090	Y	N	D	N	N	\$ 292.09	\$ 292.09
59852		A	090	Y	N	D	N	N	\$ 403.43	\$ 403.43
59855		A	090	Y	N	D	N	N	\$ 295.23	\$ 295.23
59856		A	090	Y	N	D	N	N	\$ 347.04	\$ 347.04
59857		A	090	Y	N	D	N	N	\$ 406.57	\$ 406.57
59866		Not Covered	000	Y	N	Y	D	N	\$ 167.01	\$ 167.01
59870		A	090	Y	N	Y	N	N	\$ 359.57	\$ 359.57
59871		A	000	Y	N	D	N	N	\$ 92.54	\$ 92.54
59897		Unlstd/Manual	YYY	Y	N	N	N	N	\$ -	\$ -
59898		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
59899		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
60000		A	010	Y	N	D	N	N	\$ 100.98	\$ 117.37
60100		A	000	Y	N	N	N	N	\$ 53.02	\$ 73.75
60200		A	090	Y	N	Y	D	N	\$ 455.01	\$ 455.01
60210		A	090	Y	N	Y	D	N	\$ 485.62	\$ 485.62
60212		A	090	Y	N	Y	D	N	\$ 718.18	\$ 718.18
60220		A	090	Y	N	Y	D	N	\$ 483.45	\$ 483.45

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
60225		A	090	Y	N	Y	D	N	\$ 637.93	\$ 637.93
60240		A	090	Y	N	Y	D	N	\$ 631.66	\$ 631.66
60252		A	090	Y	N	Y	D	N	\$ 910.50	\$ 910.50
60254		A	090	Y	N	Y	D	N	\$ 1,144.27	\$ 1,144.27
60260		A	090	Y	Y	Y	D	N	\$ 749.27	\$ 749.27
60270		A	090	Y	N	Y	D	N	\$ 944.24	\$ 944.24
60271		A	090	Y	N	Y	D	N	\$ 726.37	\$ 726.37
60280		A	090	Y	N	Y	D	N	\$ 300.53	\$ 300.53
60281		A	090	Y	N	Y	D	N	\$ 397.17	\$ 397.17
60300		A	000	Y	N	N	N	N	\$ 33.74	\$ 72.30
60500		A	090	Y	N	Y	D	N	\$ 669.02	\$ 669.02
60502		A	090	Y	N	Y	D	N	\$ 897.97	\$ 897.97
60505		A	090	Y	N	Y	D	N	\$ 960.14	\$ 960.14
60512		A	ZZZ	N	N	Y	D	N	\$ 169.18	\$ 169.18
60520		A	090	Y	N	Y	D	N	\$ 727.34	\$ 727.34
60521		A	090	Y	N	Y	D	N	\$ 780.84	\$ 780.84
60522		A	090	Y	N	Y	D	N	\$ 952.19	\$ 952.19
60540		A	090	Y	Y	Y	D	N	\$ 745.17	\$ 745.17
60545		A	090	Y	Y	Y	D	N	\$ 864.47	\$ 864.47
60600		A	090	Y	N	Y	D	N	\$ 953.64	\$ 953.64
60605		A	090	Y	N	Y	D	N	\$ 1,170.30	\$ 1,170.30
60650		A	090	Y	Y	Y	D	N	\$ 829.52	\$ 829.52
60659		Unlstd/Manual	YYY	Y	Y	Y	N	N	\$ -	\$ -
60699		Unlstd/Manual	YYY	Y	N	Y	D	D	\$ -	\$ -
61000		A	000	Y	B	N	N	N	\$ 79.29	\$ 79.29
61001		A	000	Y	B	N	N	N	\$ 74.47	\$ 74.47
61020		A	000	Y	N	N	N	N	\$ 72.78	\$ 72.78
61026		A	000	Y	N	N	N	N	\$ 72.78	\$ 72.78
61050		A	000	Y	N	D	N	N	\$ 55.91	\$ 55.91
61055		A	000	N	N	N	N	N	\$ 82.42	\$ 82.42
61070		A	000	Y	N	N	N	N	\$ 38.08	\$ 38.08
61105		A	090	Y	N	D	N	N	\$ 317.88	\$ 317.88
61107		A	000	N	N	N	N	N	\$ 221.96	\$ 221.96
61108		A	090	Y	N	N	N	N	\$ 624.19	\$ 624.19
61120		A	090	Y	N	D	N	N	\$ 520.32	\$ 520.32
61140		A	090	Y	N	Y	N	N	\$ 887.36	\$ 887.36
61150		A	090	Y	N	N	D	N	\$ 946.65	\$ 946.65
61151		A	090	Y	N	N	N	N	\$ 694.08	\$ 694.08
61154		A	090	Y	Y	Y	D	N	\$ 889.05	\$ 889.05
61156		A	090	Y	N	Y	D	N	\$ 871.46	\$ 871.46
61210		A	000	Y	N	N	N	N	\$ 260.04	\$ 260.04
61215		A	090	Y	N	N	D	N	\$ 348.97	\$ 348.97

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
61250		A	090	Y	Y	Y	D	N	\$ 604.91	\$ 604.91
61253		A	090	Y	B	Y	N	N	\$ 694.08	\$ 694.08
61304		A	090	Y	N	Y	D	N	\$ 1,151.74	\$ 1,151.74
61305		A	090	Y	N	Y	D	N	\$ 1,408.40	\$ 1,408.40
61312		A	090	Y	N	Y	D	N	\$ 1,457.09	\$ 1,457.09
61313		A	090	Y	N	Y	D	N	\$ 1,389.61	\$ 1,389.61
61314		A	090	Y	N	Y	D	N	\$ 1,282.84	\$ 1,282.84
61315		A	090	Y	N	Y	D	N	\$ 1,450.58	\$ 1,450.58
61316		A	ZZZ	N	N	N	N	N	\$ 61.94	\$ 61.94
61320		A	090	Y	N	Y	D	N	\$ 1,332.73	\$ 1,332.73
61321		A	090	Y	N	Y	D	N	\$ 1,492.75	\$ 1,492.75
61322		A	090	Y	N	Y	D	N	\$ 1,670.37	\$ 1,670.37
61323		A	090	Y	N	Y	D	N	\$ 1,680.98	\$ 1,680.98
61330		A	090	Y	Y	Y	D	N	\$ 1,257.06	\$ 1,257.06
61333		A	090	Y	Y	Y	D	N	\$ 1,418.77	\$ 1,418.77
61340		A	090	Y	Y	Y	D	N	\$ 1,009.55	\$ 1,009.55
61343		A	090	Y	N	Y	D	N	\$ 1,541.20	\$ 1,541.20
61345		A	090	Y	N	Y	D	N	\$ 1,433.95	\$ 1,433.95
61450		A	090	Y	N	Y	D	N	\$ 1,348.64	\$ 1,348.64
61458		A	090	Y	N	Y	D	N	\$ 1,413.95	\$ 1,413.95
61460		A	090	Y	N	Y	Y	N	\$ 1,478.78	\$ 1,478.78
61500		A	090	Y	N	Y	D	N	\$ 906.16	\$ 906.16
61501		A	090	Y	N	Y	D	N	\$ 775.78	\$ 775.78
61510		A	090	Y	N	Y	D	N	\$ 1,538.54	\$ 1,538.54
61512		A	090	Y	N	Y	D	N	\$ 1,794.25	\$ 1,794.25
61514		A	090	Y	N	Y	D	N	\$ 1,341.89	\$ 1,341.89
61516		A	090	Y	N	Y	D	N	\$ 1,313.21	\$ 1,313.21
61517		A	ZZZ	N	N	N	N	N	\$ 61.70	\$ 61.70
61518		A	090	Y	N	Y	D	N	\$ 1,942.94	\$ 1,942.94
61519		A	090	Y	N	Y	D	N	\$ 2,072.36	\$ 2,072.36
61520		A	090	Y	N	Y	Y	N	\$ 2,626.42	\$ 2,626.42
61521		A	090	Y	N	Y	D	N	\$ 2,224.43	\$ 2,224.43
61522		A	090	Y	N	Y	D	N	\$ 1,537.34	\$ 1,537.34
61524		A	090	Y	N	Y	D	N	\$ 1,463.83	\$ 1,463.83
61526		A	090	Y	N	N	Y	N	\$ 2,334.33	\$ 2,334.33
61530		A	090	Y	N	N	Y	N	\$ 2,164.18	\$ 2,164.18
61531		A	090	Y	N	Y	Y	N	\$ 853.86	\$ 853.86
61533		A	090	Y	N	Y	D	N	\$ 1,069.56	\$ 1,069.56
61534		A	090	Y	N	Y	D	N	\$ 1,155.60	\$ 1,155.60
61535		A	090	Y	N	Y	D	N	\$ 698.66	\$ 698.66
61536		A	090	Y	N	Y	D	N	\$ 1,813.53	\$ 1,813.53
61537		A	090	Y	N	Y	D	N	\$ 1,734.72	\$ 1,734.72

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
61538		A	090	Y	N	Y	D	N	\$ 1,875.22	\$ 1,875.22
61539		A	090	Y	N	Y	D	N	\$ 1,660.25	\$ 1,660.25
61540		A	090	Y	N	Y	D	N	\$ 1,530.59	\$ 1,530.59
61541		A	090	Y	N	Y	D	N	\$ 1,509.87	\$ 1,509.87
61543		A	090	Y	N	Y	D	N	\$ 1,526.98	\$ 1,526.98
61544		A	090	Y	N	Y	N	N	\$ 1,334.66	\$ 1,334.66
61545		A	090	Y	N	Y	D	N	\$ 2,239.61	\$ 2,239.61
61546		A	090	Y	N	Y	D	N	\$ 1,622.41	\$ 1,622.41
61548		A	090	Y	N	Y	Y	N	\$ 1,096.55	\$ 1,096.55
61550		A	090	Y	N	Y	D	N	\$ 830.00	\$ 830.00
61552		A	090	Y	N	Y	D	N	\$ 1,038.71	\$ 1,038.71
61556		A	090	Y	N	Y	D	N	\$ 1,197.77	\$ 1,197.77
61557		A	090	Y	N	Y	D	N	\$ 1,178.49	\$ 1,178.49
61558		A	090	Y	N	Y	D	N	\$ 1,318.51	\$ 1,318.51
61559		A	090	Y	N	Y	D	N	\$ 1,681.22	\$ 1,681.22
61563		A	090	Y	N	Y	D	N	\$ 1,392.74	\$ 1,392.74
61564		A	090	Y	Y	Y	D	N	\$ 1,690.62	\$ 1,690.62
61566		A	090	Y	N	Y	D	N	\$ 1,576.38	\$ 1,576.38
61567		A	090	Y	N	Y	D	N	\$ 1,795.93	\$ 1,795.93
61570		A	090	Y	N	Y	D	N	\$ 1,312.25	\$ 1,312.25
61571		A	090	Y	N	Y	D	N	\$ 1,397.56	\$ 1,397.56
61575		A	090	Y	N	Y	D	N	\$ 1,761.71	\$ 1,761.71
61576		A	090	Y	N	Y	D	N	\$ 2,929.36	\$ 2,929.36
61580		A	090	Y	Y	N	D	Y	\$ 1,705.56	\$ 1,705.56
61581		A	090	Y	Y	N	Y	Y	\$ 1,954.27	\$ 1,954.27
61582		A	090	Y	N	Y	D	Y	\$ 2,076.70	\$ 2,076.70
61583		A	090	Y	N	Y	D	Y	\$ 2,035.25	\$ 2,035.25
61584		A	090	Y	Y	Y	D	Y	\$ 2,006.81	\$ 2,006.81
61585		A	090	Y	Y	Y	D	Y	\$ 2,290.46	\$ 2,290.46
61586		A	090	Y	N	Y	D	Y	\$ 1,738.57	\$ 1,738.57
61590		A	090	Y	Y	Y	D	Y	\$ 2,083.93	\$ 2,083.93
61591		A	090	Y	Y	Y	D	Y	\$ 2,109.96	\$ 2,109.96
61592		A	090	Y	Y	Y	D	Y	\$ 2,219.85	\$ 2,219.85
61595		A	090	Y	Y	N	D	Y	\$ 1,642.66	\$ 1,642.66
61596		A	090	Y	Y	Y	D	Y	\$ 1,658.08	\$ 1,658.08
61597		A	090	Y	Y	Y	D	Y	\$ 2,075.01	\$ 2,075.01
61598		A	090	Y	N	Y	D	Y	\$ 1,998.13	\$ 1,998.13
61600		A	090	Y	N	Y	D	Y	\$ 1,466.73	\$ 1,466.73
61601		A	090	Y	N	Y	D	Y	\$ 1,683.87	\$ 1,683.87
61605		A	090	Y	N	Y	D	Y	\$ 1,477.81	\$ 1,477.81
61606		A	090	Y	N	Y	D	Y	\$ 2,048.26	\$ 2,048.26
61607		A	090	Y	N	Y	D	Y	\$ 2,135.02	\$ 2,135.02

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
61608		A	090	Y	N	Y	D	Y	\$ 2,287.09	\$ 2,287.09
61611		A	ZZZ	N	N	Y	D	Y	\$ 331.13	\$ 331.13
61613		A	090	Y	Y	Y	D	Y	\$ 2,312.64	\$ 2,312.64
61615		A	090	Y	N	Y	D	Y	\$ 1,969.93	\$ 1,969.93
61616		A	090	Y	N	Y	D	Y	\$ 2,334.81	\$ 2,334.81
61618		A	090	Y	N	Y	D	Y	\$ 898.45	\$ 898.45
61619		A	090	Y	N	Y	D	Y	\$ 962.55	\$ 962.55
61623		A	000	Y	N	N	N	N	\$ 400.06	\$ 400.06
61624		A	000	Y	N	N	N	N	\$ 808.07	\$ 808.07
61626		A	000	Y	N	N	N	N	\$ 617.92	\$ 617.92
61630		Not Covered	XXX	Y	N	Y	D	N	\$ 956.29	\$ 956.29
61635		Not Covered	XXX	Y	N	Y	D	N	\$ 1,009.55	\$ 1,009.55
61640		Not Covered	000	N	N	N	N	N	\$ 345.59	\$ 345.59
61641		Not Covered	ZZZ	N	N	N	N	N	\$ 121.46	\$ 121.46
61642		Not Covered	ZZZ	N	N	N	N	N	\$ 242.69	\$ 242.69
61645		A	000	N	Y	D	N	N	\$ 586.59	\$ 586.59
61650		A	000	Y	N	N	N	N	\$ 400.30	\$ 400.30
61651		A	ZZZ	N	N	N	N	N	\$ 171.83	\$ 171.83
61680		A	090	Y	N	Y	D	N	\$ 1,592.53	\$ 1,592.53
61682		A	090	Y	N	Y	D	N	\$ 2,934.18	\$ 2,934.18
61684		A	090	Y	N	Y	D	N	\$ 1,999.34	\$ 1,999.34
61686		A	090	Y	N	Y	D	N	\$ 3,166.50	\$ 3,166.50
61690		A	090	Y	N	Y	D	N	\$ 1,531.31	\$ 1,531.31
61692		A	090	Y	N	Y	D	N	\$ 2,571.95	\$ 2,571.95
61697		A	090	Y	N	Y	D	N	\$ 2,960.69	\$ 2,960.69
61698		A	090	Y	N	Y	D	N	\$ 3,261.69	\$ 3,261.69
61700		A	090	Y	N	Y	D	N	\$ 2,397.23	\$ 2,397.23
61702		A	090	Y	N	Y	D	N	\$ 2,833.20	\$ 2,833.20
61703		A	090	Y	N	Y	D	N	\$ 950.99	\$ 950.99
61705		A	090	Y	N	Y	D	N	\$ 1,831.12	\$ 1,831.12
61708		A	090	Y	N	Y	N	N	\$ 1,790.63	\$ 1,790.63
61710		A	090	Y	N	D	N	N	\$ 1,510.11	\$ 1,510.11
61711		A	090	Y	N	Y	D	N	\$ 1,807.74	\$ 1,807.74
61720		A	090	Y	N	N	N	N	\$ 889.77	\$ 889.77
61735		A	090	Y	N	N	D	N	\$ 1,117.76	\$ 1,117.76
61750		A	090	Y	N	N	D	N	\$ 986.65	\$ 986.65
61751		A	090	Y	N	N	D	N	\$ 966.65	\$ 966.65
61760		A	090	Y	N	N	Y	N	\$ 1,110.29	\$ 1,110.29
61770		A	090	Y	N	N	D	N	\$ 1,139.21	\$ 1,139.21
61781		A	ZZZ	N	N	D	N	N	\$ 167.74	\$ 167.74
61782		A	ZZZ	N	N	D	N	N	\$ 118.81	\$ 118.81
61783		A	ZZZ	N	N	D	N	N	\$ 164.12	\$ 164.12

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
61790		A	090	Y	Y	N	N	N	\$ 613.83	\$ 613.83
61791		A	090	Y	Y	D	N	N	\$ 787.83	\$ 787.83
61796		A	090	N	N	Y	N	N	\$ 710.47	\$ 710.47
61797		A	ZZZ	N	N	Y	N	N	\$ 155.93	\$ 155.93
61798		A	090	N	N	Y	N	N	\$ 967.37	\$ 967.37
61799		A	ZZZ	N	N	Y	N	N	\$ 214.25	\$ 214.25
61800		A	ZZZ	N	N	Y	N	N	\$ 107.00	\$ 107.00
61850		A	090	Y	N	Y	N	N	\$ 688.54	\$ 688.54
61860		A	090	Y	N	Y	N	N	\$ 1,098.00	\$ 1,098.00
61863		A	090	Y	Y	Y	D	N	\$ 1,051.48	\$ 1,051.48
61864		A	ZZZ	N	N	Y	D	N	\$ 200.51	\$ 200.51
61867		A	090	Y	Y	Y	D	N	\$ 1,603.13	\$ 1,603.13
61868		A	ZZZ	N	N	Y	D	N	\$ 353.31	\$ 353.31
61880		A	090	Y	Y	Y	D	N	\$ 399.58	\$ 399.58
61885		A	090	Y	Y	D	N	N	\$ 358.37	\$ 358.37
61886		A	090	Y	N	D	N	N	\$ 595.03	\$ 595.03
61888		A	010	Y	Y	N	N	N	\$ 276.19	\$ 276.19
62000		A	090	Y	N	N	N	N	\$ 722.28	\$ 722.28
62005		A	090	Y	N	Y	D	N	\$ 890.01	\$ 890.01
62010		A	090	Y	N	Y	D	N	\$ 1,076.07	\$ 1,076.07
62100		A	090	Y	N	Y	D	N	\$ 1,089.08	\$ 1,089.08
62115		A	090	Y	N	Y	D	N	\$ 1,175.60	\$ 1,175.60
62117		A	090	Y	N	Y	D	N	\$ 1,381.65	\$ 1,381.65
62120		A	090	Y	N	Y	D	N	\$ 1,453.95	\$ 1,453.95
62121		A	090	Y	N	Y	D	N	\$ 1,078.48	\$ 1,078.48
62140		A	090	Y	N	Y	D	N	\$ 708.06	\$ 708.06
62141		A	090	Y	N	Y	D	N	\$ 797.71	\$ 797.71
62142		A	090	Y	N	Y	N	N	\$ 615.27	\$ 615.27
62143		A	090	Y	N	Y	D	N	\$ 729.27	\$ 729.27
62145		A	090	Y	N	Y	D	N	\$ 984.97	\$ 984.97
62146		A	090	Y	N	Y	D	N	\$ 875.07	\$ 875.07
62147		A	090	Y	N	Y	D	N	\$ 991.96	\$ 991.96
62148		A	ZZZ	N	N	N	N	N	\$ 89.41	\$ 89.41
62160		A	ZZZ	N	N	N	N	N	\$ 134.48	\$ 134.48
62161		A	090	Y	N	Y	D	N	\$ 1,060.88	\$ 1,060.88
62162		A	090	Y	N	Y	D	N	\$ 1,325.50	\$ 1,325.50
62164		A	090	Y	N	Y	D	N	\$ 1,466.24	\$ 1,466.24
62165		A	090	Y	N	D	D	N	\$ 1,052.69	\$ 1,052.69
62180		A	090	Y	N	Y	N	N	\$ 1,121.61	\$ 1,121.61
62190		A	090	Y	N	N	D	N	\$ 646.36	\$ 646.36
62192		A	090	Y	N	Y	D	N	\$ 684.20	\$ 684.20
62194		A	010	Y	N	D	N	N	\$ 338.61	\$ 338.61

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
62200		A	090	Y	N	Y	D	N	\$ 965.21	\$ 965.21
62201		A	090	Y	N	N	N	N	\$ 843.74	\$ 843.74
62220		A	090	Y	N	Y	D	N	\$ 687.09	\$ 687.09
62223		A	090	Y	N	Y	D	N	\$ 722.28	\$ 722.28
62225		A	090	Y	N	N	N	N	\$ 365.12	\$ 365.12
62230		A	090	Y	N	Y	D	N	\$ 586.59	\$ 586.59
62252	26	A	XXX	N	N	D	N	N	\$ 32.54	\$ 32.54
62252	TC	A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
62252		A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
62256		A	090	Y	N	Y	N	N	\$ 419.10	\$ 419.10
62258		A	090	Y	N	Y	D	N	\$ 780.84	\$ 780.84
62263		A	010	Y	N	N	N	N	\$ 207.74	\$ 410.66
62264		A	010	Y	N	N	N	N	\$ 167.98	\$ 297.64
62267		A	000	Y	N	D	N	N	\$ 105.56	\$ 177.38
62268		A	000	Y	N	N	N	N	\$ 176.89	\$ 176.89
62269		A	000	Y	N	D	N	N	\$ 178.10	\$ 178.10
62270		A	000	Y	N	N	N	N	\$ 42.42	\$ 85.80
62272		A	000	Y	N	N	N	N	\$ 61.46	\$ 116.40
62273		A	000	Y	N	N	N	N	\$ 77.12	\$ 113.03
62280		A	010	Y	N	N	N	N	\$ 115.92	\$ 242.21
62281		A	010	Y	N	N	N	N	\$ 107.73	\$ 160.75
62282		A	010	Y	N	N	N	N	\$ 97.36	\$ 213.53
62284		A	000	Y	N	N	N	N	\$ 57.84	\$ 128.45
62287		A	090	Y	N	N	N	N	\$ 390.18	\$ 390.18
62290		A	000	Y	N	N	N	N	\$ 111.34	\$ 238.11
62291		A	000	Y	N	N	N	N	\$ 105.80	\$ 223.89
62292		A	090	Y	N	D	N	N	\$ 392.59	\$ 392.59
62294		A	090	Y	N	N	N	N	\$ 663.71	\$ 663.71
62302		A	000	Y	N	N	N	N	\$ 81.70	\$ 170.63
62303		A	000	Y	N	N	N	N	\$ 81.70	\$ 173.28
62304		A	000	Y	N	N	N	N	\$ 80.49	\$ 168.46
62305		A	000	Y	N	N	N	N	\$ 83.63	\$ 182.68
62320		A	000	Y	N	N	N	N	\$ 67.72	\$ 109.41
62321		A	000	Y	N	N	N	N	\$ 73.26	\$ 172.80
62322		A	000	Y	N	N	N	N	\$ 55.67	\$ 94.95
62323		A	000	Y	N	N	N	N	\$ 67.24	\$ 169.91
62324		A	000	Y	N	N	N	N	\$ 61.46	\$ 93.75
62325		A	000	Y	N	N	N	N	\$ 75.92	\$ 166.77
62326		A	000	Y	N	N	N	N	\$ 59.29	\$ 94.95
62327		A	000	Y	N	N	N	N	\$ 70.37	\$ 170.87
62328		A	000	Y	N	N	N	N	\$ 61.21	\$ 166.53
62329		A	000	Y	N	N	N	N	\$ 78.57	\$ 210.88

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
62350		A	010	Y	N	N	D	N	\$ 272.81	\$ 272.81
62351		A	090	Y	N	Y	Y	N	\$ 620.58	\$ 620.58
62355		A	010	Y	N	D	N	N	\$ 184.12	\$ 184.12
62360		A	010	Y	N	D	D	N	\$ 218.11	\$ 218.11
62361		A	010	Y	N	D	D	N	\$ 295.95	\$ 295.95
62362		A	010	Y	N	D	D	N	\$ 264.62	\$ 264.62
62365		A	010	Y	N	D	N	N	\$ 201.72	\$ 201.72
62367		A	XXX	N	N	N	N	N	\$ 16.87	\$ 20.97
62368		A	XXX	N	N	N	N	N	\$ 24.34	\$ 30.13
62369		A	XXX	N	N	N	N	N	\$ 24.58	\$ 61.94
62370		A	XXX	N	N	N	N	N	\$ 32.05	\$ 63.87
62380		Not Covered	090	Y	Y	Y	Y	N	\$ -	\$ -
63001		A	090	Y	N	Y	Y	N	\$ 861.09	\$ 861.09
63003		A	090	Y	N	Y	Y	N	\$ 861.33	\$ 861.33
63005		A	090	Y	N	Y	Y	N	\$ 830.73	\$ 830.73
63011		A	090	Y	N	Y	Y	N	\$ 759.15	\$ 759.15
63012		A	090	Y	N	Y	Y	N	\$ 828.32	\$ 828.32
63015		A	090	Y	N	Y	Y	N	\$ 1,031.96	\$ 1,031.96
63016		A	090	Y	N	Y	Y	N	\$ 1,063.77	\$ 1,063.77
63017		A	090	Y	N	Y	Y	N	\$ 877.96	\$ 877.96
63020		A	090	Y	Y	Y	Y	N	\$ 803.25	\$ 803.25
63030		A	090	Y	Y	Y	Y	N	\$ 673.11	\$ 673.11
63035		A	ZZZ	N	Y	Y	Y	N	\$ 134.96	\$ 134.96
63040		A	090	Y	Y	Y	Y	N	\$ 966.65	\$ 966.65
63042		A	090	Y	Y	Y	Y	N	\$ 896.76	\$ 896.76
63043		C	ZZZ	N	Y	Y	Y	N	\$ -	\$ -
63044		C	ZZZ	N	Y	Y	Y	N	\$ -	\$ -
63045		A	090	Y	B	Y	Y	N	\$ 895.32	\$ 895.32
63046		A	090	Y	B	Y	Y	N	\$ 852.66	\$ 852.66
63047		A	090	Y	B	Y	Y	N	\$ 764.45	\$ 764.45
63048		A	ZZZ	N	N	Y	Y	N	\$ 148.70	\$ 148.70
63050		A	090	Y	N	Y	Y	N	\$ 1,040.16	\$ 1,040.16
63051		A	090	Y	N	Y	Y	N	\$ 1,181.14	\$ 1,181.14
63055		A	090	Y	N	Y	D	N	\$ 1,137.76	\$ 1,137.76
63056		A	090	Y	N	Y	D	N	\$ 1,039.19	\$ 1,039.19
63057		A	ZZZ	N	N	Y	D	N	\$ 225.82	\$ 225.82
63064		A	090	Y	N	Y	D	N	\$ 1,250.31	\$ 1,250.31
63066		A	ZZZ	N	N	Y	D	N	\$ 146.05	\$ 146.05
63075		A	090	Y	N	Y	Y	N	\$ 943.27	\$ 943.27
63076		A	ZZZ	N	N	Y	Y	N	\$ 171.83	\$ 171.83
63077		A	090	Y	N	Y	Y	N	\$ 1,041.60	\$ 1,041.60
63078		A	ZZZ	N	N	Y	Y	N	\$ 147.73	\$ 147.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
63081		A	090	Y	N	Y	D	Y	\$ 1,224.28	\$ 1,224.28
63082		A	ZZZ	N	N	Y	D	Y	\$ 186.78	\$ 186.78
63085		A	090	Y	N	Y	Y	Y	\$ 1,342.13	\$ 1,342.13
63086		A	ZZZ	N	N	Y	Y	Y	\$ 133.03	\$ 133.03
63087		A	090	Y	N	Y	Y	Y	\$ 1,683.14	\$ 1,683.14
63088		A	ZZZ	N	N	Y	Y	Y	\$ 182.20	\$ 182.20
63090		A	090	Y	N	Y	Y	Y	\$ 1,363.10	\$ 1,363.10
63091		A	ZZZ	N	N	Y	Y	Y	\$ 124.60	\$ 124.60
63101		A	090	Y	N	Y	D	N	\$ 1,625.55	\$ 1,625.55
63102		A	090	Y	N	Y	D	N	\$ 1,581.44	\$ 1,581.44
63103		A	ZZZ	N	N	Y	D	N	\$ 207.26	\$ 207.26
63170		A	090	Y	N	Y	D	N	\$ 1,115.83	\$ 1,115.83
63172		A	090	Y	N	Y	D	N	\$ 989.79	\$ 989.79
63173		A	090	Y	N	Y	D	N	\$ 1,209.82	\$ 1,209.82
63185		A	090	Y	N	Y	D	N	\$ 784.70	\$ 784.70
63190		A	090	Y	N	Y	D	N	\$ 852.90	\$ 852.90
63191		A	090	Y	Y	Y	D	N	\$ 965.21	\$ 965.21
63194		A	090	Y	N	Y	D	N	\$ 1,117.52	\$ 1,117.52
63195		A	090	Y	N	Y	D	N	\$ 1,074.38	\$ 1,074.38
63196		A	090	Y	N	Y	D	N	\$ 1,249.59	\$ 1,249.59
63197		A	090	Y	N	Y	D	N	\$ 1,199.70	\$ 1,199.70
63198		A	090	Y	N	Y	D	N	\$ 1,466.97	\$ 1,466.97
63199		A	090	Y	N	Y	D	N	\$ 1,537.34	\$ 1,537.34
63200		A	090	Y	N	Y	N	N	\$ 1,062.09	\$ 1,062.09
63250		A	090	Y	N	Y	D	N	\$ 2,088.51	\$ 2,088.51
63251		A	090	Y	N	Y	D	N	\$ 2,133.81	\$ 2,133.81
63252		A	090	Y	N	Y	D	N	\$ 2,133.33	\$ 2,133.33
63265		A	090	Y	N	Y	D	N	\$ 1,165.72	\$ 1,165.72
63266		A	090	Y	N	Y	D	N	\$ 1,204.76	\$ 1,204.76
63267		A	090	Y	N	Y	D	N	\$ 954.12	\$ 954.12
63268		A	090	Y	N	Y	D	N	\$ 989.79	\$ 989.79
63270		A	090	Y	N	Y	D	N	\$ 1,459.01	\$ 1,459.01
63271		A	090	Y	N	Y	D	N	\$ 1,453.95	\$ 1,453.95
63272		A	090	Y	N	Y	D	N	\$ 1,305.02	\$ 1,305.02
63273		A	090	Y	N	Y	N	N	\$ 1,310.32	\$ 1,310.32
63275		A	090	Y	N	Y	D	N	\$ 1,264.77	\$ 1,264.77
63276		A	090	Y	N	Y	D	N	\$ 1,256.33	\$ 1,256.33
63277		A	090	Y	N	Y	D	N	\$ 1,089.08	\$ 1,089.08
63278		A	090	Y	N	Y	D	N	\$ 1,115.83	\$ 1,115.83
63280		A	090	Y	N	Y	D	N	\$ 1,488.90	\$ 1,488.90
63281		A	090	Y	N	Y	D	N	\$ 1,472.75	\$ 1,472.75
63282		A	090	Y	N	Y	D	N	\$ 1,388.16	\$ 1,388.16

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
63283		A	090	Y	N	Y	D	N	\$ 1,333.45	\$ 1,333.45
63285		A	090	Y	N	Y	D	N	\$ 1,838.83	\$ 1,838.83
63286		A	090	Y	N	Y	D	N	\$ 1,814.73	\$ 1,814.73
63287		A	090	Y	N	Y	D	N	\$ 1,929.93	\$ 1,929.93
63290		A	090	Y	N	Y	D	N	\$ 1,962.95	\$ 1,962.95
63295		A	ZZZ	N	B	Y	Y	N	\$ 232.57	\$ 232.57
63300		A	090	Y	N	Y	D	N	\$ 1,276.34	\$ 1,276.34
63301		A	090	Y	N	Y	D	N	\$ 1,548.67	\$ 1,548.67
63302		A	090	Y	N	Y	D	N	\$ 1,529.15	\$ 1,529.15
63303		A	090	Y	N	Y	D	N	\$ 1,626.99	\$ 1,626.99
63304		A	090	Y	N	Y	D	N	\$ 1,651.33	\$ 1,651.33
63305		A	090	Y	N	Y	D	N	\$ 1,758.10	\$ 1,758.10
63306		A	090	Y	N	Y	D	N	\$ 1,726.77	\$ 1,726.77
63307		A	090	Y	N	Y	D	N	\$ 1,692.30	\$ 1,692.30
63308		A	ZZZ	N	N	Y	D	N	\$ 227.50	\$ 227.50
63600		A	090	Y	N	D	N	N	\$ 764.45	\$ 764.45
63610		A	000	Y	N	D	N	N	\$ 408.50	\$ 408.50
63620		A	090	N	N	Y	N	N	\$ 785.90	\$ 785.90
63621		A	ZZZ	N	N	Y	N	N	\$ 178.58	\$ 178.58
63650		A	010	Y	N	N	N	N	\$ 281.97	\$ 1,405.03
63655		A	090	Y	N	Y	D	N	\$ 576.47	\$ 576.47
63661		A	010	Y	N	Y	D	N	\$ 223.17	\$ 442.72
63662		A	090	Y	N	Y	D	N	\$ 583.94	\$ 583.94
63663		A	010	Y	N	Y	D	N	\$ 309.44	\$ 586.11
63664		A	090	Y	N	Y	D	N	\$ 608.04	\$ 608.04
63685		A	010	Y	N	Y	D	N	\$ 247.27	\$ 247.27
63688		A	010	Y	N	N	N	N	\$ 254.26	\$ 254.26
63700		A	090	Y	N	Y	D	N	\$ 912.91	\$ 912.91
63702		A	090	Y	N	Y	D	N	\$ 1,000.15	\$ 1,000.15
63704		A	090	Y	N	Y	D	N	\$ 1,161.14	\$ 1,161.14
63706		A	090	Y	N	Y	D	N	\$ 1,291.76	\$ 1,291.76
63707		A	090	Y	N	Y	D	N	\$ 646.12	\$ 646.12
63709		A	090	Y	N	Y	D	N	\$ 771.20	\$ 771.20
63710		A	090	Y	N	Y	D	N	\$ 749.99	\$ 749.99
63740		A	090	Y	N	Y	D	N	\$ 682.99	\$ 682.99
63741		A	090	Y	N	Y	D	N	\$ 466.58	\$ 466.58
63744		A	090	Y	N	Y	D	N	\$ 476.46	\$ 476.46
63746		A	090	Y	N	D	N	N	\$ 419.58	\$ 419.58
64400		A	000	Y	Y	N	N	N	\$ 34.46	\$ 73.26
64405		A	000	Y	Y	N	N	N	\$ 37.36	\$ 50.13
64408		A	000	Y	Y	D	N	N	\$ 29.88	\$ 50.85
64415		A	000	Y	Y	N	N	N	\$ 43.62	\$ 74.71

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
64416		A	000	Y	Y	N	N	N	\$ 45.07	\$ 45.07
64417		A	000	Y	Y	N	N	N	\$ 41.69	\$ 90.86
64418		A	000	Y	Y	N	N	N	\$ 39.77	\$ 59.05
64420		A	000	Y	Y	N	N	N	\$ 40.25	\$ 65.31
64421		A	ZZZ	N	Y	N	N	N	\$ 17.11	\$ 22.65
64425		A	000	Y	Y	N	N	N	\$ 37.84	\$ 74.23
64430		A	000	Y	Y	N	N	N	\$ 37.84	\$ 63.62
64435		A	000	Y	Y	N	N	N	\$ 30.13	\$ 52.30
64445		A	000	Y	Y	N	N	N	\$ 36.63	\$ 82.42
64446		A	000	Y	Y	N	N	N	\$ 40.97	\$ 40.97
64447		A	000	Y	Y	N	N	N	\$ 36.39	\$ 59.05
64448		A	000	Y	Y	N	N	N	\$ 42.18	\$ 42.18
64449		A	000	Y	Y	N	N	N	\$ 43.14	\$ 43.14
64450		A	000	Y	Y	N	N	N	\$ 28.92	\$ 50.61
64451		Not Covered	000	Y	Y	N	N	N	\$ 53.98	\$ 142.43
64454		Not Covered	000	Y	Y	N	N	N	\$ 55.67	\$ 142.19
64455		A	000	Y	Y	D	N	N	\$ 23.14	\$ 32.29
64461		A	000	Y	Y	N	N	N	\$ 53.74	\$ 88.93
64462		A	ZZZ	N	Y	N	N	N	\$ 34.22	\$ 49.65
64463		A	000	Y	Y	N	N	N	\$ 57.36	\$ 145.08
64479		A	000	Y	Y	N	N	N	\$ 88.45	\$ 172.56
64480		A	ZZZ	N	Y	N	N	N	\$ 42.90	\$ 87.72
64483		A	000	Y	Y	N	N	N	\$ 74.95	\$ 159.30
64484		A	ZZZ	N	Y	N	N	N	\$ 35.67	\$ 72.30
64486		A	000	Y	Y	N	N	N	\$ 38.80	\$ 74.71
64487		A	000	Y	Y	N	N	N	\$ 45.07	\$ 134.00
64488		A	000	Y	B	N	N	N	\$ 48.44	\$ 92.30
64489		A	000	Y	B	N	N	N	\$ 54.23	\$ 211.60
64490		A	000	Y	Y	Y	N	N	\$ 71.82	\$ 126.04
64491		A	ZZZ	N	Y	Y	N	N	\$ 41.45	\$ 64.83
64492		A	ZZZ	N	Y	Y	N	N	\$ 42.18	\$ 65.07
64493		A	000	Y	Y	Y	N	N	\$ 60.97	\$ 114.96
64494		A	ZZZ	N	Y	Y	N	N	\$ 35.43	\$ 59.77
64495		A	ZZZ	N	Y	Y	N	N	\$ 35.91	\$ 59.77
64505		A	000	Y	Y	N	N	N	\$ 68.20	\$ 90.13
64510		A	000	Y	Y	N	N	N	\$ 51.82	\$ 95.20
64517		A	000	Y	N	N	N	N	\$ 85.31	\$ 127.73
64520		A	000	Y	Y	N	N	N	\$ 56.64	\$ 147.01
64530		A	000	Y	N	N	N	N	\$ 63.62	\$ 148.70
64553		A	010	Y	N	D	N	N	\$ 246.54	\$ 1,507.46
64555		A	010	Y	N	N	N	N	\$ 231.60	\$ 1,373.70
64561		A	010	Y	Y	N	N	N	\$ 207.74	\$ 496.46

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
64566		Not Covered	000	Y	N	D	N	N	\$ 21.45	\$ 80.25
64568		A	090	Y	Y	D	N	N	\$ 425.37	\$ 425.37
64569		A	090	Y	Y	D	D	D	\$ 529.48	\$ 529.48
64570		A	090	Y	Y	D	D	D	\$ 507.79	\$ 507.79
64575		A	090	Y	N	N	N	N	\$ 227.26	\$ 227.26
64580		A	090	Y	N	Y	N	N	\$ 214.25	\$ 214.25
64581		A	090	Y	N	N	N	N	\$ 453.80	\$ 453.80
64585		A	010	Y	N	N	N	N	\$ 96.16	\$ 164.12
64590		A	010	Y	N	N	D	N	\$ 108.69	\$ 177.38
64595		A	010	Y	N	N	N	N	\$ 85.07	\$ 156.41
64600		A	010	Y	B	N	N	N	\$ 155.45	\$ 302.94
64605		A	010	Y	Y	D	N	N	\$ 238.83	\$ 422.47
64610		A	010	Y	Y	N	N	N	\$ 337.40	\$ 532.13
64611		A	010	Y	B	D	N	N	\$ 72.30	\$ 83.39
64612		A	010	Y	Y	N	N	N	\$ 78.08	\$ 88.93
64615		A	010	Y	B	N	N	N	\$ 86.04	\$ 104.59
64616		A	010	Y	Y	N	N	N	\$ 74.95	\$ 91.82
64617		A	010	Y	Y	N	N	N	\$ 73.75	\$ 107.97
64620		A	010	Y	N	N	N	N	\$ 119.05	\$ 140.26
64624		Not Covered	010	Y	Y	D	N	N	\$ 99.29	\$ 262.21
64625		Not Covered	010	Y	Y	N	N	N	\$ 130.86	\$ 320.77
64630		A	010	Y	N	D	N	N	\$ 130.14	\$ 168.94
64632		A	010	Y	Y	D	N	N	\$ 45.07	\$ 58.80
64633		A	010	Y	Y	N	N	N	\$ 151.83	\$ 275.46
64634		A	ZZZ	N	Y	N	N	N	\$ 46.51	\$ 122.67
64635		A	010	Y	Y	N	N	N	\$ 149.66	\$ 272.57
64636		A	ZZZ	N	Y	N	N	N	\$ 40.73	\$ 111.58
64640		A	010	Y	Y	N	N	N	\$ 80.01	\$ 163.64
64642		A	000	Y	N	N	N	N	\$ 73.51	\$ 99.29
64643		A	ZZZ	N	N	N	N	N	\$ 49.16	\$ 62.90
64644		A	000	Y	N	N	N	N	\$ 80.74	\$ 116.64
64645		A	ZZZ	N	N	N	N	N	\$ 57.12	\$ 80.49
64646		A	000	Y	N	N	N	N	\$ 80.01	\$ 105.32
64647		A	000	Y	N	N	N	N	\$ 92.79	\$ 120.98
64650		A	000	Y	N	D	N	N	\$ 27.96	\$ 57.12
64653		A	000	Y	N	D	N	N	\$ 35.43	\$ 68.44
64680		A	010	Y	N	N	N	N	\$ 108.69	\$ 226.78
64681		A	010	Y	N	N	N	N	\$ 151.83	\$ 308.96
64702		A	090	Y	N	N	N	N	\$ 341.26	\$ 341.26
64704		A	090	Y	N	Y	D	N	\$ 216.90	\$ 216.90
64708		A	090	Y	N	Y	D	N	\$ 341.98	\$ 341.98
64712		A	090	Y	Y	Y	D	N	\$ 403.43	\$ 403.43

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
64713		A	090	Y	Y	Y	D	N	\$ 537.67	\$ 537.67
64714		A	090	Y	Y	Y	D	N	\$ 517.43	\$ 517.43
64716		A	090	Y	N	Y	D	N	\$ 345.84	\$ 345.84
64718		A	090	Y	Y	D	N	N	\$ 402.47	\$ 402.47
64719		A	090	Y	Y	N	N	N	\$ 272.33	\$ 272.33
64721		A	090	Y	Y	N	N	N	\$ 290.16	\$ 294.74
64722		A	090	Y	N	Y	D	N	\$ 240.76	\$ 240.76
64726		A	090	Y	N	N	N	N	\$ 179.79	\$ 179.79
64727		A	ZZZ	N	N	N	N	N	\$ 124.84	\$ 124.84
64732		A	090	Y	Y	Y	N	N	\$ 307.28	\$ 307.28
64734		A	090	Y	Y	D	N	N	\$ 347.04	\$ 347.04
64736		A	090	Y	Y	Y	N	N	\$ 223.41	\$ 223.41
64738		A	090	Y	Y	Y	N	N	\$ 299.56	\$ 299.56
64740		A	090	Y	Y	Y	N	N	\$ 310.41	\$ 310.41
64742		A	090	Y	Y	Y	N	N	\$ 322.94	\$ 322.94
64744		A	090	Y	Y	D	N	N	\$ 344.15	\$ 344.15
64746		A	090	Y	Y	Y	D	N	\$ 298.60	\$ 298.60
64755		A	090	Y	N	Y	D	N	\$ 646.36	\$ 646.36
64760		A	090	Y	N	Y	D	N	\$ 359.09	\$ 359.09
64763		A	090	Y	Y	Y	D	N	\$ 355.48	\$ 355.48
64766		A	090	Y	Y	Y	N	N	\$ 439.83	\$ 439.83
64771		A	090	Y	N	Y	N	N	\$ 408.25	\$ 408.25
64772		A	090	Y	N	Y	D	N	\$ 381.26	\$ 381.26
64774		A	090	Y	N	N	N	N	\$ 274.50	\$ 274.50
64776		A	090	Y	N	D	N	N	\$ 263.90	\$ 263.90
64778		A	ZZZ	N	N	N	N	N	\$ 126.04	\$ 126.04
64782		A	090	Y	N	N	D	N	\$ 309.44	\$ 309.44
64783		A	ZZZ	N	N	N	N	N	\$ 150.14	\$ 150.14
64784		A	090	Y	N	D	N	N	\$ 496.70	\$ 496.70
64786		A	090	Y	Y	Y	N	N	\$ 704.20	\$ 704.20
64787		A	ZZZ	N	N	D	N	N	\$ 166.05	\$ 166.05
64788		A	090	Y	N	N	N	N	\$ 272.09	\$ 272.09
64790		A	090	Y	N	D	D	N	\$ 572.86	\$ 572.86
64792		A	090	Y	N	Y	D	N	\$ 735.53	\$ 735.53
64795		A	000	Y	N	N	N	N	\$ 132.31	\$ 132.31
64802		A	090	Y	Y	Y	D	N	\$ 581.53	\$ 581.53
64804		A	090	Y	Y	Y	D	N	\$ 829.52	\$ 829.52
64809		A	090	Y	Y	Y	D	N	\$ 760.36	\$ 760.36
64818		A	090	Y	Y	Y	D	N	\$ 532.61	\$ 532.61
64820		A	090	Y	N	N	N	N	\$ 493.81	\$ 493.81
64821		A	090	Y	Y	N	N	N	\$ 473.57	\$ 473.57
64822		A	090	Y	Y	N	N	N	\$ 473.57	\$ 473.57

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
64823		A	090	Y	Y	N	N	N	\$ 538.88	\$ 538.88
64831		A	090	Y	Y	N	N	N	\$ 465.61	\$ 465.61
64832		A	ZZZ	N	N	D	N	N	\$ 230.16	\$ 230.16
64834		A	090	Y	Y	D	N	N	\$ 504.41	\$ 504.41
64835		A	090	Y	Y	Y	N	N	\$ 557.19	\$ 557.19
64836		A	090	Y	Y	Y	N	N	\$ 557.19	\$ 557.19
64837		A	ZZZ	N	N	Y	N	N	\$ 253.05	\$ 253.05
64840		A	090	Y	Y	Y	N	N	\$ 657.21	\$ 657.21
64856		A	090	Y	N	N	D	N	\$ 689.50	\$ 689.50
64857		A	090	Y	N	Y	D	N	\$ 720.83	\$ 720.83
64858		A	090	Y	Y	Y	D	N	\$ 806.87	\$ 806.87
64859		A	ZZZ	N	N	Y	D	N	\$ 172.07	\$ 172.07
64861		A	090	Y	Y	Y	D	N	\$ 1,062.81	\$ 1,062.81
64862		A	090	Y	Y	Y	N	N	\$ 943.52	\$ 943.52
64864		A	090	Y	N	Y	D	N	\$ 582.74	\$ 582.74
64865		A	090	Y	N	Y	D	N	\$ 735.05	\$ 735.05
64866		A	090	Y	N	Y	D	N	\$ 851.69	\$ 851.69
64868		A	090	Y	N	Y	D	N	\$ 674.08	\$ 674.08
64872		A	ZZZ	N	N	Y	D	N	\$ 80.98	\$ 80.98
64874		A	ZZZ	N	N	Y	D	N	\$ 120.98	\$ 120.98
64876		A	ZZZ	N	N	Y	D	N	\$ 136.41	\$ 136.41
64885		A	090	Y	N	Y	D	N	\$ 750.96	\$ 750.96
64886		A	090	Y	N	Y	D	N	\$ 868.08	\$ 868.08
64890		A	090	Y	N	Y	N	N	\$ 740.35	\$ 740.35
64891		A	090	Y	N	Y	N	N	\$ 787.35	\$ 787.35
64892		A	090	Y	N	Y	D	N	\$ 719.14	\$ 719.14
64893		A	090	Y	N	Y	N	N	\$ 768.07	\$ 768.07
64895		A	090	Y	N	Y	D	N	\$ 910.98	\$ 910.98
64896		A	090	Y	N	Y	D	N	\$ 981.11	\$ 981.11
64897		A	090	Y	N	Y	D	N	\$ 869.77	\$ 869.77
64898		A	090	Y	N	Y	D	N	\$ 941.83	\$ 941.83
64901		A	ZZZ	N	N	Y	D	N	\$ 413.07	\$ 413.07
64902		A	ZZZ	N	N	Y	D	N	\$ 478.14	\$ 478.14
64905		A	090	Y	N	Y	D	N	\$ 692.88	\$ 692.88
64907		A	090	Y	N	Y	D	N	\$ 893.87	\$ 893.87
64910		A	090	Y	N	Y	D	N	\$ 525.86	\$ 525.86
64911		A	090	Y	N	Y	D	N	\$ 696.49	\$ 696.49
64912		A	090	Y	N	Y	D	N	\$ 595.27	\$ 595.27
64913		A	ZZZ	N	N	Y	D	N	\$ 121.46	\$ 121.46
64999		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
65091		A	090	Y	Y	D	D	N	\$ 469.95	\$ 469.95
65093		A	090	Y	Y	N	D	N	\$ 465.61	\$ 465.61

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
65101		A	090	Y	Y	N	N	N	\$ 538.39	\$ 538.39
65103		A	090	Y	Y	N	D	N	\$ 556.95	\$ 556.95
65105		A	090	Y	Y	Y	D	N	\$ 608.04	\$ 608.04
65110		A	090	Y	Y	Y	D	N	\$ 850.25	\$ 850.25
65112		A	090	Y	Y	Y	D	N	\$ 977.98	\$ 977.98
65114		A	090	Y	Y	Y	D	N	\$ 1,021.36	\$ 1,021.36
65125		A	090	Y	Y	N	D	N	\$ 188.46	\$ 296.43
65130		A	090	Y	Y	N	D	N	\$ 538.64	\$ 538.64
65135		A	090	Y	Y	N	N	N	\$ 545.38	\$ 545.38
65140		A	090	Y	Y	N	N	N	\$ 587.32	\$ 587.32
65150		A	090	Y	Y	D	N	N	\$ 439.10	\$ 439.10
65155		A	090	Y	Y	N	N	N	\$ 611.90	\$ 611.90
65175		A	090	Y	Y	N	D	N	\$ 490.19	\$ 490.19
65205		A	000	Y	Y	N	N	N	\$ 19.52	\$ 19.76
65210		A	000	Y	Y	N	N	N	\$ 24.34	\$ 26.03
65220		A	000	Y	Y	N	N	N	\$ 28.20	\$ 39.77
65222		A	000	Y	Y	N	N	N	\$ 33.74	\$ 44.34
65235		A	090	Y	Y	D	N	N	\$ 471.40	\$ 471.40
65260		A	090	Y	Y	Y	N	N	\$ 637.45	\$ 637.45
65265		A	090	Y	Y	Y	D	N	\$ 716.98	\$ 716.98
65270		A	010	Y	Y	D	N	N	\$ 92.30	\$ 183.40
65272		A	090	Y	Y	N	N	N	\$ 229.91	\$ 341.50
65273		A	090	Y	Y	N	D	N	\$ 248.23	\$ 248.23
65275		A	090	Y	Y	D	N	N	\$ 301.25	\$ 382.47
65280		A	090	Y	Y	D	N	N	\$ 437.42	\$ 437.42
65285		A	090	Y	Y	N	N	N	\$ 723.00	\$ 723.00
65286		A	090	Y	Y	N	N	N	\$ 322.70	\$ 456.94
65290		A	090	Y	Y	N	D	N	\$ 319.33	\$ 319.33
65400		A	090	Y	Y	N	N	N	\$ 389.94	\$ 448.02
65410		A	000	Y	Y	D	N	N	\$ 67.00	\$ 92.79
65420		A	090	Y	Y	N	N	N	\$ 243.89	\$ 347.76
65426		A	090	Y	Y	N	N	N	\$ 309.69	\$ 434.76
65430		A	000	Y	Y	N	N	N	\$ 66.52	\$ 75.19
65435		A	000	Y	Y	N	N	N	\$ 44.59	\$ 53.02
65436		A	090	Y	Y	N	N	N	\$ 239.55	\$ 251.12
65450		A	090	Y	Y	N	N	N	\$ 206.06	\$ 210.63
65600		A	090	Y	Y	N	N	N	\$ 219.55	\$ 276.43
65710		A	090	Y	Y	Y	D	N	\$ 739.63	\$ 739.63
65730		A	090	Y	Y	Y	D	N	\$ 815.06	\$ 815.06
65750		A	090	Y	Y	Y	D	N	\$ 821.09	\$ 821.09
65755		A	090	Y	Y	Y	D	N	\$ 817.23	\$ 817.23
65756		A	090	Y	Y	Y	D	N	\$ 769.03	\$ 769.03

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
65757		Manual	ZZZ	N	N	D	N	N	\$ -	\$ -
65760		C	XXX	N	N	N	N	N	\$ -	\$ -
65765		C	XXX	N	N	N	N	N	\$ -	\$ -
65767		C	XXX	N	N	N	N	N	\$ -	\$ -
65770		A	090	Y	Y	Y	N	N	\$ 914.35	\$ 914.35
65771		C	XXX	N	N	N	N	N	\$ -	\$ -
65772		A	090	Y	Y	N	N	N	\$ 261.73	\$ 296.19
65775		A	090	Y	Y	N	N	N	\$ 368.97	\$ 368.97
65778		Not Covered	000	Y	Y	D	N	N	\$ 35.91	\$ 889.29
65779		Not Covered	000	Y	Y	D	N	N	\$ 99.05	\$ 770.96
65780		A	090	Y	Y	N	D	N	\$ 431.63	\$ 431.63
65781		A	090	Y	Y	Y	D	N	\$ 865.91	\$ 865.91
65782		A	090	Y	Y	N	D	N	\$ 746.62	\$ 746.62
65785		A	090	Y	Y	N	D	N	\$ 286.55	\$ 1,471.79
65800		A	000	Y	Y	N	N	N	\$ 60.49	\$ 78.33
65810		A	090	Y	Y	N	N	N	\$ 300.77	\$ 300.77
65815		A	090	Y	Y	N	N	N	\$ 308.48	\$ 418.86
65820		A	090	Y	Y	D	N	N	\$ 524.66	\$ 524.66
65850		A	090	Y	Y	N	D	N	\$ 550.20	\$ 550.20
65855		A	010	Y	Y	N	D	D	\$ 134.72	\$ 160.51
65860		A	090	Y	Y	D	N	N	\$ 162.43	\$ 200.27
65865		A	090	Y	Y	N	D	N	\$ 309.44	\$ 309.44
65870		A	090	Y	Y	N	D	N	\$ 385.36	\$ 385.36
65875		A	090	Y	Y	N	D	N	\$ 411.39	\$ 411.39
65880		A	090	Y	Y	N	N	N	\$ 433.08	\$ 433.08
65900		A	090	Y	Y	Y	N	N	\$ 643.95	\$ 643.95
65920		A	090	Y	Y	N	D	N	\$ 513.81	\$ 513.81
65930		A	090	Y	Y	N	D	N	\$ 417.65	\$ 417.65
66020		A	010	Y	Y	N	N	N	\$ 84.83	\$ 127.01
66030		A	010	Y	Y	N	N	N	\$ 71.34	\$ 113.51
66130		A	090	Y	Y	D	N	N	\$ 368.73	\$ 461.52
66150		A	090	Y	Y	N	D	N	\$ 567.31	\$ 567.31
66155		A	090	Y	Y	N	N	N	\$ 567.07	\$ 567.07
66160		A	090	Y	Y	N	D	N	\$ 640.58	\$ 640.58
66170		A	090	Y	Y	Y	D	N	\$ 709.02	\$ 709.02
66172		A	090	Y	Y	Y	D	N	\$ 772.89	\$ 772.89
66174		Not Covered	090	Y	Y	Y	D	N	\$ 613.35	\$ 613.35
66175		Not Covered	090	Y	Y	Y	D	N	\$ 644.19	\$ 644.19
66179		A	090	Y	Y	Y	N	N	\$ 701.07	\$ 701.07
66180		A	090	Y	Y	Y	N	N	\$ 740.59	\$ 740.59
66183		A	090	Y	Y	Y	N	N	\$ 668.78	\$ 668.78
66184		A	090	Y	Y	Y	N	N	\$ 510.44	\$ 510.44

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
66185		A	090	Y	Y	Y	N	N	\$ 549.48	\$ 549.48
66225		A	090	Y	Y	N	D	N	\$ 608.28	\$ 608.28
66250		A	090	Y	Y	N	N	N	\$ 360.30	\$ 490.44
66500		A	090	Y	Y	N	D	N	\$ 249.44	\$ 249.44
66505		A	090	Y	Y	N	N	N	\$ 271.61	\$ 271.61
66600		A	090	Y	Y	N	N	N	\$ 578.88	\$ 578.88
66605		A	090	Y	Y	N	N	N	\$ 709.26	\$ 709.26
66625		A	090	Y	Y	N	N	N	\$ 277.87	\$ 277.87
66630		A	090	Y	Y	N	N	N	\$ 368.01	\$ 368.01
66635		A	090	Y	Y	N	N	N	\$ 371.38	\$ 371.38
66680		A	090	Y	Y	N	D	N	\$ 337.40	\$ 337.40
66682		A	090	Y	Y	N	N	N	\$ 452.12	\$ 452.12
66700		A	090	Y	Y	D	N	N	\$ 254.26	\$ 293.06
66710		A	090	Y	Y	N	N	N	\$ 254.26	\$ 287.75
66711		A	090	Y	Y	N	N	N	\$ 325.35	\$ 325.35
66720		A	090	Y	Y	N	N	N	\$ 263.41	\$ 298.84
66740		A	090	Y	Y	N	N	N	\$ 254.26	\$ 285.34
66761		A	010	Y	Y	N	N	N	\$ 153.04	\$ 193.52
66762		A	090	Y	Y	N	N	N	\$ 275.22	\$ 309.69
66770		A	090	Y	Y	N	N	N	\$ 311.61	\$ 343.18
66820		A	090	Y	Y	N	N	N	\$ 293.30	\$ 293.30
66821		A	090	Y	Y	N	N	N	\$ 200.51	\$ 214.97
66825		A	090	Y	Y	D	N	N	\$ 530.92	\$ 530.92
66830		A	090	Y	Y	N	N	N	\$ 462.24	\$ 462.24
66840		A	090	Y	Y	N	N	N	\$ 451.15	\$ 451.15
66850		A	090	Y	Y	N	N	N	\$ 512.85	\$ 512.85
66852		A	090	Y	Y	D	D	N	\$ 546.59	\$ 546.59
66920		A	090	Y	Y	D	D	N	\$ 487.54	\$ 487.54
66930		A	090	Y	Y	D	N	N	\$ 557.92	\$ 557.92
66940		A	090	Y	Y	D	D	N	\$ 508.99	\$ 508.99
66982		A	090	Y	Y	N	N	N	\$ 486.10	\$ 486.10
66983		C	090	Y	Y	N	N	N	\$ -	\$ -
66984		A	090	Y	Y	N	N	N	\$ 354.27	\$ 354.27
66985		A	090	Y	Y	N	D	N	\$ 498.63	\$ 498.63
66986		A	090	Y	Y	N	D	N	\$ 589.00	\$ 589.00
66987		C	090	Y	Y	D	D	D	\$ -	\$ -
66988		C	090	Y	Y	D	D	D	\$ -	\$ -
66990		A	ZZZ	N	N	N	N	N	\$ 59.77	\$ 59.77
66999		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
67005		A	090	Y	Y	N	D	N	\$ 306.07	\$ 306.07
67010		A	090	Y	Y	N	D	N	\$ 351.38	\$ 351.38
67015		A	090	Y	Y	N	D	N	\$ 388.73	\$ 388.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
67025		A	090	Y	Y	N	D	N	\$ 409.46	\$ 480.80
67027		A	090	Y	Y	Y	D	N	\$ 552.85	\$ 552.85
67028		A	000	Y	Y	N	N	N	\$ 60.73	\$ 73.99
67030		A	090	Y	Y	N	D	N	\$ 356.20	\$ 356.20
67031		A	090	Y	Y	N	N	N	\$ 230.16	\$ 253.53
67036		A	090	Y	Y	Y	D	N	\$ 584.43	\$ 584.43
67039		A	090	Y	Y	Y	D	N	\$ 625.88	\$ 625.88
67040		A	090	Y	Y	Y	D	N	\$ 677.21	\$ 677.21
67041		A	090	Y	Y	Y	D	N	\$ 748.79	\$ 748.79
67042		A	090	Y	Y	Y	D	N	\$ 748.79	\$ 748.79
67043		A	090	Y	Y	Y	D	N	\$ 789.76	\$ 789.76
67101		A	010	Y	Y	N	N	N	\$ 183.88	\$ 214.97
67105		A	010	Y	Y	N	N	N	\$ 177.62	\$ 191.84
67107		A	090	Y	Y	Y	D	N	\$ 735.05	\$ 735.05
67108		A	090	Y	Y	Y	D	N	\$ 779.15	\$ 779.15
67110		A	090	Y	Y	N	N	N	\$ 526.34	\$ 576.71
67113		A	090	Y	Y	Y	D	N	\$ 870.97	\$ 870.97
67115		A	090	Y	Y	N	N	N	\$ 322.22	\$ 322.22
67120		A	090	Y	Y	N	D	N	\$ 359.57	\$ 433.56
67121		A	090	Y	Y	Y	D	N	\$ 589.00	\$ 589.00
67141		A	090	Y	Y	N	N	N	\$ 314.51	\$ 339.57
67145		A	090	Y	Y	N	N	N	\$ 321.25	\$ 341.74
67208		A	090	Y	Y	N	N	N	\$ 375.48	\$ 391.63
67210		A	090	Y	Y	N	N	N	\$ 322.70	\$ 334.99
67218		A	090	Y	Y	N	N	N	\$ 913.15	\$ 913.15
67220		A	090	Y	Y	N	N	N	\$ 322.70	\$ 345.11
67221		A	000	Y	N	N	N	N	\$ 138.58	\$ 180.51
67225		A	ZZZ	N	N	N	N	N	\$ 18.56	\$ 19.52
67227		A	010	Y	Y	N	N	N	\$ 165.57	\$ 191.11
67228		A	010	Y	Y	N	N	N	\$ 199.07	\$ 222.20
67229		A	090	Y	Y	N	N	N	\$ 757.95	\$ 757.95
67250		A	090	Y	Y	N	D	N	\$ 573.10	\$ 573.10
67255		A	090	Y	Y	Y	D	N	\$ 444.40	\$ 444.40
67299		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
67311		A	090	Y	Y	N	N	N	\$ 388.49	\$ 388.49
67312		A	090	Y	Y	N	D	N	\$ 470.67	\$ 470.67
67314		A	090	Y	Y	N	N	N	\$ 443.92	\$ 443.92
67316		A	090	Y	Y	D	N	N	\$ 526.83	\$ 526.83
67318		A	090	Y	Y	N	D	N	\$ 463.93	\$ 463.93
67320		A	ZZZ	N	N	N	N	N	\$ 210.63	\$ 210.63
67331		A	ZZZ	N	Y	N	D	N	\$ 200.03	\$ 200.03
67332		A	ZZZ	N	Y	N	D	N	\$ 217.14	\$ 217.14

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
67334		A	ZZZ	N	Y	N	D	N	\$ 197.14	\$ 197.14
67335		A	ZZZ	N	Y	N	D	N	\$ 96.88	\$ 96.88
67340		A	ZZZ	N	N	Y	N	N	\$ 234.25	\$ 234.25
67343		A	090	Y	Y	N	D	N	\$ 431.87	\$ 431.87
67345		A	010	Y	Y	N	N	N	\$ 142.67	\$ 160.02
67346		A	000	Y	Y	D	N	N	\$ 124.60	\$ 124.60
67399		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
67400		A	090	Y	Y	N	D	N	\$ 662.27	\$ 662.27
67405		A	090	Y	Y	N	N	N	\$ 571.89	\$ 571.89
67412		A	090	Y	Y	N	D	N	\$ 629.49	\$ 629.49
67413		A	090	Y	Y	Y	N	N	\$ 613.10	\$ 613.10
67414		A	090	Y	Y	Y	D	N	\$ 940.14	\$ 940.14
67415		A	000	Y	Y	D	N	N	\$ 68.93	\$ 68.93
67420		A	090	Y	Y	Y	D	N	\$ 1,126.43	\$ 1,126.43
67430		A	090	Y	Y	Y	N	N	\$ 886.40	\$ 886.40
67440		A	090	Y	Y	Y	D	N	\$ 860.13	\$ 860.13
67445		A	090	Y	Y	Y	D	N	\$ 989.06	\$ 989.06
67450		A	090	Y	Y	Y	D	N	\$ 890.98	\$ 890.98
67500		A	000	Y	Y	N	N	N	\$ 41.93	\$ 49.89
67505		A	000	Y	Y	N	N	N	\$ 47.96	\$ 57.12
67515		A	000	Y	Y	N	N	N	\$ 31.09	\$ 33.74
67550		A	090	Y	Y	N	D	N	\$ 692.63	\$ 692.63
67560		A	090	Y	Y	D	N	N	\$ 708.78	\$ 708.78
67570		A	090	Y	Y	Y	D	N	\$ 869.05	\$ 869.05
67599		Unlstd/Manual	YYY	Y	Y	Y	D	D	\$ -	\$ -
67700		A	010	Y	Y	N	N	N	\$ 74.95	\$ 184.61
67710		A	010	Y	Y	N	N	N	\$ 62.90	\$ 156.89
67715		A	010	Y	Y	N	N	N	\$ 70.13	\$ 170.87
67800		A	010	Y	N	N	N	N	\$ 67.00	\$ 83.15
67801		A	010	Y	N	N	N	N	\$ 86.52	\$ 106.04
67805		A	010	Y	N	N	N	N	\$ 106.52	\$ 131.10
67808		A	090	Y	N	N	N	N	\$ 237.63	\$ 237.63
67810		A	000	Y	Y	N	N	N	\$ 46.03	\$ 119.30
67820		A	000	Y	Y	N	N	N	\$ 14.70	\$ 13.74
67825		A	010	Y	Y	N	N	N	\$ 78.33	\$ 87.24
67830		A	010	Y	Y	N	N	N	\$ 89.17	\$ 176.65
67835		A	090	Y	Y	D	N	N	\$ 286.07	\$ 286.07
67840		A	010	Y	Y	N	N	N	\$ 102.18	\$ 183.64
67850		A	010	Y	Y	N	N	N	\$ 85.31	\$ 141.95
67875		A	000	Y	Y	N	N	N	\$ 63.14	\$ 119.30
67880		A	090	Y	Y	N	N	N	\$ 238.11	\$ 303.90
67882		A	090	Y	Y	N	N	N	\$ 304.87	\$ 371.62

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
67900		A	090	Y	Y	N	N	N	\$ 331.13	\$ 424.16
67901		A	090	Y	Y	N	N	N	\$ 382.23	\$ 515.74
67902		A	090	Y	Y	N	D	N	\$ 472.84	\$ 472.84
67903		A	090	Y	Y	N	D	N	\$ 313.30	\$ 393.55
67904		A	090	Y	Y	N	D	N	\$ 387.77	\$ 483.69
67906		A	090	Y	Y	N	N	N	\$ 328.97	\$ 328.97
67908		A	090	Y	Y	N	N	N	\$ 279.08	\$ 344.39
67909		A	090	Y	Y	N	N	N	\$ 284.62	\$ 358.13
67911		A	090	Y	Y	N	N	N	\$ 364.63	\$ 364.63
67912		A	090	Y	Y	N	N	N	\$ 317.40	\$ 591.17
67914		A	090	Y	Y	N	N	N	\$ 210.63	\$ 316.43
67915		A	090	Y	Y	N	N	N	\$ 126.53	\$ 203.40
67916		A	090	Y	Y	N	N	N	\$ 278.60	\$ 398.13
67917		A	090	Y	Y	N	N	N	\$ 295.95	\$ 406.09
67921		A	090	Y	Y	N	N	N	\$ 199.55	\$ 309.44
67922		A	090	Y	Y	N	N	N	\$ 126.04	\$ 196.90
67923		A	090	Y	Y	N	N	N	\$ 278.60	\$ 397.89
67924		A	090	Y	Y	N	N	N	\$ 295.95	\$ 422.96
67930		A	010	Y	Y	N	N	N	\$ 156.41	\$ 242.93
67935		A	090	Y	Y	N	N	N	\$ 288.96	\$ 391.38
67938		A	010	Y	Y	N	N	N	\$ 75.43	\$ 174.97
67950		A	090	Y	Y	N	D	N	\$ 300.77	\$ 381.26
67961		A	090	Y	Y	D	N	N	\$ 294.50	\$ 381.50
67966		A	090	Y	Y	N	N	N	\$ 426.81	\$ 508.27
67971		A	090	Y	Y	N	D	N	\$ 470.19	\$ 470.19
67973		A	090	Y	Y	Y	D	N	\$ 605.15	\$ 605.15
67974		A	090	Y	Y	Y	D	N	\$ 603.71	\$ 603.71
67975		A	090	Y	Y	N	N	N	\$ 444.40	\$ 444.40
67999		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
68020		A	010	Y	Y	N	N	N	\$ 71.82	\$ 78.57
68040		A	000	Y	Y	N	N	N	\$ 31.81	\$ 40.49
68100		A	000	Y	Y	N	N	N	\$ 62.42	\$ 116.64
68110		A	010	Y	Y	N	N	N	\$ 95.68	\$ 152.79
68115		A	010	Y	Y	N	N	N	\$ 118.81	\$ 215.70
68130		A	090	Y	Y	N	N	N	\$ 266.55	\$ 358.85
68135		A	010	Y	Y	N	N	N	\$ 96.88	\$ 102.43
68200		A	000	Y	Y	N	N	N	\$ 22.41	\$ 26.99
68320		A	090	Y	Y	N	D	N	\$ 348.49	\$ 481.28
68325		A	090	Y	Y	N	D	N	\$ 425.37	\$ 425.37
68326		A	090	Y	Y	N	N	N	\$ 417.65	\$ 417.65
68328		A	090	Y	Y	D	N	N	\$ 460.31	\$ 460.31
68330		A	090	Y	Y	D	N	N	\$ 297.64	\$ 404.40

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
68335		A	090	Y	Y	N	D	N	\$ 419.34	\$ 419.34
68340		A	090	Y	Y	D	N	N	\$ 257.15	\$ 386.32
68360		A	090	Y	Y	N	N	N	\$ 265.10	\$ 353.07
68362		A	090	Y	Y	N	D	N	\$ 425.12	\$ 425.12
68371		A	010	Y	Y	N	N	N	\$ 267.03	\$ 267.03
68399		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
68400		A	010	Y	Y	N	N	N	\$ 85.07	\$ 192.80
68420		A	010	Y	Y	N	N	N	\$ 108.93	\$ 216.90
68440		A	010	Y	Y	N	N	N	\$ 63.62	\$ 66.52
68500		A	090	Y	Y	N	N	N	\$ 678.42	\$ 678.42
68505		A	090	Y	Y	N	N	N	\$ 675.28	\$ 675.28
68510		A	000	Y	Y	D	N	N	\$ 191.84	\$ 301.73
68520		A	090	Y	Y	D	N	N	\$ 472.36	\$ 472.36
68525		A	000	Y	Y	N	D	N	\$ 173.52	\$ 173.52
68530		A	010	Y	Y	N	N	N	\$ 165.81	\$ 283.66
68540		A	090	Y	Y	N	D	N	\$ 633.11	\$ 633.11
68550		A	090	Y	Y	N	N	N	\$ 786.14	\$ 786.14
68700		A	090	Y	Y	N	N	N	\$ 391.38	\$ 391.38
68705		A	010	Y	Y	N	N	N	\$ 107.00	\$ 167.98
68720		A	090	Y	Y	Y	D	N	\$ 520.32	\$ 520.32
68745		A	090	Y	Y	Y	D	N	\$ 522.25	\$ 522.25
68750		A	090	Y	Y	Y	D	N	\$ 548.03	\$ 548.03
68760		A	010	Y	Y	N	N	N	\$ 94.23	\$ 141.71
68761		A	010	Y	Y	D	N	N	\$ 75.92	\$ 95.92
68770		A	090	Y	Y	D	N	N	\$ 407.53	\$ 407.53
68801		A	010	Y	Y	N	N	N	\$ 49.89	\$ 60.73
68810		A	010	Y	Y	N	N	N	\$ 82.66	\$ 104.35
68811		A	010	Y	Y	N	N	N	\$ 87.48	\$ 87.48
68815		A	010	Y	Y	N	N	N	\$ 143.15	\$ 249.19
68816		A	010	Y	Y	N	N	N	\$ 101.94	\$ 536.71
68840		A	010	Y	Y	N	N	N	\$ 74.95	\$ 85.31
68850		A	000	Y	Y	N	N	N	\$ 35.19	\$ 40.01
68899		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
69000		A	010	Y	Y	N	N	N	\$ 80.74	\$ 122.19
69005		A	010	Y	Y	N	N	N	\$ 105.32	\$ 144.12
69020		A	010	Y	Y	N	N	N	\$ 93.27	\$ 151.59
69090		C	XXX	N	N	N	N	N	\$ -	\$ -
69100		A	000	Y	N	N	N	N	\$ 31.57	\$ 63.62
69105		A	000	Y	Y	N	N	N	\$ 41.69	\$ 93.75
69110		A	090	Y	Y	N	N	N	\$ 214.73	\$ 306.31
69120		A	090	Y	N	N	N	N	\$ 262.69	\$ 262.69
69140		A	090	Y	Y	D	N	N	\$ 592.14	\$ 592.14

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
69145		A	090	Y	Y	N	N	N	\$ 167.25	\$ 266.06
69150		A	090	Y	N	N	D	N	\$ 690.95	\$ 690.95
69155		A	090	Y	N	Y	D	N	\$ 1,103.54	\$ 1,103.54
69200		A	000	Y	Y	N	N	N	\$ 31.81	\$ 53.02
69205		A	010	Y	Y	N	N	N	\$ 63.14	\$ 63.14
69209		A	000	Y	Y	N	N	N	\$ 9.16	\$ 9.16
69210		A	000	Y	B	N	N	N	\$ 22.90	\$ 31.57
69220		A	000	Y	Y	N	N	N	\$ 34.70	\$ 52.06
69222		A	010	Y	Y	N	N	N	\$ 88.45	\$ 139.30
69300		A	YYY	Y	Y	D	N	N	\$ 308.24	\$ 417.41
69310		A	090	Y	Y	N	N	N	\$ 739.15	\$ 739.15
69320		A	090	Y	Y	Y	N	N	\$ 1,035.34	\$ 1,035.34
69399		Unlstd/Manual	YYY	Y	N	D	D	D	\$ -	\$ -
69420		A	010	Y	Y	N	N	N	\$ 78.57	\$ 122.91
69421		A	010	Y	Y	N	N	N	\$ 98.81	\$ 98.81
69424		A	000	Y	Y	N	N	N	\$ 40.25	\$ 83.63
69433		A	010	Y	Y	N	N	N	\$ 85.80	\$ 129.66
69436		A	010	Y	Y	N	N	N	\$ 104.35	\$ 104.35
69440		A	090	Y	Y	N	N	N	\$ 462.24	\$ 462.24
69450		A	090	Y	Y	D	N	N	\$ 364.63	\$ 364.63
69501		A	090	Y	Y	N	N	N	\$ 481.52	\$ 481.52
69502		A	090	Y	Y	D	N	N	\$ 642.51	\$ 642.51
69505		A	090	Y	Y	D	N	N	\$ 814.58	\$ 814.58
69511		A	090	Y	Y	D	N	N	\$ 834.34	\$ 834.34
69530		A	090	Y	Y	Y	N	N	\$ 1,118.48	\$ 1,118.48
69535		A	090	Y	Y	N	D	N	\$ 1,792.80	\$ 1,792.80
69540		A	010	Y	Y	N	N	N	\$ 83.15	\$ 134.72
69550		A	090	Y	Y	Y	N	N	\$ 703.72	\$ 703.72
69552		A	090	Y	Y	Y	N	N	\$ 1,061.12	\$ 1,061.12
69554		A	090	Y	Y	Y	D	N	\$ 1,701.46	\$ 1,701.46
69601		A	090	Y	Y	D	N	N	\$ 690.95	\$ 690.95
69602		A	090	Y	Y	D	N	N	\$ 732.88	\$ 732.88
69603		A	090	Y	Y	D	N	N	\$ 852.18	\$ 852.18
69604		A	090	Y	Y	N	N	N	\$ 748.06	\$ 748.06
69610		A	010	Y	Y	N	N	N	\$ 193.52	\$ 252.09
69620		A	090	Y	Y	N	N	N	\$ 325.83	\$ 476.46
69631		A	090	Y	Y	N	N	N	\$ 595.99	\$ 595.99
69632		A	090	Y	Y	N	N	N	\$ 726.13	\$ 726.13
69633		A	090	Y	Y	N	N	N	\$ 703.72	\$ 703.72
69635		A	090	Y	Y	N	N	N	\$ 840.85	\$ 840.85
69636		A	090	Y	Y	D	N	N	\$ 934.84	\$ 934.84
69637		A	090	Y	Y	D	N	N	\$ 957.01	\$ 957.01

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
69641		A	090	Y	Y	N	N	N	\$ 700.59	\$ 700.59
69642		A	090	Y	Y	N	N	N	\$ 901.10	\$ 901.10
69643		A	090	Y	Y	N	N	N	\$ 826.63	\$ 826.63
69644		A	090	Y	Y	N	N	N	\$ 1,001.36	\$ 1,001.36
69645		A	090	Y	Y	N	N	N	\$ 985.69	\$ 985.69
69646		A	090	Y	Y	D	N	N	\$ 1,044.01	\$ 1,044.01
69650		A	090	Y	Y	N	N	N	\$ 539.60	\$ 539.60
69660		A	090	Y	Y	N	N	N	\$ 623.23	\$ 623.23
69661		A	090	Y	Y	D	N	N	\$ 813.38	\$ 813.38
69662		A	090	Y	Y	N	N	N	\$ 781.56	\$ 781.56
69666		A	090	Y	Y	D	N	N	\$ 542.97	\$ 542.97
69667		A	090	Y	Y	D	N	N	\$ 543.46	\$ 543.46
69670		A	090	Y	Y	Y	N	N	\$ 634.55	\$ 634.55
69676		A	090	Y	Y	N	N	N	\$ 558.88	\$ 558.88
69700		A	090	Y	Y	N	N	N	\$ 450.43	\$ 450.43
69705		Not Covered	000	Y	Y	D	N	N	\$ 118.57	\$ 1,858.35
69706		Not Covered	000	Y	Y	D	N	N	\$ 165.09	\$ 1,919.57
69710		C	XXX	N	N	N	N	N	\$ -	\$ -
69711		A	090	Y	Y	Y	N	N	\$ 568.28	\$ 568.28
69714		A	090	Y	Y	N	N	N	\$ 711.91	\$ 711.91
69715		A	090	Y	Y	N	N	N	\$ 882.06	\$ 882.06
69717		A	090	Y	Y	N	N	N	\$ 748.31	\$ 748.31
69718		A	090	Y	Y	N	N	N	\$ 891.22	\$ 891.22
69720		A	090	Y	Y	D	D	N	\$ 796.99	\$ 796.99
69725		A	090	Y	Y	Y	N	N	\$ 1,264.77	\$ 1,264.77
69740		A	090	Y	Y	Y	N	N	\$ 783.49	\$ 783.49
69745		A	090	Y	Y	Y	N	N	\$ 834.58	\$ 834.58
69799		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
69801		A	000	Y	Y	D	N	N	\$ 83.39	\$ 144.60
69805		A	090	Y	Y	Y	N	N	\$ 697.21	\$ 697.21
69806		A	090	Y	Y	N	N	N	\$ 626.12	\$ 626.12
69905		A	090	Y	Y	N	N	N	\$ 616.96	\$ 616.96
69910		A	090	Y	Y	D	N	N	\$ 673.84	\$ 673.84
69915		A	090	Y	Y	Y	D	N	\$ 1,023.53	\$ 1,023.53
69930		A	090	Y	Y	D	N	N	\$ 824.46	\$ 824.46
69949		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
69950		A	090	Y	Y	Y	D	N	\$ 1,187.89	\$ 1,187.89
69955		A	090	Y	Y	Y	D	N	\$ 1,331.53	\$ 1,331.53
69960		A	090	Y	Y	Y	D	N	\$ 1,283.08	\$ 1,283.08
69970		A	090	Y	Y	Y	D	N	\$ 1,442.63	\$ 1,442.63
69979		Unlstd/Manual	YYY	Y	Y	D	D	D	\$ -	\$ -
69990		A	ZZZ	N	N	Y	N	N	\$ 154.00	\$ 154.00

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
70010		A	XXX	N	N	D	N	N	\$ 40.49	\$ 40.49
70015	26	A	XXX	N	N	D	N	N	\$ 39.04	\$ 39.04
70015	TC	A	XXX	N	N	D	N	N	\$ 68.20	\$ 68.20
70015		A	XXX	N	N	D	N	N	\$ 107.25	\$ 107.25
70030	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70030	TC	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
70030		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
70100	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70100	TC	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
70100		A	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
70110	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
70110	TC	A	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
70110		A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
70120	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70120	TC	A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
70120		A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
70130	26	A	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
70130	TC	A	XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
70130		A	XXX	N	N	D	N	N	\$ 39.04	\$ 39.04
70134	26	A	XXX	N	N	D	N	N	\$ 11.57	\$ 11.57
70134	TC	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
70134		A	XXX	N	N	D	N	N	\$ 37.11	\$ 37.11
70140	26	A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
70140	TC	A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
70140		A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
70150	26	A	XXX	N	N	D	N	N	\$ 8.68	\$ 8.68
70150	TC	A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
70150		A	XXX	N	N	D	N	N	\$ 29.40	\$ 29.40
70160	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
70160	TC	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
70160		A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
70170	26	A	XXX	N	N	D	N	N	\$ 8.68	\$ 8.68
70170	TC	A	XXX	N	N	D	N	N	\$ 136.44	\$ 136.44
70170		A	XXX	N	N	D	N	N	\$ 145.08	\$ 145.08
70190	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
70190	TC	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
70190		A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
70200	26	A	XXX	N	N	D	N	N	\$ 9.16	\$ 9.16
70200	TC	A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
70200		A	XXX	N	N	D	N	N	\$ 30.13	\$ 30.13
70210	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
70210	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
70210		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
70220	26	A	XXX	N	N	D	N	N	\$ 7.23	\$ 7.23
70220	TC	A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
70220		A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
70240	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
70240	TC	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
70240		A	XXX	N	N	D	N	N	\$ 20.73	\$ 20.73
70250	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70250	TC	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
70250		A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
70260	26	A	XXX	N	N	D	N	N	\$ 9.16	\$ 9.16
70260	TC	A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
70260		A	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
70300	26	A	XXX	N	N	D	N	N	\$ 3.37	\$ 3.37
70300	TC	A	XXX	N	N	D	N	N	\$ 4.82	\$ 4.82
70300		A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
70310	26	A	XXX	N	N	D	N	N	\$ 5.06	\$ 5.06
70310	TC	A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
70310		A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
70320	26	A	XXX	N	N	D	N	N	\$ 7.71	\$ 7.71
70320	TC	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
70320		A	XXX	N	N	D	N	N	\$ 34.95	\$ 34.95
70328	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70328	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
70328		A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
70330	26	A	XXX	N	B	D	N	N	\$ 7.95	\$ 7.95
70330	TC	A	XXX	N	B	D	N	N	\$ 25.31	\$ 25.31
70330		A	XXX	N	B	D	N	N	\$ 33.26	\$ 33.26
70332	26	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.08
70332	TC	A	XXX	N	N	D	N	N	\$ 35.91	\$ 35.91
70332		A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
70336	26	A	XXX	4	N	D	N	N	\$ 48.20	\$ 48.20
70336	TC	A	XXX	4	N	D	N	N	\$ 139.54	\$ 139.54
70336		A	XXX	4	N	D	N	N	\$ 188.22	\$ 188.22
70350	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
70350	TC	A	XXX	N	N	D	N	N	\$ 4.82	\$ 4.82
70350		A	XXX	N	N	D	N	N	\$ 10.60	\$ 10.60
70355	26	A	XXX	N	N	D	N	N	\$ 6.99	\$ 6.99
70355	TC	A	XXX	N	N	D	N	N	\$ 5.06	\$ 5.06
70355		A	XXX	N	N	D	N	N	\$ 11.81	\$ 11.81
70360	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
70360	TC	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
70360		A	XXX	N	N	D	N	N	\$ 19.76	\$ 19.76
70370	26	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
70370	TC	A	XXX	N	N	D	N	N	\$ 49.65	\$ 49.65
70370		A	XXX	N	N	D	N	N	\$ 60.01	\$ 60.01
70371	26	A	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
70371	TC	A	XXX	N	N	D	N	N	\$ 41.69	\$ 41.69
70371		A	XXX	N	N	D	N	N	\$ 69.65	\$ 69.65
70380	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
70380	TC	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
70380		A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
70390	26	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
70390	TC	A	XXX	N	N	D	N	N	\$ 61.46	\$ 61.46
70390		A	XXX	N	N	D	N	N	\$ 74.23	\$ 74.23
70450	26	A	XXX	4	N	D	N	N	\$ 28.20	\$ 28.20
70450	TC	A	XXX	4	N	D	N	N	\$ 44.10	\$ 44.10
70450		A	XXX	4	N	D	N	N	\$ 72.06	\$ 72.06
70460	26	A	XXX	4	N	D	N	N	\$ 37.11	\$ 36.87
70460	TC	A	XXX	4	N	D	N	N	\$ 63.87	\$ 63.87
70460		A	XXX	4	N	D	N	N	\$ 100.98	\$ 100.98
70470	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
70470	TC	A	XXX	4	N	D	N	N	\$ 76.88	\$ 76.88
70470		A	XXX	4	N	D	N	N	\$ 118.57	\$ 118.57
70480	26	A	XXX	4	N	D	N	N	\$ 41.69	\$ 41.69
70480	TC	A	XXX	4	N	D	N	N	\$ 66.03	\$ 66.03
70480		A	XXX	4	N	D	N	N	\$ 107.73	\$ 107.73
70481	26	A	XXX	4	N	D	N	N	\$ 37.11	\$ 37.11
70481	TC	A	XXX	4	N	D	N	N	\$ 86.04	\$ 86.04
70481		A	XXX	4	N	D	N	N	\$ 123.15	\$ 123.15
70482	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
70482	TC	A	XXX	4	N	D	N	N	\$ 103.15	\$ 103.15
70482		A	XXX	4	N	D	N	N	\$ 144.60	\$ 144.60
70486	26	A	XXX	4	N	D	N	N	\$ 28.20	\$ 28.20
70486	TC	A	XXX	4	N	D	N	N	\$ 58.56	\$ 58.56
70486		A	XXX	4	N	D	N	N	\$ 86.76	\$ 86.76
70487	26	A	XXX	4	N	D	N	N	\$ 36.87	\$ 36.87
70487	TC	A	XXX	4	N	D	N	N	\$ 66.76	\$ 66.76
70487		A	XXX	4	N	D	N	N	\$ 103.87	\$ 103.87
70488	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
70488	TC	A	XXX	4	N	D	N	N	\$ 85.07	\$ 85.07
70488		A	XXX	4	N	D	N	N	\$ 126.53	\$ 126.53
70490	26	A	XXX	4	N	D	N	N	\$ 41.69	\$ 41.69
70490	TC	A	XXX	4	N	D	N	N	\$ 60.73	\$ 60.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
70490		A	XXX	4	N	D	N	N	\$ 102.43	\$ 102.43
70491	26	A	XXX	4	N	D	N	N	\$ 45.07	\$ 45.07
70491	TC	A	XXX	4	N	D	N	N	\$ 80.98	\$ 80.98
70491		A	XXX	4	N	D	N	N	\$ 126.04	\$ 126.04
70492	26	A	XXX	4	N	D	N	N	\$ 53.74	\$ 53.74
70492	TC	A	XXX	4	N	D	N	N	\$ 99.29	\$ 99.29
70492		A	XXX	4	N	D	N	N	\$ 153.04	\$ 153.04
70496	26	A	XXX	4	N	D	N	N	\$ 51.33	\$ 51.33
70496	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
70496		A	XXX	4	N	D	N	N	\$ 157.48	\$ 157.48
70498	26	A	XXX	4	N	D	N	N	\$ 51.33	\$ 51.33
70498	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
70498		A	XXX	4	N	D	N	N	\$ 157.48	\$ 157.48
70540	26	A	XXX	4	N	D	N	N	\$ 43.86	\$ 43.86
70540	TC	A	XXX	4	N	D	N	N	\$ 114.96	\$ 114.96
70540		A	XXX	4	N	D	N	N	\$ 159.06	\$ 159.06
70542	26	A	XXX	4	N	D	N	N	\$ 53.98	\$ 53.98
70542	TC	A	XXX	4	N	D	N	N	\$ 135.92	\$ 135.92
70542		A	XXX	4	N	D	N	N	\$ 189.91	\$ 189.91
70543	26	A	XXX	4	N	D	N	N	\$ 70.61	\$ 70.61
70543	TC	A	XXX	4	N	D	N	N	\$ 168.22	\$ 168.22
70543		A	XXX	4	N	D	N	N	\$ 238.83	\$ 238.83
70544	26	A	XXX	4	N	D	N	N	\$ 39.28	\$ 39.28
70544	TC	A	XXX	4	N	D	N	N	\$ 109.66	\$ 109.66
70544		A	XXX	4	N	D	N	N	\$ 148.94	\$ 148.94
70545	26	A	XXX	4	N	D	N	N	\$ 39.28	\$ 39.28
70545	TC	A	XXX	4	N	D	N	N	\$ 117.37	\$ 117.37
70545		A	XXX	4	N	D	N	N	\$ 156.65	\$ 156.65
70546	26	A	XXX	4	N	D	N	N	\$ 48.20	\$ 48.20
70546	TC	A	XXX	4	N	D	N	N	\$ 178.10	\$ 178.10
70546		A	XXX	4	N	D	N	N	\$ 226.54	\$ 226.54
70547	26	A	XXX	4	N	D	N	N	\$ 39.52	\$ 39.52
70547	TC	A	XXX	4	N	D	N	N	\$ 110.14	\$ 110.14
70547		A	XXX	4	N	D	N	N	\$ 149.42	\$ 149.42
70548	26	A	XXX	4	N	D	N	N	\$ 48.92	\$ 48.92
70548	TC	A	XXX	4	N	D	N	N	\$ 120.02	\$ 120.02
70548		A	XXX	4	N	D	N	N	\$ 169.18	\$ 169.18
70549	26	A	XXX	4	N	D	N	N	\$ 59.53	\$ 59.53
70549	TC	A	XXX	4	N	D	N	N	\$ 179.55	\$ 179.55
70549		A	XXX	4	N	D	N	N	\$ 238.83	\$ 238.83
70551	26	A	XXX	4	N	D	N	N	\$ 48.20	\$ 48.20
70551	TC	A	XXX	4	N	D	N	N	\$ 87.97	\$ 87.97

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
70551		A	XXX	4	N	D	N	N	\$ 136.41	\$ 136.41
70552	26	A	XXX	4	N	D	N	N	\$ 58.80	\$ 58.80
70552	TC	A	XXX	4	N	D	N	N	\$ 130.14	\$ 130.14
70552		A	XXX	4	N	D	N	N	\$ 188.94	\$ 188.94
70553	26	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
70553	TC	A	XXX	4	N	D	N	N	\$ 148.22	\$ 148.22
70553		A	XXX	4	N	D	N	N	\$ 223.89	\$ 223.89
70554	26	Not Covered	XXX	4	N	D	N	N	\$ 69.89	\$ 69.89
70554	TC	Not Covered	XXX	4	N	D	N	N	\$ 194.73	\$ 194.73
70554		Not Covered	XXX	4	N	D	N	N	\$ 264.62	\$ 264.62
70555	26	Not Covered	XXX	N	N	D	N	N	\$ 82.66	\$ 82.66
70555	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
70555		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
70557	26	A	XXX	N	N	D	N	N	\$ 102.43	\$ 102.43
70557	TC	A	XXX	N	N	D	N	N	\$ 286.24	\$ 286.24
70557		A	XXX	N	N	D	N	N	\$ 388.71	\$ 388.71
70558	26	A	XXX	N	N	D	N	N	\$ 104.11	\$ 104.11
70558	TC	A	XXX	N	N	D	N	N	\$ 105.90	\$ 105.90
70558		A	XXX	N	N	D	N	N	\$ 209.98	\$ 209.98
70559	26	A	XXX	N	N	D	N	N	\$ 99.29	\$ 99.29
70559	TC	A	XXX	N	N	D	N	N	\$ 105.90	\$ 105.90
70559		A	XXX	N	N	D	N	N	\$ 205.10	\$ 205.10
71045	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
71045	TC	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
71045		A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
71046	26	A	XXX	N	N	D	N	N	\$ 7.23	\$ 7.23
71046	TC	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
71046		A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
71047	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
71047	TC	A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
71047		A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
71048	26	A	XXX	N	N	D	N	N	\$ 10.36	\$ 10.36
71048	TC	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
71048		A	XXX	N	N	D	N	N	\$ 28.68	\$ 28.68
71100	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
71100	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
71100		A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
71101	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
71101	TC	A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
71101		A	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
71110	26	A	XXX	N	B	D	N	N	\$ 9.40	\$ 9.40
71110	TC	A	XXX	N	B	D	N	N	\$ 18.08	\$ 18.08

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
71110		A	XXX	N	B	D	N	N	\$ 27.47	\$ 27.47
71111	26	A	XXX	N	B	D	N	N	\$ 10.36	\$ 10.36
71111	TC	A	XXX	N	B	D	N	N	\$ 22.41	\$ 22.41
71111		A	XXX	N	B	D	N	N	\$ 32.78	\$ 32.78
71120	26	A	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
71120	TC	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
71120		A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
71130	26	A	XXX	N	N	D	N	N	\$ 7.23	\$ 7.23
71130	TC	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
71130		A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
71250	26	A	XXX	4	N	D	N	N	\$ 35.43	\$ 35.43
71250	TC	A	XXX	4	N	D	N	N	\$ 54.95	\$ 54.95
71250		A	XXX	4	N	D	N	N	\$ 90.62	\$ 90.62
71260	26	A	XXX	4	N	D	N	N	\$ 38.32	\$ 38.32
71260	TC	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
71260		A	XXX	4	N	D	N	N	\$ 113.75	\$ 113.75
71270	26	A	XXX	4	N	D	N	N	\$ 40.97	\$ 40.97
71270	TC	A	XXX	4	N	D	N	N	\$ 93.51	\$ 93.51
71270		A	XXX	4	N	D	N	N	\$ 134.48	\$ 134.48
71271	26	A	XXX	4	N	D	N	N	\$ 35.43	\$ 35.43
71271	TC	A	XXX	4	N	D	N	N	\$ 57.84	\$ 57.84
71271		A	XXX	4	N	D	N	N	\$ 93.51	\$ 93.51
71275	26	A	XXX	4	N	D	N	N	\$ 53.50	\$ 53.50
71275	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
71275		A	XXX	4	N	D	N	N	\$ 159.64	\$ 159.64
71550	26	A	XXX	4	N	D	N	N	\$ 43.38	\$ 43.38
71550	TC	A	XXX	4	N	D	N	N	\$ 136.51	\$ 136.51
71550		A	XXX	4	N	D	N	N	\$ 179.85	\$ 179.85
71551	26	A	XXX	4	N	D	N	N	\$ 57.12	\$ 57.12
71551	TC	A	XXX	4	N	D	N	N	\$ 208.47	\$ 208.47
71551		A	XXX	4	N	D	N	N	\$ 265.58	\$ 265.58
71552	26	A	XXX	4	N	D	N	N	\$ 66.76	\$ 66.76
71552	TC	A	XXX	4	N	D	N	N	\$ 218.40	\$ 218.40
71552		A	XXX	4	N	D	N	N	\$ 285.14	\$ 285.14
71555	26	A	XXX	4	N	D	N	N	\$ 59.29	\$ 59.29
71555	TC	A	XXX	4	N	D	N	N	\$ 175.69	\$ 175.69
71555		A	XXX	4	N	D	N	N	\$ 234.98	\$ 234.98
72020	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
72020	TC	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
72020		A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
72040	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
72040	TC	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
72040		A	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
72050	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
72050	TC	A	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
72050		A	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
72052	26	A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
72052	TC	A	XXX	N	N	D	N	N	\$ 28.68	\$ 28.68
72052		A	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
72070	26	A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
72070	TC	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74
72070		A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
72072	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
72072	TC	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
72072		A	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
72074	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
72074	TC	A	XXX	N	N	D	N	N	\$ 19.76	\$ 19.76
72074		A	XXX	N	N	D	N	N	\$ 27.72	\$ 27.72
72080	26	A	XXX	N	N	D	N	N	\$ 6.99	\$ 6.99
72080	TC	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
72080		A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
72081	26	A	XXX	N	N	D	N	N	\$ 8.68	\$ 8.68
72081	TC	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
72081		A	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
72082	26	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
72082	TC	A	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
72082		A	XXX	N	N	D	N	N	\$ 43.38	\$ 43.38
72083	26	A	XXX	N	N	D	N	N	\$ 11.81	\$ 11.81
72083	TC	A	XXX	N	N	D	N	N	\$ 37.36	\$ 37.36
72083		A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
72084	26	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74
72084	TC	A	XXX	N	N	D	N	N	\$ 46.75	\$ 46.75
72084		A	XXX	N	N	D	N	N	\$ 60.73	\$ 60.73
72100	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
72100	TC	A	XXX	N	N	D	N	N	\$ 17.35	\$ 17.35
72100		A	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
72110	26	A	XXX	N	N	D	N	N	\$ 8.68	\$ 8.68
72110	TC	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
72110		A	XXX	N	N	D	N	N	\$ 31.57	\$ 31.57
72114	26	A	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
72114	TC	A	XXX	N	N	D	N	N	\$ 28.68	\$ 28.68
72114		A	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
72120	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
72120	TC	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
72120		A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
72125	26	A	XXX	4	N	D	N	N	\$ 33.02	\$ 33.02
72125	TC	A	XXX	4	N	D	N	N	\$ 55.67	\$ 55.67
72125		A	XXX	4	N	D	N	N	\$ 88.69	\$ 88.69
72126	26	A	XXX	4	N	D	N	N	\$ 40.01	\$ 40.01
72126	TC	A	XXX	4	N	D	N	N	\$ 75.19	\$ 75.19
72126		A	XXX	4	N	D	N	N	\$ 114.96	\$ 114.96
72127	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
72127	TC	A	XXX	4	N	D	N	N	\$ 93.03	\$ 93.03
72127		A	XXX	4	N	D	N	N	\$ 134.48	\$ 134.48
72128	26	A	XXX	4	N	D	N	N	\$ 33.02	\$ 33.02
72128	TC	A	XXX	4	N	D	N	N	\$ 55.43	\$ 55.43
72128		A	XXX	4	N	D	N	N	\$ 88.45	\$ 88.45
72129	26	A	XXX	4	N	D	N	N	\$ 40.01	\$ 40.01
72129	TC	A	XXX	4	N	D	N	N	\$ 75.67	\$ 75.67
72129		A	XXX	4	N	D	N	N	\$ 115.68	\$ 115.68
72130	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
72130	TC	A	XXX	4	N	D	N	N	\$ 93.75	\$ 93.75
72130		A	XXX	4	N	D	N	N	\$ 134.96	\$ 134.96
72131	26	A	XXX	4	N	D	N	N	\$ 33.02	\$ 33.02
72131	TC	A	XXX	4	N	D	N	N	\$ 55.19	\$ 55.19
72131		A	XXX	4	N	D	N	N	\$ 88.21	\$ 88.21
72132	26	A	XXX	4	N	D	N	N	\$ 40.01	\$ 40.01
72132	TC	A	XXX	4	N	D	N	N	\$ 75.19	\$ 75.19
72132		A	XXX	4	N	D	N	N	\$ 114.96	\$ 114.96
72133	26	A	XXX	4	N	D	N	N	\$ 41.45	\$ 41.45
72133	TC	A	XXX	4	N	D	N	N	\$ 93.03	\$ 93.03
72133		A	XXX	4	N	D	N	N	\$ 134.48	\$ 134.48
72141	26	A	XXX	4	N	D	N	N	\$ 48.44	\$ 48.44
72141	TC	A	XXX	4	N	D	N	N	\$ 84.83	\$ 84.83
72141		A	XXX	4	N	D	N	N	\$ 133.27	\$ 133.27
72142	26	A	XXX	4	N	D	N	N	\$ 59.05	\$ 59.05
72142	TC	A	XXX	4	N	D	N	N	\$ 134.24	\$ 134.24
72142		A	XXX	4	N	D	N	N	\$ 193.28	\$ 193.28
72146	26	A	XXX	4	N	D	N	N	\$ 48.44	\$ 48.44
72146	TC	A	XXX	4	N	D	N	N	\$ 84.83	\$ 84.83
72146		A	XXX	4	N	D	N	N	\$ 133.27	\$ 133.27
72147	26	A	XXX	4	N	D	N	N	\$ 59.05	\$ 59.05
72147	TC	A	XXX	4	N	D	N	N	\$ 133.03	\$ 133.03
72147		A	XXX	4	N	D	N	N	\$ 192.08	\$ 192.08
72148	26	A	XXX	4	N	D	N	N	\$ 48.44	\$ 48.44
72148	TC	A	XXX	4	N	D	N	N	\$ 85.07	\$ 85.07

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
72148		A	XXX	4	N	D	N	N	\$ 133.51	\$ 133.51
72149	26	A	XXX	4	N	D	N	N	\$ 59.05	\$ 59.05
72149	TC	A	XXX	4	N	D	N	N	\$ 131.35	\$ 131.35
72149		A	XXX	4	N	D	N	N	\$ 190.39	\$ 190.39
72156	26	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
72156	TC	A	XXX	4	N	D	N	N	\$ 150.14	\$ 150.14
72156		A	XXX	4	N	D	N	N	\$ 225.82	\$ 225.82
72157	26	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
72157	TC	A	XXX	4	N	D	N	N	\$ 150.63	\$ 150.63
72157		A	XXX	4	N	D	N	N	\$ 226.30	\$ 226.30
72158	26	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
72158	TC	A	XXX	4	N	D	N	N	\$ 149.66	\$ 149.66
72158		A	XXX	4	N	D	N	N	\$ 225.58	\$ 225.58
72159	26	Not Covered	XXX	4	N	D	N	N	\$ 59.53	\$ 59.53
72159	TC	Not Covered	XXX	4	N	N	N	N	\$ 182.92	\$ 182.92
72159		Not Covered	XXX	4	N	D	N	N	\$ 242.45	\$ 242.45
72170	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
72170	TC	A	XXX	N	N	D	N	N	\$ 11.57	\$ 11.57
72170		A	XXX	N	N	D	N	N	\$ 17.35	\$ 17.35
72190	26	A	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
72190	TC	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
72190		A	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
72191	26	A	XXX	4	N	D	N	N	\$ 53.02	\$ 53.02
72191	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
72191		A	XXX	4	N	D	N	N	\$ 159.04	\$ 159.04
72192	26	A	XXX	4	N	D	N	N	\$ 35.67	\$ 35.67
72192	TC	A	XXX	4	N	D	N	N	\$ 54.95	\$ 54.95
72192		A	XXX	4	N	D	N	N	\$ 90.86	\$ 90.86
72193	26	A	XXX	4	N	D	N	N	\$ 34.22	\$ 34.22
72193	TC	A	XXX	4	N	D	N	N	\$ 105.90	\$ 105.90
72193		A	XXX	4	N	D	N	N	\$ 140.06	\$ 140.06
72194	26	A	XXX	4	N	D	N	N	\$ 36.39	\$ 36.39
72194	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
72194		A	XXX	4	N	D	N	N	\$ 142.36	\$ 142.36
72195	26	A	XXX	4	N	D	N	N	\$ 47.72	\$ 47.72
72195	TC	A	XXX	4	N	D	N	N	\$ 113.99	\$ 113.99
72195		A	XXX	4	N	D	N	N	\$ 162.19	\$ 162.19
72196	26	A	XXX	4	N	D	N	N	\$ 57.36	\$ 57.36
72196	TC	A	XXX	4	N	D	N	N	\$ 133.03	\$ 133.03
72196		A	XXX	4	N	D	N	N	\$ 190.39	\$ 190.39
72197	26	A	XXX	4	N	D	N	N	\$ 72.30	\$ 72.30
72197	TC	A	XXX	4	N	D	N	N	\$ 166.77	\$ 166.77

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
72197		A	XXX	4	N	D	N	N	\$ 239.07	\$ 239.07
72198	26	A	XXX	4	N	D	N	N	\$ 58.80	\$ 58.80
72198	TC	A	XXX	4	N	D	N	N	\$ 177.38	\$ 177.38
72198		A	XXX	4	N	D	N	N	\$ 236.18	\$ 236.18
72200	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
72200	TC	A	XXX	N	N	D	N	N	\$ 14.94	\$ 14.94
72200		A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
72202	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
72202	TC	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
72202		A	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
72220	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
72220	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
72220		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
72240	26	A	XXX	N	N	D	N	N	\$ 30.37	\$ 30.37
72240	TC	A	XXX	N	N	D	N	N	\$ 43.38	\$ 43.38
72240		A	XXX	N	N	D	N	N	\$ 73.75	\$ 73.75
72255	26	A	XXX	N	N	D	N	N	\$ 32.29	\$ 32.29
72255	TC	A	XXX	N	N	D	N	N	\$ 43.14	\$ 43.14
72255		A	XXX	N	N	D	N	N	\$ 75.19	\$ 75.19
72265	26	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
72265	TC	A	XXX	N	N	D	N	N	\$ 41.69	\$ 41.69
72265		A	XXX	N	N	D	N	N	\$ 68.69	\$ 68.69
72270	26	A	XXX	N	N	D	N	N	\$ 44.59	\$ 44.59
72270	TC	A	XXX	N	N	D	N	N	\$ 50.37	\$ 50.37
72270		A	XXX	N	N	D	N	N	\$ 94.71	\$ 94.71
72275	26	A	XXX	N	N	D	N	N	\$ 26.03	\$ 26.03
72275	TC	A	XXX	N	N	D	N	N	\$ 61.94	\$ 61.94
72275		A	XXX	N	N	D	N	N	\$ 87.72	\$ 87.72
72285	26	A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
72285	TC	A	XXX	N	N	D	N	N	\$ 41.69	\$ 41.69
72285		A	XXX	N	N	D	N	N	\$ 80.49	\$ 80.49
72295	26	A	XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
72295	TC	A	XXX	N	N	D	N	N	\$ 43.14	\$ 43.14
72295		A	XXX	N	N	D	N	N	\$ 71.34	\$ 71.34
73000	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73000	TC	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
73000		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
73010	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
73010	TC	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
73010		A	XXX	N	N	D	N	N	\$ 14.94	\$ 14.94
73020	26	A	XXX	N	N	D	N	N	\$ 5.06	\$ 5.06
73020	TC	A	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
73020		A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
73030	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
73030	TC	A	XXX	N	N	D	N	N	\$ 15.18	\$ 15.18
73030		A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
73040	26	A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
73040	TC	A	XXX	N	N	D	N	N	\$ 62.90	\$ 62.90
73040		A	XXX	N	N	D	N	N	\$ 81.70	\$ 81.70
73050	26	A	XXX	N	B	D	N	N	\$ 6.27	\$ 6.27
73050	TC	A	XXX	N	B	D	N	N	\$ 11.57	\$ 11.57
73050		A	XXX	N	B	D	N	N	\$ 17.83	\$ 17.83
73060	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73060	TC	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
73060		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
73070	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73070	TC	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
73070		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
73080	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
73080	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
73080		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
73085	26	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
73085	TC	A	XXX	N	N	D	N	N	\$ 54.23	\$ 54.23
73085		A	XXX	N	N	D	N	N	\$ 73.51	\$ 73.51
73090	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
73090	TC	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
73090		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
73092	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
73092	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
73092		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73100	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73100	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
73100		A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
73110	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
73110	TC	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
73110		A	XXX	N	N	D	N	N	\$ 25.06	\$ 25.06
73115	26	A	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
73115	TC	A	XXX	N	N	D	N	N	\$ 66.28	\$ 66.28
73115		A	XXX	N	N	D	N	N	\$ 85.07	\$ 85.07
73120	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73120	TC	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
73120		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73130	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
73130	TC	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
73130		A	XXX	N	N	D	N	N	\$ 22.65	\$ 22.65
73140	26	A	XXX	N	N	D	N	N	\$ 4.58	\$ 4.58
73140	TC	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
73140		A	XXX	N	N	D	N	N	\$ 23.14	\$ 23.14
73200	26	A	XXX	4	N	D	N	N	\$ 29.64	\$ 29.64
73200	TC	A	XXX	4	N	D	N	N	\$ 64.61	\$ 64.61
73200		A	XXX	4	N	D	N	N	\$ 94.18	\$ 94.18
73201	26	A	XXX	4	N	D	N	N	\$ 38.08	\$ 38.08
73201	TC	A	XXX	4	N	D	N	N	\$ 100.02	\$ 100.02
73201		A	XXX	4	N	D	N	N	\$ 138.09	\$ 138.09
73202	26	A	XXX	4	N	D	N	N	\$ 36.39	\$ 36.39
73202	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
73202		A	XXX	4	N	D	N	N	\$ 142.36	\$ 142.36
73206	26	A	XXX	4	N	D	N	N	\$ 52.78	\$ 52.78
73206	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
73206		A	XXX	4	N	D	N	N	\$ 158.84	\$ 158.84
73218	26	A	XXX	4	N	D	N	N	\$ 40.49	\$ 40.49
73218	TC	A	XXX	4	N	D	N	N	\$ 136.51	\$ 136.51
73218		A	XXX	4	N	D	N	N	\$ 176.84	\$ 176.84
73219	26	A	XXX	4	N	D	N	N	\$ 53.98	\$ 53.98
73219	TC	A	XXX	4	N	D	N	N	\$ 181.71	\$ 181.71
73219		A	XXX	4	N	D	N	N	\$ 235.46	\$ 235.46
73220	26	A	XXX	4	N	D	N	N	\$ 70.85	\$ 70.85
73220	TC	A	XXX	4	N	D	N	N	\$ 221.48	\$ 221.48
73220		A	XXX	4	N	D	N	N	\$ 292.33	\$ 292.33
73221	26	A	XXX	4	N	D	N	N	\$ 44.83	\$ 44.83
73221	TC	A	XXX	4	N	D	N	N	\$ 95.92	\$ 95.92
73221		A	XXX	4	N	D	N	N	\$ 140.99	\$ 140.99
73222	26	A	XXX	4	N	D	N	N	\$ 53.98	\$ 53.98
73222	TC	A	XXX	4	N	D	N	N	\$ 169.18	\$ 169.18
73222		A	XXX	4	N	D	N	N	\$ 223.41	\$ 223.41
73223	26	A	XXX	4	N	D	N	N	\$ 71.10	\$ 71.10
73223	TC	A	XXX	4	N	D	N	N	\$ 204.85	\$ 204.85
73223		A	XXX	4	N	D	N	N	\$ 275.70	\$ 275.70
73225	26	A	XXX	4	N	D	N	N	\$ 57.36	\$ 57.36
73225	TC	A	XXX	4	N	N	N	N	\$ 182.92	\$ 182.92
73225		A	XXX	4	N	D	N	N	\$ 240.28	\$ 240.28
73501	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
73501	TC	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
73501		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
73502	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
73502	TC	A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
73502		A	XXX	N	N	D	N	N	\$ 28.92	\$ 28.92
73503	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
73503	TC	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
73503		A	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
73521	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
73521	TC	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
73521		A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
73522	26	A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
73522	TC	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
73522		A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
73523	26	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
73523	TC	A	XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
73523		A	XXX	N	N	D	N	N	\$ 38.08	\$ 38.08
73525	26	A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73525	TC	A	XXX	N	N	D	N	N	\$ 64.11	\$ 64.11
73525		A	XXX	N	N	D	N	N	\$ 83.87	\$ 83.87
73551	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73551	TC	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
73551		A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
73552	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
73552	TC	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
73552		A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
73560	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73560	TC	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
73560		A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
73562	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
73562	TC	A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
73562		A	XXX	N	N	D	N	N	\$ 25.06	\$ 25.06
73564	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
73564	TC	A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
73564		A	XXX	N	N	D	N	N	\$ 28.44	\$ 28.44
73565	26	A	XXX	N	B	D	N	N	\$ 5.78	\$ 5.78
73565	TC	A	XXX	N	B	D	N	N	\$ 19.52	\$ 19.52
73565		A	XXX	N	B	D	N	N	\$ 25.31	\$ 25.31
73580	26	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
73580	TC	A	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
73580		A	XXX	N	N	D	N	N	\$ 90.86	\$ 90.86
73590	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
73590	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
73590		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73592	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
73592	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
73592		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73600	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73600	TC	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
73600		A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
73610	26	A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
73610	TC	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
73610		A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
73615	26	A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
73615	TC	A	XXX	N	N	D	N	N	\$ 66.03	\$ 66.03
73615		A	XXX	N	N	D	N	N	\$ 85.31	\$ 85.31
73620	26	A	XXX	N	N	D	N	N	\$ 5.06	\$ 5.06
73620	TC	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
73620		A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
73630	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
73630	TC	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
73630		A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
73650	26	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
73650	TC	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
73650		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
73660	26	A	XXX	N	N	D	N	N	\$ 4.34	\$ 4.34
73660	TC	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74
73660		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
73700	26	A	XXX	4	N	D	N	N	\$ 33.02	\$ 33.02
73700	TC	A	XXX	4	N	D	N	N	\$ 55.19	\$ 55.19
73700		A	XXX	4	N	D	N	N	\$ 88.21	\$ 88.21
73701	26	A	XXX	4	N	D	N	N	\$ 38.08	\$ 38.08
73701	TC	A	XXX	4	N	D	N	N	\$ 75.43	\$ 75.43
73701		A	XXX	4	N	D	N	N	\$ 113.51	\$ 113.51
73702	26	A	XXX	4	N	D	N	N	\$ 39.77	\$ 39.77
73702	TC	A	XXX	4	N	D	N	N	\$ 92.30	\$ 92.30
73702		A	XXX	4	N	D	N	N	\$ 132.07	\$ 132.07
73706	26	A	XXX	4	N	D	N	N	\$ 55.43	\$ 55.43
73706	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
73706		A	XXX	4	N	D	N	N	\$ 161.55	\$ 161.55
73718	26	A	XXX	4	N	D	N	N	\$ 44.10	\$ 44.10
73718	TC	A	XXX	4	N	D	N	N	\$ 113.03	\$ 113.03
73718		A	XXX	4	N	D	N	N	\$ 157.13	\$ 157.13
73719	26	A	XXX	4	N	D	N	N	\$ 53.98	\$ 53.98
73719	TC	A	XXX	4	N	D	N	N	\$ 131.83	\$ 131.83
73719		A	XXX	4	N	D	N	N	\$ 185.57	\$ 185.57
73720	26	A	XXX	4	N	D	N	N	\$ 70.85	\$ 70.85
73720	TC	A	XXX	4	N	D	N	N	\$ 167.98	\$ 167.98

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
73720		A	XXX	4	N	D	N	N	\$ 238.83	\$ 238.83
73721	26	A	XXX	4	N	D	N	N	\$ 44.59	\$ 44.59
73721	TC	A	XXX	4	N	D	N	N	\$ 95.92	\$ 95.92
73721		A	XXX	4	N	D	N	N	\$ 140.50	\$ 140.50
73722	26	A	XXX	4	N	D	N	N	\$ 53.98	\$ 53.98
73722	TC	A	XXX	4	N	D	N	N	\$ 169.66	\$ 169.66
73722		A	XXX	4	N	D	N	N	\$ 223.65	\$ 223.65
73723	26	A	XXX	4	N	D	N	N	\$ 70.85	\$ 70.85
73723	TC	A	XXX	4	N	D	N	N	\$ 204.13	\$ 204.13
73723		A	XXX	4	N	D	N	N	\$ 274.98	\$ 274.98
73725	26	A	XXX	4	N	D	N	N	\$ 59.29	\$ 59.29
73725	TC	A	XXX	4	N	D	N	N	\$ 176.41	\$ 176.41
73725		A	XXX	4	N	D	N	N	\$ 235.70	\$ 235.70
74018	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
74018	TC	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
74018		A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
74019	26	A	XXX	N	N	D	N	N	\$ 7.71	\$ 7.71
74019	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
74019		A	XXX	N	N	D	N	N	\$ 23.14	\$ 23.14
74021	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
74021	TC	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
74021		A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
74022	26	A	XXX	N	N	D	N	N	\$ 10.36	\$ 10.36
74022	TC	A	XXX	N	N	D	N	N	\$ 20.73	\$ 20.73
74022		A	XXX	N	N	D	N	N	\$ 31.09	\$ 31.09
74150	26	A	XXX	4	N	D	N	N	\$ 39.04	\$ 39.04
74150	TC	A	XXX	4	N	D	N	N	\$ 54.47	\$ 54.47
74150		A	XXX	4	N	D	N	N	\$ 93.51	\$ 93.51
74160	26	A	XXX	4	N	D	N	N	\$ 37.84	\$ 37.84
74160	TC	A	XXX	4	N	D	N	N	\$ 105.90	\$ 105.90
74160		A	XXX	4	N	D	N	N	\$ 143.74	\$ 143.74
74170	26	A	XXX	4	N	D	N	N	\$ 41.69	\$ 41.69
74170	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
74170		A	XXX	4	N	D	N	N	\$ 147.65	\$ 147.65
74174	26	A	XXX	4	N	D	N	N	\$ 71.82	\$ 71.82
74174	TC	A	XXX	4	N	D	N	N	\$ 184.85	\$ 184.85
74174		A	XXX	4	N	D	N	N	\$ 256.67	\$ 256.67
74175	26	A	XXX	4	N	D	N	N	\$ 53.50	\$ 53.50
74175	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
74175		A	XXX	4	N	D	N	N	\$ 159.44	\$ 159.44
74176	26	A	XXX	4	N	N	N	N	\$ 57.60	\$ 57.60
74176	TC	A	XXX	4	N	N	N	N	\$ 67.96	\$ 67.96

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
74176		A	XXX	4	N	N	N	N	\$ 125.56	\$ 125.56
74177	26	A	XXX	4	N	N	N	N	\$ 60.25	\$ 60.25
74177	TC	A	XXX	4	N	N	N	N	\$ 147.97	\$ 147.97
74177		A	XXX	4	N	N	N	N	\$ 207.98	\$ 207.98
74178	26	A	XXX	4	N	N	N	N	\$ 66.03	\$ 66.03
74178	TC	A	XXX	4	N	N	N	N	\$ 167.25	\$ 167.25
74178		A	XXX	4	N	N	N	N	\$ 233.05	\$ 233.05
74181	26	A	XXX	4	N	D	N	N	\$ 47.72	\$ 47.72
74181	TC	A	XXX	4	N	D	N	N	\$ 89.89	\$ 89.89
74181		A	XXX	4	N	D	N	N	\$ 137.61	\$ 137.61
74182	26	A	XXX	4	N	D	N	N	\$ 57.12	\$ 57.12
74182	TC	A	XXX	4	N	D	N	N	\$ 157.13	\$ 157.13
74182		A	XXX	4	N	D	N	N	\$ 214.25	\$ 214.25
74183	26	A	XXX	4	N	D	N	N	\$ 72.30	\$ 72.30
74183	TC	A	XXX	4	N	D	N	N	\$ 167.25	\$ 167.25
74183		A	XXX	4	N	D	N	N	\$ 239.31	\$ 239.31
74185	26	A	XXX	4	N	D	N	N	\$ 59.05	\$ 59.05
74185	TC	A	XXX	4	N	D	N	N	\$ 177.62	\$ 177.62
74185		A	XXX	4	N	D	N	N	\$ 236.66	\$ 236.66
74190	26	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74
74190	TC	A	XXX	N	N	D	N	N	\$ 286.24	\$ 286.24
74190		A	XXX	N	N	D	N	N	\$ 300.05	\$ 300.05
74210	26	A	XXX	N	N	D	N	N	\$ 19.76	\$ 19.76
74210	TC	A	XXX	N	N	D	N	N	\$ 42.90	\$ 42.90
74210		A	XXX	N	N	D	N	N	\$ 62.66	\$ 62.66
74220	26	A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
74220	TC	A	XXX	N	N	D	N	N	\$ 43.38	\$ 43.38
74220		A	XXX	N	N	D	N	N	\$ 63.62	\$ 63.62
74221	26	A	XXX	N	N	D	N	N	\$ 23.14	\$ 23.14
74221	TC	A	XXX	N	N	D	N	N	\$ 48.20	\$ 48.20
74221		A	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
74230	26	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
74230	TC	A	XXX	N	N	D	N	N	\$ 65.07	\$ 65.07
74230		A	XXX	N	N	D	N	N	\$ 83.15	\$ 83.15
74235	26	A	XXX	N	N	D	N	N	\$ 39.04	\$ 39.04
74235	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74235		C	XXX	N	N	D	N	N	\$ -	\$ -
74240	26	A	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
74240	TC	A	XXX	N	N	D	N	N	\$ 52.54	\$ 52.54
74240		A	XXX	N	N	D	N	N	\$ 79.05	\$ 79.05
74246	26	A	XXX	N	N	D	N	N	\$ 29.40	\$ 29.40
74246	TC	A	XXX	N	N	D	N	N	\$ 60.97	\$ 60.97

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
74246		A	XXX	N	N	D	N	N	\$ 90.62	\$ 90.62
74248	26	A	ZZZ	N	N	D	N	N	\$ 23.14	\$ 23.14
74248	TC	A	ZZZ	N	N	D	N	N	\$ 31.09	\$ 31.09
74248		A	ZZZ	N	N	D	N	N	\$ 54.23	\$ 54.23
74250	26	A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
74250	TC	A	XXX	N	N	D	N	N	\$ 52.54	\$ 52.54
74250		A	XXX	N	N	D	N	N	\$ 79.29	\$ 79.29
74251	26	A	XXX	N	N	D	N	N	\$ 34.95	\$ 34.95
74251	TC	A	XXX	N	N	D	N	N	\$ 105.90	\$ 105.90
74251		A	XXX	N	N	D	N	N	\$ 140.82	\$ 140.82
74261	26	A	XXX	4	N	D	N	N	\$ 70.61	\$ 70.61
74261	TC	A	XXX	4	N	D	N	N	\$ 64.80	\$ 64.80
74261		A	XXX	4	N	D	N	N	\$ 135.50	\$ 135.50
74262	26	A	XXX	4	N	D	N	N	\$ 73.99	\$ 73.99
74262	TC	A	XXX	4	N	D	N	N	\$ 105.90	\$ 105.90
74262		A	XXX	4	N	D	N	N	\$ 179.79	\$ 179.79
74263	26	Not Covered	XXX	N	N	N	N	N	\$ 76.16	\$ 76.16
74263	TC	Not Covered	XXX	N	N	N	N	N	\$ 391.63	\$ 391.63
74263		Not Covered	XXX	N	N	N	N	N	\$ 467.78	\$ 467.78
74270	26	A	XXX	N	N	D	N	N	\$ 34.22	\$ 34.22
74270	TC	A	XXX	N	N	D	N	N	\$ 66.28	\$ 66.28
74270		A	XXX	N	N	D	N	N	\$ 100.26	\$ 100.26
74280	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
74280	TC	A	XXX	N	N	D	N	N	\$ 102.91	\$ 102.91
74280		A	XXX	N	N	D	N	N	\$ 143.88	\$ 143.88
74283	26	A	XXX	N	N	D	N	N	\$ 68.69	\$ 68.69
74283	TC	A	XXX	N	N	D	N	N	\$ 98.81	\$ 98.81
74283		A	XXX	N	N	D	N	N	\$ 167.50	\$ 167.50
74290	26	A	XXX	N	N	D	N	N	\$ 10.36	\$ 10.36
74290	TC	A	XXX	N	N	D	N	N	\$ 43.86	\$ 43.86
74290		A	XXX	N	N	D	N	N	\$ 54.23	\$ 54.23
74300	26	A	XXX	N	N	D	N	N	\$ 9.40	\$ 9.40
74300	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74300		C	XXX	N	N	D	N	N	\$ -	\$ -
74301	26	A	ZZZ	N	N	D	N	N	\$ 6.99	\$ 6.99
74301	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
74301		C	ZZZ	N	N	D	N	N	\$ -	\$ -
74328	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
74328	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74328		C	XXX	N	N	D	N	N	\$ -	\$ -
74329	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
74329	TC	C	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
74329		C	XXX	N	N	D	N	N	\$ -	\$ -
74330	26	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
74330	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74330		C	XXX	N	N	D	N	N	\$ -	\$ -
74340	26	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
74340	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74340		C	XXX	N	N	D	N	N	\$ -	\$ -
74355	26	A	XXX	N	N	D	N	N	\$ 25.31	\$ 25.31
74355	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74355		C	XXX	N	N	D	N	N	\$ -	\$ -
74360	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
74360	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74360		C	XXX	N	N	D	N	N	\$ -	\$ -
74363	26	A	XXX	N	N	D	N	N	\$ 28.92	\$ 28.92
74363	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74363		C	XXX	N	N	D	N	N	\$ -	\$ -
74400	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
74400	TC	A	XXX	N	N	D	N	N	\$ 68.20	\$ 68.20
74400		A	XXX	N	N	D	N	N	\$ 84.35	\$ 84.35
74410	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
74410	TC	A	XXX	N	N	D	N	N	\$ 70.85	\$ 70.85
74410		A	XXX	N	N	D	N	N	\$ 87.00	\$ 87.00
74415	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
74415	TC	A	XXX	N	N	D	N	N	\$ 82.42	\$ 82.42
74415		A	XXX	N	N	D	N	N	\$ 98.57	\$ 98.57
74420	26	A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
74420	TC	A	XXX	N	N	D	N	N	\$ 31.57	\$ 31.57
74420		A	XXX	N	N	D	N	N	\$ 48.44	\$ 48.44
74425	26	A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
74425	TC	A	XXX	N	N	D	N	N	\$ 69.41	\$ 69.41
74425		A	XXX	N	N	D	N	N	\$ 86.28	\$ 86.28
74430	26	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
74430	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
74430		A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
74440	26	A	XXX	N	N	D	N	N	\$ 12.05	\$ 12.05
74440	TC	A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
74440		A	XXX	N	N	D	N	N	\$ 61.21	\$ 61.21
74445	26	A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
74445	TC	A	XXX	N	N	D	N	N	\$ 64.61	\$ 64.61
74445		A	XXX	N	N	D	N	N	\$ 97.81	\$ 97.81
74450	26	A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
74450	TC	A	XXX	N	N	D	N	N	\$ 136.44	\$ 136.44

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
74450		A	XXX	N	N	D	N	N	\$ 146.11	\$ 146.11
74455	26	A	XXX	N	N	D	N	N	\$ 10.36	\$ 10.36
74455	TC	A	XXX	N	N	D	N	N	\$ 54.71	\$ 54.71
74455		A	XXX	N	N	D	N	N	\$ 65.07	\$ 65.07
74470	26	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
74470	TC	A	XXX	N	N	D	N	N	\$ 286.24	\$ 286.24
74470		A	XXX	N	N	D	N	N	\$ 301.92	\$ 301.92
74485	26	A	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
74485	TC	A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
74485		A	XXX	N	N	D	N	N	\$ 75.43	\$ 75.43
74710	26	A	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
74710	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
74710		A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
74712	26	A	XXX	4	N	D	N	N	\$ 88.45	\$ 88.45
74712	TC	A	XXX	4	N	D	N	N	\$ 136.51	\$ 136.51
74712		A	XXX	4	N	D	N	N	\$ 224.89	\$ 224.89
74713	26	A	ZZZ	N	N	D	N	N	\$ 60.97	\$ 60.97
74713	TC	A	ZZZ	N	N	D	N	N	\$ 80.74	\$ 80.74
74713		A	ZZZ	N	N	D	N	N	\$ 141.71	\$ 141.71
74740	26	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
74740	TC	A	XXX	N	N	D	N	N	\$ 47.96	\$ 47.96
74740		A	XXX	N	N	D	N	N	\$ 60.73	\$ 60.73
74742	26	A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
74742	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
74742		C	XXX	N	N	D	N	N	\$ -	\$ -
74775	26	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
74775	TC	A	XXX	N	N	D	N	N	\$ 136.44	\$ 136.44
74775		A	XXX	N	N	D	N	N	\$ 154.80	\$ 154.80
75557	26	A	XXX	4	N	D	N	N	\$ 76.40	\$ 76.40
75557	TC	A	XXX	4	N	D	N	N	\$ 122.19	\$ 122.19
75557		A	XXX	4	N	D	N	N	\$ 198.58	\$ 198.58
75559	26	A	XXX	4	N	D	N	N	\$ 93.51	\$ 93.51
75559	TC	A	XXX	4	N	D	N	N	\$ 180.51	\$ 180.51
75559		A	XXX	4	N	D	N	N	\$ 274.02	\$ 274.02
75561	26	A	XXX	4	N	D	N	N	\$ 84.83	\$ 84.83
75561	TC	A	XXX	4	N	D	N	N	\$ 175.69	\$ 175.69
75561		A	XXX	4	N	D	N	N	\$ 260.76	\$ 260.76
75563	26	A	XXX	4	N	D	N	N	\$ 97.12	\$ 97.12
75563	TC	A	XXX	4	N	D	N	N	\$ 209.19	\$ 209.19
75563		A	XXX	4	N	D	N	N	\$ 306.55	\$ 306.55
75565	26	A	ZZZ	N	N	D	N	N	\$ 8.19	\$ 8.19
75565	TC	A	ZZZ	N	N	D	N	N	\$ 24.34	\$ 24.34

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
75565		A	ZZZ	N	N	D	N	N	\$ 32.54	\$ 32.54
75571	26	Not Covered	XXX	4	N	D	N	N	\$ 19.52	\$ 19.52
75571	TC	Not Covered	XXX	4	N	D	N	N	\$ 46.75	\$ 46.75
75571		Not Covered	XXX	4	N	D	N	N	\$ 66.28	\$ 66.28
75572	26	A	XXX	4	N	D	N	N	\$ 51.57	\$ 51.57
75572	TC	A	XXX	4	N	D	N	N	\$ 106.05	\$ 106.05
75572		A	XXX	4	N	D	N	N	\$ 157.56	\$ 157.56
75573	26	A	XXX	4	N	D	N	N	\$ 74.95	\$ 74.95
75573	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
75573		A	XXX	4	N	D	N	N	\$ 181.06	\$ 181.06
75574	26	A	XXX	4	N	D	N	N	\$ 70.37	\$ 70.37
75574	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
75574		A	XXX	4	N	D	N	N	\$ 176.41	\$ 176.41
75600	26	A	XXX	6	N	D	N	N	\$ 16.39	\$ 16.39
75600	TC	A	XXX	6	N	D	N	N	\$ 107.97	\$ 107.97
75600		A	XXX	6	N	D	N	N	\$ 124.36	\$ 124.36
75605	26	A	XXX	6	N	D	N	N	\$ 37.11	\$ 37.11
75605	TC	A	XXX	6	N	D	N	N	\$ 44.10	\$ 44.10
75605		A	XXX	6	N	D	N	N	\$ 81.22	\$ 81.22
75625	26	A	XXX	6	N	D	N	N	\$ 47.72	\$ 47.72
75625	TC	A	XXX	6	N	D	N	N	\$ 40.25	\$ 40.25
75625		A	XXX	6	N	D	N	N	\$ 87.72	\$ 87.72
75630	26	A	XXX	6	N	D	N	N	\$ 66.03	\$ 66.03
75630	TC	A	XXX	6	N	D	N	N	\$ 42.66	\$ 42.66
75630		A	XXX	6	N	D	N	N	\$ 108.69	\$ 108.69
75635	26	A	XXX	4	N	D	N	N	\$ 70.13	\$ 70.13
75635	TC	A	XXX	4	N	D	N	N	\$ 105.97	\$ 105.97
75635		A	XXX	4	N	D	N	N	\$ 176.19	\$ 176.19
75705	26	A	XXX	6	N	D	N	N	\$ 79.77	\$ 79.77
75705	TC	A	XXX	6	N	D	N	N	\$ 81.46	\$ 81.46
75705		A	XXX	6	N	D	N	N	\$ 161.71	\$ 161.71
75710	26	A	XXX	6	N	D	N	N	\$ 58.08	\$ 58.08
75710	TC	A	XXX	6	N	D	N	N	\$ 45.55	\$ 45.55
75710		A	XXX	6	N	D	N	N	\$ 103.87	\$ 103.87
75716	26	A	XXX	6	B	D	N	N	\$ 64.83	\$ 64.83
75716	TC	A	XXX	6	B	D	N	N	\$ 46.75	\$ 46.75
75716		A	XXX	6	B	D	N	N	\$ 111.82	\$ 111.82
75726	26	A	XXX	6	N	D	N	N	\$ 65.31	\$ 65.31
75726	TC	A	XXX	6	N	D	N	N	\$ 50.61	\$ 50.61
75726		A	XXX	6	N	D	N	N	\$ 115.68	\$ 115.68
75731	26	A	XXX	6	N	D	N	N	\$ 37.36	\$ 37.36
75731	TC	A	XXX	6	N	D	N	N	\$ 62.18	\$ 62.18

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
75731		A	XXX	6	N	D	N	N	\$ 99.53	\$ 99.53
75733	26	A	XXX	6	B	D	N	N	\$ 42.18	\$ 42.18
75733	TC	A	XXX	6	B	D	N	N	\$ 67.72	\$ 67.72
75733		A	XXX	6	B	D	N	N	\$ 109.90	\$ 109.90
75736	26	A	XXX	6	N	D	N	N	\$ 36.63	\$ 36.63
75736	TC	A	XXX	6	N	D	N	N	\$ 56.64	\$ 56.64
75736		A	XXX	6	N	D	N	N	\$ 93.03	\$ 93.03
75741	26	A	XXX	6	N	D	N	N	\$ 42.18	\$ 42.18
75741	TC	A	XXX	6	N	D	N	N	\$ 46.27	\$ 46.27
75741		A	XXX	6	N	D	N	N	\$ 88.45	\$ 88.45
75743	26	A	XXX	6	B	D	N	N	\$ 53.26	\$ 53.26
75743	TC	A	XXX	6	B	D	N	N	\$ 47.00	\$ 47.00
75743		A	XXX	6	B	D	N	N	\$ 100.26	\$ 100.26
75746	26	A	XXX	6	N	D	N	N	\$ 36.39	\$ 36.39
75746	TC	A	XXX	6	N	D	N	N	\$ 52.30	\$ 52.30
75746		A	XXX	6	N	D	N	N	\$ 88.93	\$ 88.93
75756	26	A	XXX	6	N	D	N	N	\$ 37.60	\$ 37.60
75756	TC	A	XXX	6	N	D	N	N	\$ 64.83	\$ 64.83
75756		A	XXX	6	N	D	N	N	\$ 102.67	\$ 102.67
75774	26	A	ZZZ	N	N	D	N	N	\$ 32.54	\$ 32.54
75774	TC	A	ZZZ	N	N	D	N	N	\$ 34.46	\$ 34.46
75774		A	ZZZ	N	N	D	N	N	\$ 67.24	\$ 67.24
75801	26	A	XXX	N	N	D	N	N	\$ 26.99	\$ 26.99
75801	TC	A	XXX	N	N	D	N	N	\$ 321.00	\$ 321.00
75801		A	XXX	N	N	D	N	N	\$ 347.98	\$ 347.98
75803	26	A	XXX	N	B	D	N	N	\$ 34.46	\$ 34.46
75803	TC	A	XXX	N	B	D	N	N	\$ 833.40	\$ 833.40
75803		A	XXX	N	B	D	N	N	\$ 867.78	\$ 867.78
75805	26	A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
75805	TC	A	XXX	N	N	D	N	N	\$ 1,695.91	\$ 1,695.91
75805		A	XXX	N	N	D	N	N	\$ 1,719.98	\$ 1,719.98
75807	26	A	XXX	N	B	D	N	N	\$ 33.26	\$ 33.26
75807	TC	A	XXX	N	B	D	N	N	\$ 1,695.91	\$ 1,695.91
75807		A	XXX	N	B	D	N	N	\$ 1,729.18	\$ 1,729.18
75809	26	A	XXX	6	N	D	N	N	\$ 16.15	\$ 16.15
75809	TC	A	XXX	6	N	D	N	N	\$ 39.77	\$ 39.77
75809		A	XXX	6	N	D	N	N	\$ 55.91	\$ 55.91
75810	26	A	XXX	N	N	D	N	N	\$ 30.13	\$ 30.13
75810	TC	A	XXX	N	N	D	N	N	\$ 1,695.91	\$ 1,695.91
75810		A	XXX	N	N	D	N	N	\$ 1,726.04	\$ 1,726.04
75820	26	A	XXX	6	N	D	N	N	\$ 34.95	\$ 34.95
75820	TC	A	XXX	6	N	D	N	N	\$ 40.73	\$ 40.73

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
75820		A	XXX	6	N	D	N	N	\$ 75.67	\$ 75.67
75822	26	A	XXX	6	B	D	N	N	\$ 48.44	\$ 48.44
75822	TC	A	XXX	6	B	D	N	N	\$ 43.14	\$ 43.14
75822		A	XXX	6	B	D	N	N	\$ 91.58	\$ 91.58
75825	26	A	XXX	6	N	D	N	N	\$ 37.84	\$ 37.84
75825	TC	A	XXX	6	N	D	N	N	\$ 40.73	\$ 40.73
75825		A	XXX	6	N	D	N	N	\$ 78.57	\$ 78.57
75827	26	A	XXX	6	N	D	N	N	\$ 38.08	\$ 38.08
75827	TC	A	XXX	6	N	D	N	N	\$ 43.86	\$ 43.86
75827		A	XXX	6	N	D	N	N	\$ 81.94	\$ 81.94
75831	26	A	XXX	6	N	D	N	N	\$ 36.15	\$ 36.15
75831	TC	A	XXX	6	N	D	N	N	\$ 44.59	\$ 44.59
75831		A	XXX	6	N	D	N	N	\$ 80.49	\$ 80.49
75833	26	A	XXX	6	B	D	N	N	\$ 48.68	\$ 48.68
75833	TC	A	XXX	6	B	D	N	N	\$ 49.65	\$ 49.65
75833		A	XXX	6	B	D	N	N	\$ 98.57	\$ 98.57
75840	26	A	XXX	6	N	D	N	N	\$ 37.36	\$ 37.36
75840	TC	A	XXX	6	N	D	N	N	\$ 48.92	\$ 48.92
75840		A	XXX	6	N	D	N	N	\$ 86.28	\$ 86.28
75842	26	A	XXX	6	B	D	N	N	\$ 48.68	\$ 48.68
75842	TC	A	XXX	6	B	D	N	N	\$ 56.39	\$ 56.39
75842		A	XXX	6	B	D	N	N	\$ 105.32	\$ 105.32
75860	26	A	XXX	6	N	D	N	N	\$ 37.60	\$ 37.60
75860	TC	A	XXX	6	N	D	N	N	\$ 47.96	\$ 47.96
75860		A	XXX	6	N	D	N	N	\$ 85.56	\$ 85.56
75870	26	A	XXX	6	N	D	N	N	\$ 42.42	\$ 42.42
75870	TC	A	XXX	6	N	D	N	N	\$ 67.96	\$ 67.96
75870		A	XXX	6	N	D	N	N	\$ 110.14	\$ 110.14
75872	26	A	XXX	6	N	D	N	N	\$ 37.36	\$ 37.36
75872	TC	A	XXX	6	N	D	N	N	\$ 48.92	\$ 48.92
75872		A	XXX	6	N	D	N	N	\$ 86.28	\$ 86.28
75880	26	A	XXX	6	N	D	N	N	\$ 23.14	\$ 23.14
75880	TC	A	XXX	6	N	D	N	N	\$ 48.68	\$ 48.68
75880		A	XXX	6	N	D	N	N	\$ 71.82	\$ 71.82
75885	26	A	XXX	6	N	D	N	N	\$ 45.31	\$ 45.31
75885	TC	A	XXX	6	N	D	N	N	\$ 47.00	\$ 47.00
75885		A	XXX	6	N	D	N	N	\$ 92.30	\$ 92.30
75887	26	A	XXX	6	N	D	N	N	\$ 45.55	\$ 45.55
75887	TC	A	XXX	6	N	D	N	N	\$ 47.48	\$ 47.48
75887		A	XXX	6	N	D	N	N	\$ 93.03	\$ 93.03
75889	26	A	XXX	6	N	D	N	N	\$ 35.43	\$ 35.43
75889	TC	A	XXX	6	N	D	N	N	\$ 47.24	\$ 47.24

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
75889		A	XXX	6	N	D	N	N	\$ 82.42	\$ 82.42
75891	26	A	XXX	6	N	D	N	N	\$ 35.67	\$ 35.67
75891	TC	A	XXX	6	N	D	N	N	\$ 47.48	\$ 47.48
75891		A	XXX	6	N	D	N	N	\$ 83.39	\$ 83.39
75893	26	A	XXX	6	N	D	N	N	\$ 17.83	\$ 17.83
75893	TC	A	XXX	6	N	D	N	N	\$ 51.57	\$ 51.57
75893		A	XXX	6	N	D	N	N	\$ 69.17	\$ 69.17
75894	26	A	XXX	N	N	D	N	N	\$ 48.68	\$ 48.68
75894	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75894		C	XXX	N	N	D	N	N	\$ -	\$ -
75898	26	A	XXX	N	N	D	N	N	\$ 55.91	\$ 55.91
75898	TC	A	XXX	N	N	D	N	N	\$ 1,695.91	\$ 1,695.91
75898		A	XXX	N	N	D	N	N	\$ 1,751.75	\$ 1,751.75
75901	26	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
75901	TC	A	XXX	N	N	D	N	N	\$ 130.14	\$ 130.14
75901		A	XXX	N	N	D	N	N	\$ 146.29	\$ 146.29
75902	26	A	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01
75902	TC	A	XXX	N	N	D	N	N	\$ 44.59	\$ 44.59
75902		A	XXX	N	N	D	N	N	\$ 57.60	\$ 57.60
75956	26	A	XXX	N	N	D	N	N	\$ 236.66	\$ 236.66
75956	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75956		C	XXX	N	N	D	N	N	\$ -	\$ -
75957	26	A	XXX	N	N	D	N	N	\$ 203.16	\$ 203.16
75957	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75957		C	XXX	N	N	D	N	N	\$ -	\$ -
75958	26	A	XXX	N	N	D	N	N	\$ 134.48	\$ 134.48
75958	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75958		C	XXX	N	N	D	N	N	\$ -	\$ -
75959	26	A	XXX	N	N	D	N	N	\$ 118.09	\$ 118.09
75959	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75959		C	XXX	N	N	D	N	N	\$ -	\$ -
75970	26	A	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
75970	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
75970		C	XXX	N	N	D	N	N	\$ -	\$ -
75984	26	A	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
75984	TC	A	XXX	N	N	D	N	N	\$ 40.25	\$ 40.25
75984		A	XXX	N	N	D	N	N	\$ 66.28	\$ 66.28
75989	26	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
75989	TC	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
75989		A	XXX	N	N	D	N	N	\$ 76.40	\$ 76.40
76000	26	A	XXX	N	N	D	N	N	\$ 10.60	\$ 10.60
76000	TC	A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76000		A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
76010	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
76010	TC	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
76010		A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
76080	26	A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
76080	TC	A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
76080		A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
76098	26	A	XXX	N	N	D	N	N	\$ 10.36	\$ 10.36
76098	TC	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
76098		A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
76100	26	A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
76100	TC	A	XXX	N	N	D	N	N	\$ 39.28	\$ 39.28
76100		A	XXX	N	N	D	N	N	\$ 59.29	\$ 59.29
76101	26	A	XXX	N	N	D	N	N	\$ 19.76	\$ 19.76
76101	TC	A	XXX	N	N	D	N	N	\$ 46.27	\$ 46.27
76101		A	XXX	N	N	D	N	N	\$ 65.79	\$ 65.79
76102	26	A	XXX	N	B	D	N	N	\$ 18.08	\$ 18.08
76102	TC	A	XXX	N	B	D	N	N	\$ 64.68	\$ 64.68
76102		A	XXX	N	B	D	N	N	\$ 82.76	\$ 82.76
76120	26	A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
76120	TC	A	XXX	N	N	D	N	N	\$ 58.32	\$ 58.32
76120		A	XXX	N	N	D	N	N	\$ 71.82	\$ 71.82
76125	26	A	ZZZ	N	N	D	N	N	\$ 8.92	\$ 8.92
76125	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
76125		C	ZZZ	N	N	D	N	N	\$ -	\$ -
76140		C	XXX	N	N	N	N	N	\$ -	\$ -
76145		Not Covered	XXX	N	N	D	N	N	\$ 507.06	\$ 507.06
76376	26	Not Covered	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
76376	TC	Not Covered	XXX	N	N	D	N	N	\$ 7.95	\$ 7.95
76376		Not Covered	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
76377	26	Not Covered	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
76377	TC	Not Covered	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
76377		Not Covered	XXX	N	N	D	N	N	\$ 46.03	\$ 46.03
76380	26	A	XXX	N	N	D	N	N	\$ 28.44	\$ 28.44
76380	TC	A	XXX	N	N	D	N	N	\$ 48.09	\$ 48.09
76380		A	XXX	N	N	D	N	N	\$ 76.66	\$ 76.66
76390	26	A	XXX	N	N	N	N	N	\$ 46.27	\$ 46.27
76390	TC	A	XXX	N	N	N	N	N	\$ 213.53	\$ 213.53
76390		A	XXX	N	N	N	N	N	\$ 259.80	\$ 259.80
76391	26	A	XXX	4	N	D	N	N	\$ 36.15	\$ 36.15
76391	TC	A	XXX	4	N	D	N	N	\$ 106.52	\$ 106.52
76391		A	XXX	4	N	D	N	N	\$ 142.67	\$ 142.67

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76496	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76496	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ 48.09	\$ 48.09
76496		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76497	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76497	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ 48.09	\$ 48.09
76497		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76498	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76498	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ 48.09	\$ 48.09
76498		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76499	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76499	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76499		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76506	26	A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
76506	TC	A	XXX	N	N	D	N	N	\$ 52.30	\$ 52.30
76506		A	XXX	N	N	D	N	N	\$ 73.75	\$ 73.75
76510	26	A	XXX	7	N	D	N	N	\$ 26.03	\$ 26.03
76510	TC	A	XXX	7	N	D	N	N	\$ 20.49	\$ 20.49
76510		A	XXX	7	N	D	N	N	\$ 46.51	\$ 46.51
76511	26	A	XXX	7	N	D	N	N	\$ 23.62	\$ 23.62
76511	TC	A	XXX	7	N	D	N	N	\$ 13.50	\$ 13.50
76511		A	XXX	7	N	D	N	N	\$ 37.11	\$ 37.11
76512	26	A	XXX	7	N	D	N	N	\$ 20.24	\$ 20.24
76512	TC	A	XXX	7	N	D	N	N	\$ 11.09	\$ 11.09
76512		A	XXX	7	N	D	N	N	\$ 31.57	\$ 31.57
76513	26	A	XXX	7	N	D	N	N	\$ 21.21	\$ 21.21
76513	TC	A	XXX	7	N	D	N	N	\$ 28.20	\$ 28.20
76513		A	XXX	7	N	D	N	N	\$ 49.41	\$ 49.41
76514	26	A	XXX	7	B	D	N	N	\$ 5.30	\$ 5.30
76514	TC	A	XXX	7	B	D	N	N	\$ 2.41	\$ 2.41
76514		A	XXX	7	B	D	N	N	\$ 7.47	\$ 7.47
76516	26	A	XXX	7	B	D	N	N	\$ 14.94	\$ 14.94
76516	TC	A	XXX	7	B	D	N	N	\$ 14.70	\$ 14.70
76516		A	XXX	7	B	D	N	N	\$ 29.64	\$ 29.64
76519	26	A	XXX	7	N	D	N	N	\$ 20.00	\$ 20.00
76519	TC	A	XXX	7	B	D	N	N	\$ 22.41	\$ 22.41
76519		A	XXX	7	B	D	N	N	\$ 42.42	\$ 42.42
76529	26	A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
76529	TC	A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
76529		A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
76536	26	A	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
76536	TC	A	XXX	N	N	D	N	N	\$ 53.98	\$ 53.98
76536		A	XXX	N	N	D	N	N	\$ 73.02	\$ 73.02

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76604	26	A	XXX	4	N	D	N	N	\$ 19.28	\$ 19.28
76604	TC	A	XXX	4	N	D	N	N	\$ 23.62	\$ 23.62
76604		A	XXX	4	N	D	N	N	\$ 42.90	\$ 42.90
76641	26	A	XXX	N	Y	D	N	N	\$ 24.10	\$ 24.10
76641	TC	A	XXX	N	Y	D	N	N	\$ 43.14	\$ 43.14
76641		A	XXX	N	Y	D	N	N	\$ 67.48	\$ 67.48
76642	26	A	XXX	N	Y	D	N	N	\$ 22.65	\$ 22.65
76642	TC	A	XXX	N	Y	D	N	N	\$ 33.02	\$ 33.02
76642		A	XXX	N	Y	D	N	N	\$ 55.91	\$ 55.91
76700	26	A	XXX	4	N	D	N	N	\$ 26.75	\$ 26.75
76700	TC	A	XXX	4	N	D	N	N	\$ 50.37	\$ 50.37
76700		A	XXX	4	N	D	N	N	\$ 77.12	\$ 77.12
76705	26	A	XXX	4	N	D	N	N	\$ 19.76	\$ 19.76
76705	TC	A	XXX	4	N	D	N	N	\$ 37.84	\$ 37.84
76705		A	XXX	4	N	D	N	N	\$ 57.60	\$ 57.60
76706	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
76706	TC	A	XXX	N	N	D	N	N	\$ 50.37	\$ 50.37
76706		A	XXX	N	N	D	N	N	\$ 68.93	\$ 68.93
76770	26	A	XXX	4	N	D	N	N	\$ 24.34	\$ 24.34
76770	TC	A	XXX	4	N	D	N	N	\$ 46.75	\$ 46.75
76770		A	XXX	4	N	D	N	N	\$ 71.10	\$ 71.10
76775	26	A	XXX	4	N	D	N	N	\$ 19.52	\$ 19.52
76775	TC	A	XXX	4	N	D	N	N	\$ 18.56	\$ 18.56
76775		A	XXX	4	N	D	N	N	\$ 38.08	\$ 38.08
76776	26	A	XXX	4	N	D	N	N	\$ 25.06	\$ 25.06
76776	TC	A	XXX	4	N	D	N	N	\$ 72.30	\$ 72.30
76776		A	XXX	4	N	D	N	N	\$ 97.36	\$ 97.36
76800	26	A	XXX	N	N	D	N	N	\$ 40.01	\$ 40.01
76800	TC	A	XXX	N	N	D	N	N	\$ 52.06	\$ 52.06
76800		A	XXX	N	N	D	N	N	\$ 92.06	\$ 92.06
76801	26	A	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
76801	TC	A	XXX	N	N	D	N	N	\$ 44.59	\$ 44.59
76801		A	XXX	N	N	D	N	N	\$ 77.36	\$ 77.36
76802	26	A	ZZZ	N	N	D	N	N	\$ 27.72	\$ 27.72
76802	TC	A	ZZZ	N	N	D	N	N	\$ 13.50	\$ 13.50
76802		A	ZZZ	N	N	D	N	N	\$ 40.97	\$ 40.97
76805	26	A	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
76805	TC	A	XXX	N	N	D	N	N	\$ 55.91	\$ 55.91
76805		A	XXX	N	N	D	N	N	\$ 88.69	\$ 88.69
76810	26	A	ZZZ	N	N	D	N	N	\$ 32.54	\$ 32.54
76810	TC	A	ZZZ	N	N	D	N	N	\$ 26.51	\$ 26.51
76810		A	ZZZ	N	N	D	N	N	\$ 59.05	\$ 59.05

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76811	26	A	XXX	N	N	D	N	N	\$ 62.42	\$ 62.42
76811	TC	A	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
76811		A	XXX	N	N	D	N	N	\$ 113.51	\$ 113.51
76812	26	A	ZZZ	N	N	D	N	N	\$ 58.32	\$ 58.32
76812	TC	A	ZZZ	N	N	D	N	N	\$ 68.44	\$ 68.44
76812		A	ZZZ	N	N	D	N	N	\$ 127.01	\$ 127.01
76813	26	A	XXX	N	N	D	N	N	\$ 39.04	\$ 39.04
76813	TC	A	XXX	N	N	D	N	N	\$ 39.28	\$ 39.28
76813		A	XXX	N	N	D	N	N	\$ 78.33	\$ 78.33
76814	26	A	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
76814	TC	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
76814		A	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
76815	26	A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
76815	TC	A	XXX	N	N	D	N	N	\$ 31.81	\$ 31.81
76815		A	XXX	N	N	D	N	N	\$ 53.74	\$ 53.74
76816	26	A	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
76816	TC	A	XXX	N	N	D	N	N	\$ 43.86	\$ 43.86
76816		A	XXX	N	N	D	N	N	\$ 72.06	\$ 72.06
76817	26	A	XXX	N	N	D	N	N	\$ 25.06	\$ 25.06
76817	TC	A	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
76817		A	XXX	N	N	D	N	N	\$ 61.21	\$ 61.21
76818	26	A	XXX	N	N	D	N	N	\$ 34.70	\$ 34.70
76818	TC	A	XXX	N	N	D	N	N	\$ 40.01	\$ 40.01
76818		A	XXX	N	N	D	N	N	\$ 74.71	\$ 74.71
76819	26	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
76819	TC	A	XXX	N	N	D	N	N	\$ 29.64	\$ 29.64
76819		A	XXX	N	N	D	N	N	\$ 55.43	\$ 55.43
76820	26	A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
76820	TC	A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
76820		A	XXX	N	N	D	N	N	\$ 30.13	\$ 30.13
76821	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
76821	TC	A	XXX	N	N	D	N	N	\$ 34.95	\$ 34.95
76821		A	XXX	N	N	D	N	N	\$ 58.08	\$ 58.08
76825	26	A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
76825	TC	A	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
76825		A	XXX	N	N	D	N	N	\$ 173.28	\$ 173.28
76826	26	A	XXX	N	N	D	N	N	\$ 27.47	\$ 27.47
76826	TC	A	XXX	N	N	D	N	N	\$ 75.92	\$ 75.92
76826		A	XXX	N	N	D	N	N	\$ 103.39	\$ 103.39
76827	26	A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
76827	TC	A	XXX	N	N	D	N	N	\$ 27.72	\$ 27.72
76827		A	XXX	N	N	D	N	N	\$ 46.75	\$ 46.75

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76828	26	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
76828	TC	A	XXX	N	N	D	N	N	\$ 14.94	\$ 14.94
76828		A	XXX	N	N	D	N	N	\$ 33.50	\$ 33.50
76830	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
76830	TC	A	XXX	N	N	D	N	N	\$ 54.95	\$ 54.95
76830		A	XXX	N	N	D	N	N	\$ 78.08	\$ 78.08
76831	26	A	XXX	4	N	D	N	N	\$ 24.10	\$ 24.10
76831	TC	A	XXX	4	N	D	N	N	\$ 52.06	\$ 52.06
76831		A	XXX	4	N	D	N	N	\$ 76.40	\$ 76.40
76856	26	A	XXX	4	N	D	N	N	\$ 22.90	\$ 22.90
76856	TC	A	XXX	4	N	D	N	N	\$ 46.27	\$ 46.27
76856		A	XXX	4	N	D	N	N	\$ 69.41	\$ 69.41
76857	26	A	XXX	4	N	D	N	N	\$ 16.15	\$ 16.15
76857	TC	A	XXX	4	N	D	N	N	\$ 14.70	\$ 14.70
76857		A	XXX	4	N	D	N	N	\$ 31.09	\$ 31.09
76870	26	A	XXX	4	N	D	N	N	\$ 21.45	\$ 21.45
76870	TC	A	XXX	4	N	D	N	N	\$ 44.83	\$ 44.83
76870		A	XXX	4	N	D	N	N	\$ 66.28	\$ 66.28
76872	26	A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
76872	TC	A	XXX	N	N	D	N	N	\$ 64.61	\$ 64.61
76872		A	XXX	N	N	D	N	N	\$ 84.79	\$ 84.79
76873	26	A	XXX	N	N	D	N	N	\$ 51.57	\$ 51.57
76873	TC	A	XXX	N	N	D	N	N	\$ 61.21	\$ 61.21
76873		A	XXX	N	N	D	N	N	\$ 112.79	\$ 112.79
76881	26	A	XXX	N	N	D	N	N	\$ 20.73	\$ 20.73
76881	TC	A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
76881		A	XXX	N	N	D	N	N	\$ 42.66	\$ 42.66
76882	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
76882	TC	A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
76882		A	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
76885	26	A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
76885	TC	A	XXX	N	N	D	N	N	\$ 48.17	\$ 48.17
76885		A	XXX	N	N	D	N	N	\$ 69.88	\$ 69.88
76886	26	A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
76886	TC	A	XXX	N	N	D	N	N	\$ 45.31	\$ 45.31
76886		A	XXX	N	N	D	N	N	\$ 66.28	\$ 66.28
76932	26	A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
76932	TC	C	YYY	N	N	D	N	N	\$ -	\$ -
76932		C	YYY	N	N	D	N	N	\$ -	\$ -
76936	26	A	XXX	N	N	D	N	N	\$ 65.79	\$ 65.79
76936	TC	A	XXX	N	N	D	N	N	\$ 106.76	\$ 106.76
76936		A	XXX	N	N	D	N	N	\$ 172.56	\$ 172.56

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76937	26	A	ZZZ	N	N	D	N	N	\$ 9.40	\$ 9.40
76937	TC	A	ZZZ	N	N	D	N	N	\$ 14.94	\$ 14.94
76937		A	ZZZ	N	N	D	N	N	\$ 24.34	\$ 24.34
76940	26	A	XXX	N	N	D	N	N	\$ 69.65	\$ 69.65
76940	TC	C	YYY	N	N	D	N	N	\$ -	\$ -
76940		C	YYY	N	N	D	N	N	\$ -	\$ -
76941	26	A	XXX	N	N	D	N	N	\$ 44.10	\$ 44.10
76941	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
76941		C	XXX	N	N	D	N	N	\$ -	\$ -
76942	26	A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
76942	TC	A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
76942		A	XXX	N	N	D	N	N	\$ 37.60	\$ 37.60
76945	26	A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
76945	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
76945		C	XXX	N	N	D	N	N	\$ -	\$ -
76946	26	A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
76946	TC	A	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
76946		A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
76948	26	A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
76948	TC	A	XXX	N	N	D	N	N	\$ 28.92	\$ 28.92
76948		A	XXX	N	N	D	N	N	\$ 51.33	\$ 51.33
76965	26	A	XXX	N	N	D	N	N	\$ 45.07	\$ 45.07
76965	TC	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
76965		A	XXX	N	N	D	N	N	\$ 60.73	\$ 60.73
76975	26	A	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
76975	TC	A	XXX	N	N	D	N	N	\$ 136.44	\$ 136.44
76975		A	XXX	N	N	D	N	N	\$ 161.12	\$ 161.12
76977	26	A	XXX	N	N	D	N	N	\$ 1.93	\$ 1.93
76977	TC	A	XXX	N	N	D	N	N	\$ 2.65	\$ 2.65
76977		A	XXX	N	N	D	N	N	\$ 4.58	\$ 4.58
76978	26	Not Covered	XXX	4	N	D	N	N	\$ 53.74	\$ 53.74
76978	TC	Not Covered	XXX	4	N	D	N	N	\$ 144.60	\$ 144.60
76978		Not Covered	XXX	4	N	D	N	N	\$ 198.34	\$ 198.34
76979	26	Not Covered	ZZZ	N	N	D	N	N	\$ 28.20	\$ 28.20
76979	TC	Not Covered	ZZZ	N	N	D	N	N	\$ 106.04	\$ 106.04
76979		Not Covered	ZZZ	N	N	D	N	N	\$ 134.24	\$ 134.24
76981	26	A	XXX	4	N	D	N	N	\$ 19.76	\$ 19.76
76981	TC	A	XXX	4	N	D	N	N	\$ 47.48	\$ 47.48
76981		A	XXX	4	N	D	N	N	\$ 67.48	\$ 67.48
76982	26	A	XXX	4	N	D	N	N	\$ 20.00	\$ 20.00
76982	TC	A	XXX	4	N	D	N	N	\$ 42.90	\$ 42.90
76982		A	XXX	4	N	D	N	N	\$ 62.90	\$ 62.90

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
76983	26	A	ZZZ	N	N	D	N	N	\$ 16.63	\$ 16.63
76983	TC	A	ZZZ	N	N	D	N	N	\$ 22.90	\$ 22.90
76983		A	ZZZ	N	N	D	N	N	\$ 39.52	\$ 39.52
76998	26	A	XXX	N	N	D	N	N	\$ 43.14	\$ 43.14
76998	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
76998		C	XXX	N	N	D	N	N	\$ -	\$ -
76999	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76999	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
76999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77001	26	A	ZZZ	N	N	D	N	N	\$ 12.77	\$ 12.77
77001	TC	A	ZZZ	N	N	D	N	N	\$ 51.09	\$ 51.09
77001		A	ZZZ	N	N	D	N	N	\$ 63.87	\$ 63.87
77002	26	A	ZZZ	N	N	D	N	N	\$ 18.80	\$ 18.80
77002	TC	A	ZZZ	N	N	D	N	N	\$ 53.98	\$ 53.98
77002		A	ZZZ	N	N	D	N	N	\$ 72.78	\$ 72.78
77003	26	A	ZZZ	N	N	D	N	N	\$ 20.00	\$ 20.00
77003	TC	A	ZZZ	N	N	D	N	N	\$ 46.03	\$ 46.03
77003		A	ZZZ	N	N	D	N	N	\$ 66.03	\$ 66.03
77011	26	A	XXX	N	N	N	N	N	\$ 42.42	\$ 42.42
77011	TC	A	XXX	N	N	N	N	N	\$ 105.32	\$ 105.32
77011		A	XXX	N	N	N	N	N	\$ 147.73	\$ 147.73
77012	26	A	XXX	N	N	N	N	N	\$ 48.92	\$ 48.92
77012	TC	A	XXX	N	N	N	N	N	\$ 46.51	\$ 46.51
77012		A	XXX	N	N	N	N	N	\$ 95.44	\$ 95.44
77013	26	A	XXX	N	N	D	N	N	\$ 126.28	\$ 126.28
77013	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
77013		C	XXX	N	N	D	N	N	\$ -	\$ -
77014	26	A	XXX	N	N	N	N	N	\$ 30.13	\$ 30.13
77014	TC	A	XXX	N	N	N	N	N	\$ 47.96	\$ 47.96
77014		A	XXX	N	N	N	N	N	\$ 78.08	\$ 78.08
77021	26	A	XXX	N	N	N	N	N	\$ 47.96	\$ 47.96
77021	TC	A	XXX	N	N	N	N	N	\$ 237.14	\$ 237.14
77021		A	XXX	N	N	N	N	N	\$ 284.86	\$ 284.86
77022	26	A	XXX	N	N	N	N	N	\$ 141.47	\$ 141.47
77022	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
77022		C	XXX	N	N	D	N	N	\$ -	\$ -
77046	26	A	XXX	4	N	D	N	N	\$ 47.48	\$ 47.48
77046	TC	A	XXX	4	N	D	N	N	\$ 102.18	\$ 102.18
77046		A	XXX	4	N	D	N	N	\$ 149.90	\$ 149.90
77047	26	A	XXX	4	B	D	N	N	\$ 52.30	\$ 52.30
77047	TC	A	XXX	4	B	D	N	N	\$ 101.70	\$ 101.70
77047		A	XXX	4	B	D	N	N	\$ 154.24	\$ 154.24

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77048	26	A	XXX	4	N	D	N	N	\$ 69.17	\$ 69.17
77048	TC	A	XXX	4	N	D	N	N	\$ 168.46	\$ 168.46
77048		A	XXX	4	N	D	N	N	\$ 237.63	\$ 237.63
77049	26	A	XXX	4	B	D	N	N	\$ 75.67	\$ 75.67
77049	TC	A	XXX	4	B	D	N	N	\$ 167.50	\$ 167.50
77049		A	XXX	4	B	D	N	N	\$ 243.41	\$ 243.41
77053	26	A	XXX	N	N	N	N	N	\$ 11.81	\$ 11.81
77053	TC	A	XXX	N	N	N	N	N	\$ 22.90	\$ 22.90
77053		A	XXX	N	N	N	N	N	\$ 35.19	\$ 35.19
77054	26	A	XXX	N	N	N	N	N	\$ 14.70	\$ 14.70
77054	TC	A	XXX	N	N	N	N	N	\$ 30.37	\$ 30.37
77054		A	XXX	N	N	N	N	N	\$ 45.31	\$ 45.31
77061	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77061	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77061		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77062	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77062	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77062		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77063	26	A	ZZZ	N	B	N	N	N	\$ 20.24	\$ 20.24
77063	TC	A	ZZZ	N	B	N	N	N	\$ 15.18	\$ 15.18
77063		A	ZZZ	N	B	N	N	N	\$ 35.43	\$ 35.43
77065	26	A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
77065	TC	A	XXX	N	N	D	N	N	\$ 54.23	\$ 54.23
77065		A	XXX	N	N	D	N	N	\$ 80.98	\$ 80.98
77066	26	A	XXX	N	B	D	N	N	\$ 33.02	\$ 33.02
77066	TC	A	XXX	N	B	D	N	N	\$ 69.41	\$ 69.41
77066		A	XXX	N	B	D	N	N	\$ 102.18	\$ 102.18
77067	26	A	XXX	N	B	D	N	N	\$ 25.31	\$ 25.31
77067	TC	A	XXX	N	B	D	N	N	\$ 57.36	\$ 57.36
77067		A	XXX	N	B	D	N	N	\$ 82.66	\$ 82.66
77071		A	XXX	N	B	D	N	N	\$ 34.95	\$ 34.95
77072	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
77072	TC	A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
77072		A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
77073	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
77073	TC	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
77073		A	XXX	N	N	D	N	N	\$ 28.44	\$ 28.44
77074	26	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
77074	TC	A	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
77074		A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
77075	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
77075	TC	A	XXX	N	N	D	N	N	\$ 43.38	\$ 43.38

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77075		A	XXX	N	N	D	N	N	\$ 61.94	\$ 61.94
77076	26	A	XXX	N	N	D	N	N	\$ 23.14	\$ 23.14
77076	TC	A	XXX	N	N	D	N	N	\$ 43.86	\$ 43.86
77076		A	XXX	N	N	D	N	N	\$ 67.00	\$ 67.00
77077	26	A	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
77077	TC	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
77077		A	XXX	N	N	D	N	N	\$ 29.88	\$ 29.88
77078	26	A	XXX	N	N	D	N	N	\$ 7.23	\$ 7.23
77078	TC	A	XXX	N	N	D	N	N	\$ 48.09	\$ 48.09
77078		A	XXX	N	N	D	N	N	\$ 55.46	\$ 55.46
77080	26	A	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
77080	TC	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
77080		A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
77081	26	A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
77081	TC	A	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01
77081		A	XXX	N	N	D	N	N	\$ 19.76	\$ 19.76
77084	26	A	XXX	N	N	D	N	N	\$ 47.72	\$ 47.72
77084	TC	A	XXX	N	N	D	N	N	\$ 136.51	\$ 136.51
77084		A	XXX	N	N	D	N	N	\$ 184.02	\$ 184.02
77085	26	A	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
77085	TC	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
77085		A	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
77086	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
77086	TC	A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
77086		A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
77261		A	XXX	N	N	D	N	N	\$ 47.72	\$ 47.72
77262		A	XXX	N	N	D	N	N	\$ 72.78	\$ 72.78
77263		A	XXX	N	N	D	N	N	\$ 113.27	\$ 113.27
77280	26	A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
77280	TC	A	XXX	N	N	D	N	N	\$ 148.94	\$ 148.94
77280		A	XXX	N	N	D	N	N	\$ 174.48	\$ 174.48
77285	26	A	XXX	N	N	D	N	N	\$ 38.08	\$ 38.08
77285	TC	A	XXX	N	N	D	N	N	\$ 250.16	\$ 250.16
77285		A	XXX	N	N	D	N	N	\$ 288.48	\$ 288.48
77290	26	A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
77290	TC	A	XXX	N	N	D	N	N	\$ 248.47	\$ 248.47
77290		A	XXX	N	N	D	N	N	\$ 302.94	\$ 302.94
77293	26	A	ZZZ	N	N	D	N	N	\$ 70.61	\$ 70.61
77293	TC	A	ZZZ	N	N	D	N	N	\$ 207.02	\$ 207.02
77293		A	ZZZ	N	N	D	N	N	\$ 277.63	\$ 277.63
77295	26	A	XXX	N	N	D	N	N	\$ 150.14	\$ 150.14
77295	TC	A	XXX	N	N	D	N	N	\$ 157.13	\$ 157.13

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77295		A	XXX	N	N	D	N	N	\$ 307.28	\$ 307.28
77299	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77299	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77299		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77300	26	A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
77300	TC	A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
77300		A	XXX	N	N	D	N	N	\$ 42.42	\$ 42.42
77301	26	A	XXX	N	N	D	N	N	\$ 280.04	\$ 280.04
77301	TC	A	XXX	N	N	D	N	N	\$ 898.93	\$ 898.93
77301		A	XXX	N	N	D	N	N	\$ 1,178.73	\$ 1,178.73
77306	26	A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
77306	TC	A	XXX	N	N	D	N	N	\$ 45.31	\$ 45.31
77306		A	XXX	N	N	D	N	N	\$ 94.47	\$ 94.47
77307	26	A	XXX	N	N	D	N	N	\$ 101.94	\$ 101.94
77307	TC	A	XXX	N	N	D	N	N	\$ 82.42	\$ 82.42
77307		A	XXX	N	N	D	N	N	\$ 184.37	\$ 184.37
77316	26	A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
77316	TC	A	XXX	N	N	D	N	N	\$ 96.64	\$ 96.64
77316		A	XXX	N	N	D	N	N	\$ 145.81	\$ 145.81
77317	26	A	XXX	N	N	D	N	N	\$ 64.11	\$ 64.11
77317	TC	A	XXX	N	N	D	N	N	\$ 127.25	\$ 127.25
77317		A	XXX	N	N	D	N	N	\$ 191.11	\$ 191.11
77318	26	A	XXX	N	N	D	N	N	\$ 101.70	\$ 101.70
77318	TC	A	XXX	N	N	D	N	N	\$ 171.59	\$ 171.59
77318		A	XXX	N	N	D	N	N	\$ 273.54	\$ 273.54
77321	26	A	XXX	N	N	D	N	N	\$ 33.50	\$ 33.50
77321	TC	A	XXX	N	N	D	N	N	\$ 26.99	\$ 26.99
77321		A	XXX	N	N	D	N	N	\$ 60.49	\$ 60.49
77331	26	A	XXX	N	N	D	N	N	\$ 30.85	\$ 30.85
77331	TC	A	XXX	N	N	D	N	N	\$ 11.57	\$ 11.57
77331		A	XXX	N	N	D	N	N	\$ 42.42	\$ 42.42
77332	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
77332	TC	A	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
77332		A	XXX	N	N	D	N	N	\$ 26.99	\$ 26.99
77333	26	A	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
77333	TC	A	XXX	N	N	D	N	N	\$ 56.64	\$ 56.64
77333		A	XXX	N	N	D	N	N	\$ 83.39	\$ 83.39
77334	26	A	XXX	N	N	D	N	N	\$ 40.25	\$ 40.25
77334	TC	A	XXX	N	N	D	N	N	\$ 40.01	\$ 40.01
77334		A	XXX	N	N	D	N	N	\$ 80.25	\$ 80.25
77336		A	XXX	N	N	D	N	N	\$ 49.41	\$ 49.41
77338	26	A	XXX	N	N	D	N	N	\$ 150.14	\$ 150.14

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77338	TC	A	XXX	N	N	D	N	N	\$ 150.87	\$ 150.87
77338		A	XXX	N	N	D	N	N	\$ 301.01	\$ 301.01
77370		A	XXX	N	N	D	N	N	\$ 78.81	\$ 78.81
77371		C	XXX	N	N	D	N	N	\$ -	\$ -
77372		A	XXX	N	N	D	N	N	\$ 637.45	\$ 637.45
77373		A	XXX	N	N	D	N	N	\$ 696.25	\$ 696.25
77385		A	XXX	N	N	D	N	N	\$ 228.95	\$ 228.95
77386		A	XXX	N	N	D	N	N	\$ 227.99	\$ 227.99
77387		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
77399	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77399	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77399		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77401		A	XXX	N	N	D	N	N	\$ 26.03	\$ 26.03
77402		C	XXX	N	N	D	N	N	\$ -	\$ -
77407		C	XXX	N	N	D	N	N	\$ -	\$ -
77412		C	XXX	N	N	D	N	N	\$ -	\$ -
77417		A	XXX	N	N	D	N	N	\$ 6.99	\$ 6.99
77423		C	XXX	N	N	D	N	N	\$ -	\$ -
77424		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77425		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
77427		A	XXX	N	N	N	N	N	\$ 127.25	\$ 127.25
77431		A	XXX	N	N	D	N	N	\$ 71.34	\$ 71.34
77432		A	XXX	N	N	D	N	N	\$ 285.83	\$ 285.83
77435		A	XXX	N	N	D	N	N	\$ 430.91	\$ 430.91
77469		A	XXX	N	N	D	N	N	\$ 213.53	\$ 213.53
77470	26	A	XXX	N	N	D	N	N	\$ 71.82	\$ 71.82
77470	TC	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
77470		A	XXX	N	N	D	N	N	\$ 87.48	\$ 87.48
77499	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77499	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77499		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77520		C	XXX	N	N	D	N	N	\$ -	\$ -
77522		C	XXX	N	N	D	N	N	\$ -	\$ -
77523		C	XXX	N	N	D	N	N	\$ -	\$ -
77525		C	XXX	N	N	D	N	N	\$ -	\$ -
77600	26	A	XXX	N	N	D	N	N	\$ 46.75	\$ 46.75
77600	TC	A	XXX	N	N	D	N	N	\$ 254.74	\$ 254.74
77600		A	XXX	N	N	D	N	N	\$ 301.73	\$ 301.73
77605	26	A	XXX	N	N	D	N	N	\$ 70.13	\$ 70.13
77605	TC	A	XXX	N	N	D	N	N	\$ 556.47	\$ 556.47
77605		A	XXX	N	N	D	N	N	\$ 626.60	\$ 626.60
77610	26	A	XXX	N	N	D	N	N	\$ 46.03	\$ 46.03

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77610	TC	A	XXX	N	N	D	N	N	\$ 389.70	\$ 389.70
77610		A	XXX	N	N	D	N	N	\$ 435.73	\$ 435.73
77615	26	A	XXX	N	N	D	N	N	\$ 64.35	\$ 64.35
77615	TC	A	XXX	N	N	D	N	N	\$ 615.03	\$ 615.03
77615		A	XXX	N	N	D	N	N	\$ 679.62	\$ 679.62
77620	26	A	XXX	N	N	D	N	N	\$ 59.29	\$ 59.29
77620	TC	A	XXX	N	N	D	N	N	\$ 344.63	\$ 344.63
77620		A	XXX	N	N	D	N	N	\$ 403.92	\$ 403.92
77750	26	A	090	N	N	D	N	N	\$ 175.21	\$ 175.21
77750	TC	A	090	N	N	D	N	N	\$ 76.40	\$ 76.40
77750		A	090	N	N	D	N	N	\$ 251.85	\$ 251.85
77761	26	A	090	N	N	D	N	N	\$ 135.44	\$ 135.44
77761	TC	A	090	N	N	D	N	N	\$ 126.04	\$ 126.04
77761		A	090	N	N	D	N	N	\$ 261.49	\$ 261.49
77762	26	A	090	N	N	D	N	N	\$ 202.20	\$ 202.20
77762	TC	A	090	N	N	D	N	N	\$ 144.84	\$ 144.84
77762		A	090	N	N	D	N	N	\$ 347.04	\$ 347.04
77763	26	A	090	N	N	D	N	N	\$ 304.14	\$ 304.14
77763	TC	A	090	N	N	D	N	N	\$ 185.57	\$ 185.57
77763		A	090	N	N	D	N	N	\$ 489.95	\$ 489.95
77767	26	A	XXX	N	N	D	N	N	\$ 37.11	\$ 37.11
77767	TC	A	XXX	N	N	D	N	N	\$ 116.64	\$ 116.64
77767		A	XXX	N	N	D	N	N	\$ 153.76	\$ 153.76
77768	26	A	XXX	N	N	D	N	N	\$ 49.16	\$ 49.16
77768	TC	A	XXX	N	N	D	N	N	\$ 176.89	\$ 176.89
77768		A	XXX	N	N	D	N	N	\$ 226.30	\$ 226.30
77770	26	A	XXX	N	N	D	N	N	\$ 68.20	\$ 68.20
77770	TC	A	XXX	N	N	D	N	N	\$ 148.94	\$ 148.94
77770		A	XXX	N	N	D	N	N	\$ 216.90	\$ 216.90
77771	26	A	XXX	N	N	D	N	N	\$ 133.27	\$ 133.27
77771	TC	A	XXX	N	N	D	N	N	\$ 246.78	\$ 246.78
77771		A	XXX	N	N	D	N	N	\$ 380.06	\$ 380.06
77772	26	A	XXX	N	N	D	N	N	\$ 187.98	\$ 187.98
77772	TC	A	XXX	N	N	D	N	N	\$ 379.33	\$ 379.33
77772		A	XXX	N	N	D	N	N	\$ 567.56	\$ 567.56
77778	26	A	000	N	N	D	N	N	\$ 307.28	\$ 307.28
77778	TC	A	000	N	N	D	N	N	\$ 260.04	\$ 260.04
77778		A	000	N	N	D	N	N	\$ 567.31	\$ 567.31
77789	26	A	000	N	N	D	N	N	\$ 40.25	\$ 40.25
77789	TC	A	000	N	N	D	N	N	\$ 43.14	\$ 43.14
77789		A	000	N	N	D	N	N	\$ 83.39	\$ 83.39
77790		A	XXX	N	N	D	N	N	\$ 9.40	\$ 9.40

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
77799	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77799	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
77799		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78012	26	A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
78012	TC	A	XXX	N	N	D	N	N	\$ 44.59	\$ 44.59
78012		A	XXX	N	N	D	N	N	\$ 50.61	\$ 50.61
78013	26	A	XXX	N	N	D	N	N	\$ 11.81	\$ 11.81
78013	TC	A	XXX	N	N	D	N	N	\$ 108.69	\$ 108.69
78013		A	XXX	N	N	D	N	N	\$ 120.50	\$ 120.50
78014	26	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
78014	TC	A	XXX	N	N	D	N	N	\$ 131.59	\$ 131.59
78014		A	XXX	N	N	D	N	N	\$ 147.49	\$ 147.49
78015	26	A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
78015	TC	A	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
78015		A	XXX	N	N	D	N	N	\$ 140.99	\$ 140.99
78016	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
78016	TC	A	XXX	N	N	D	N	N	\$ 152.55	\$ 152.55
78016		A	XXX	N	N	D	N	N	\$ 175.45	\$ 175.45
78018	26	A	XXX	N	N	D	N	N	\$ 27.47	\$ 27.47
78018	TC	A	XXX	N	N	D	N	N	\$ 167.01	\$ 167.01
78018		A	XXX	N	N	D	N	N	\$ 194.49	\$ 194.49
78020	26	A	ZZZ	N	N	D	N	N	\$ 18.56	\$ 18.56
78020	TC	A	ZZZ	N	N	D	N	N	\$ 33.50	\$ 33.50
78020		A	ZZZ	N	N	D	N	N	\$ 52.30	\$ 52.30
78070	26	A	XXX	N	N	D	N	N	\$ 26.03	\$ 26.03
78070	TC	A	XXX	N	N	D	N	N	\$ 156.89	\$ 156.89
78070		A	XXX	N	N	D	N	N	\$ 182.92	\$ 182.92
78071	26	A	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
78071	TC	A	XXX	N	N	D	N	N	\$ 180.51	\$ 180.51
78071		A	XXX	N	N	D	N	N	\$ 219.07	\$ 219.07
78072	26	A	XXX	N	N	D	N	N	\$ 50.37	\$ 50.37
78072	TC	A	XXX	N	N	D	N	N	\$ 225.58	\$ 225.58
78072		A	XXX	N	N	D	N	N	\$ 275.95	\$ 275.95
78075	26	A	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
78075	TC	A	XXX	N	N	D	N	N	\$ 251.12	\$ 251.12
78075		A	XXX	N	N	D	N	N	\$ 275.70	\$ 275.70
78099	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78099	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78099		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78102	26	A	XXX	N	N	D	N	N	\$ 17.35	\$ 17.35
78102	TC	A	XXX	N	N	D	N	N	\$ 89.65	\$ 89.65
78102		A	XXX	N	N	D	N	N	\$ 107.00	\$ 107.00

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78103	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
78103	TC	A	XXX	N	N	D	N	N	\$ 110.86	\$ 110.86
78103		A	XXX	N	N	D	N	N	\$ 133.76	\$ 133.76
78104	26	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
78104	TC	A	XXX	N	N	D	N	N	\$ 128.94	\$ 128.94
78104		A	XXX	N	N	D	N	N	\$ 154.96	\$ 154.96
78110	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
78110	TC	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
78110		A	XXX	N	N	D	N	N	\$ 43.62	\$ 43.62
78111	26	A	XXX	N	N	D	N	N	\$ 6.27	\$ 6.27
78111	TC	A	XXX	N	N	D	N	N	\$ 40.01	\$ 40.01
78111		A	XXX	N	N	D	N	N	\$ 46.51	\$ 46.51
78120	26	A	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
78120	TC	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
78120		A	XXX	N	N	D	N	N	\$ 44.83	\$ 44.83
78121	26	A	XXX	N	N	D	N	N	\$ 9.16	\$ 9.16
78121	TC	A	XXX	N	N	D	N	N	\$ 40.01	\$ 40.01
78121		A	XXX	N	N	D	N	N	\$ 49.16	\$ 49.16
78122	26	A	XXX	N	N	D	N	N	\$ 13.74	\$ 13.74
78122	TC	A	XXX	N	N	D	N	N	\$ 47.24	\$ 47.24
78122		A	XXX	N	N	D	N	N	\$ 60.97	\$ 60.97
78130	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
78130	TC	A	XXX	N	N	D	N	N	\$ 61.94	\$ 61.94
78130		A	XXX	N	N	D	N	N	\$ 79.05	\$ 79.05
78140	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
78140	TC	A	XXX	N	N	D	N	N	\$ 53.26	\$ 53.26
78140		A	XXX	N	N	D	N	N	\$ 70.61	\$ 70.61
78185	26	A	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
78185	TC	A	XXX	N	N	D	N	N	\$ 94.95	\$ 94.95
78185		A	XXX	N	N	D	N	N	\$ 106.28	\$ 106.28
78191	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
78191	TC	A	XXX	N	N	D	N	N	\$ 61.94	\$ 61.94
78191		A	XXX	N	N	D	N	N	\$ 79.05	\$ 79.05
78195	26	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
78195	TC	A	XXX	N	N	D	N	N	\$ 181.96	\$ 181.96
78195		A	XXX	N	N	D	N	N	\$ 220.27	\$ 220.27
78199	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78199	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78199		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78201	26	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
78201	TC	A	XXX	N	N	D	N	N	\$ 103.87	\$ 103.87
78201		A	XXX	N	N	D	N	N	\$ 117.85	\$ 117.85

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78202	26	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
78202	TC	A	XXX	N	N	D	N	N	\$ 113.51	\$ 113.51
78202		A	XXX	N	N	D	N	N	\$ 129.66	\$ 129.66
78215	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
78215	TC	A	XXX	N	N	D	N	N	\$ 105.32	\$ 105.32
78215		A	XXX	N	N	D	N	N	\$ 121.22	\$ 121.22
78216	26	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
78216	TC	A	XXX	N	N	D	N	N	\$ 63.14	\$ 63.14
78216		A	XXX	N	N	D	N	N	\$ 80.98	\$ 80.98
78226	26	A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
78226	TC	A	XXX	N	N	D	N	N	\$ 178.34	\$ 178.34
78226		A	XXX	N	N	D	N	N	\$ 202.44	\$ 202.44
78227	26	A	XXX	N	N	D	N	N	\$ 29.40	\$ 29.40
78227	TC	A	XXX	N	N	D	N	N	\$ 242.45	\$ 242.45
78227		A	XXX	N	N	D	N	N	\$ 271.85	\$ 271.85
78230	26	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
78230	TC	A	XXX	N	N	D	N	N	\$ 93.75	\$ 93.75
78230		A	XXX	N	N	D	N	N	\$ 108.45	\$ 108.45
78231	26	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
78231	TC	A	XXX	N	N	D	N	N	\$ 52.06	\$ 52.06
78231		A	XXX	N	N	D	N	N	\$ 66.76	\$ 66.76
78232	26	A	XXX	N	N	D	N	N	\$ 13.26	\$ 13.26
78232	TC	A	XXX	N	N	D	N	N	\$ 52.06	\$ 52.06
78232		A	XXX	N	N	D	N	N	\$ 65.31	\$ 65.31
78258	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
78258	TC	A	XXX	N	N	D	N	N	\$ 109.90	\$ 109.90
78258		A	XXX	N	N	D	N	N	\$ 132.79	\$ 132.79
78261	26	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
78261	TC	A	XXX	N	N	D	N	N	\$ 108.21	\$ 108.21
78261		A	XXX	N	N	D	N	N	\$ 127.49	\$ 127.49
78262	26	A	XXX	N	N	D	N	N	\$ 22.65	\$ 22.65
78262	TC	A	XXX	N	N	D	N	N	\$ 127.97	\$ 127.97
78262		A	XXX	N	N	D	N	N	\$ 150.63	\$ 150.63
78264	26	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
78264	TC	A	XXX	N	N	D	N	N	\$ 179.79	\$ 179.79
78264		A	XXX	N	N	D	N	N	\$ 205.57	\$ 205.57
78265	26	A	XXX	N	N	D	N	N	\$ 31.57	\$ 31.57
78265	TC	A	XXX	N	N	D	N	N	\$ 210.88	\$ 210.88
78265		A	XXX	N	N	D	N	N	\$ 242.45	\$ 242.45
78266	26	A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
78266	TC	A	XXX	N	N	D	N	N	\$ 235.94	\$ 235.94
78266		A	XXX	N	N	D	N	N	\$ 269.20	\$ 269.20

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78267		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
78268		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
78278	26	A	XXX	N	N	D	N	N	\$ 32.05	\$ 32.05
78278	TC	A	XXX	N	N	D	N	N	\$ 183.88	\$ 183.88
78278		A	XXX	N	N	D	N	N	\$ 215.94	\$ 215.94
78282	26	Not Covered	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
78282	TC	Not Covered	XXX	N	N	D	N	N	\$ 223.63	\$ 223.63
78282		Not Covered	XXX	N	N	D	N	N	\$ 233.22	\$ 233.22
78290	26	A	XXX	N	N	D	N	N	\$ 22.41	\$ 22.41
78290	TC	A	XXX	N	N	D	N	N	\$ 181.71	\$ 181.71
78290		A	XXX	N	N	D	N	N	\$ 204.13	\$ 204.13
78291	26	A	XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
78291	TC	A	XXX	N	N	D	N	N	\$ 128.21	\$ 128.21
78291		A	XXX	N	N	D	N	N	\$ 156.17	\$ 156.17
78299	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78299	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78299		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78300	26	A	XXX	N	N	D	N	N	\$ 20.73	\$ 20.73
78300	TC	A	XXX	N	N	D	N	N	\$ 121.95	\$ 121.95
78300		A	XXX	N	N	D	N	N	\$ 142.67	\$ 142.67
78305	26	A	XXX	N	N	D	N	N	\$ 26.99	\$ 26.99
78305	TC	A	XXX	N	N	D	N	N	\$ 145.81	\$ 145.81
78305		A	XXX	N	N	D	N	N	\$ 172.80	\$ 172.80
78306	26	A	XXX	Y	N	D	N	N	\$ 27.96	\$ 27.96
78306	TC	A	XXX	Y	N	D	N	N	\$ 157.86	\$ 157.86
78306		A	XXX	Y	N	D	N	N	\$ 185.57	\$ 185.57
78315	26	A	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
78315	TC	A	XXX	N	N	D	N	N	\$ 181.71	\$ 181.71
78315		A	XXX	N	N	D	N	N	\$ 214.73	\$ 214.73
78350	26	A	XXX	N	N	N	N	N	\$ 7.47	\$ 7.47
78350	TC	A	XXX	N	N	N	N	N	\$ 12.77	\$ 12.77
78350		A	XXX	N	N	N	N	N	\$ 20.24	\$ 20.24
78351		Not Covered	XXX	N	N	N	N	N	\$ 10.12	\$ 10.12
78399	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78399	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78399		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78414	26	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
78414	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
78414		C	XXX	N	N	D	N	N	\$ -	\$ -
78428	26	A	XXX	6	N	D	N	N	\$ 25.31	\$ 25.31
78428	TC	A	XXX	6	N	D	N	N	\$ 91.34	\$ 91.34
78428		A	XXX	6	N	D	N	N	\$ 116.64	\$ 116.64

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlst/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78429	26	Not Covered	XXX	N	N	D	N	N	\$ 49.89	\$ 49.89
78429	TC	Not Covered	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78429		Not Covered	XXX	N	N	D	N	N	\$ 927.29	\$ 927.29
78430	26	Not Covered	XXX	N	N	D	N	N	\$ 47.00	\$ 47.00
78430	TC	Not Covered	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78430		Not Covered	XXX	N	N	D	N	N	\$ 924.44	\$ 924.44
78431	26	Not Covered	XXX	N	N	D	N	N	\$ 55.19	\$ 55.19
78431	TC	Not Covered	XXX	N	N	D	N	N	\$ 1,333.70	\$ 1,333.70
78431		Not Covered	XXX	N	N	D	N	N	\$ 1,388.93	\$ 1,388.93
78432	26	Not Covered	XXX	N	N	D	N	N	\$ 58.56	\$ 58.56
78432	TC	Not Covered	XXX	N	N	D	N	N	\$ 1,630.04	\$ 1,630.04
78432		Not Covered	XXX	N	N	D	N	N	\$ 1,688.62	\$ 1,688.62
78433	26	Not Covered	XXX	N	N	D	N	N	\$ 63.62	\$ 63.62
78433	TC	Not Covered	XXX	N	N	D	N	N	\$ 1,630.04	\$ 1,630.04
78433		Not Covered	XXX	N	N	D	N	N	\$ 1,693.86	\$ 1,693.86
78434	26	Not Covered	ZZZ	N	N	D	N	N	\$ 20.24	\$ 20.24
78434	TC	Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
78434		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
78445	26	A	XXX	6	N	D	N	N	\$ 16.87	\$ 16.87
78445	TC	A	XXX	6	N	D	N	N	\$ 110.14	\$ 110.14
78445		A	XXX	6	N	D	N	N	\$ 127.01	\$ 127.01
78451	26	A	XXX	6	N	D	N	N	\$ 44.34	\$ 44.34
78451	TC	A	XXX	6	N	D	N	N	\$ 168.22	\$ 168.22
78451		A	XXX	6	N	D	N	N	\$ 212.56	\$ 212.56
78452	26	A	XXX	6	N	D	N	N	\$ 52.06	\$ 52.06
78452	TC	A	XXX	6	N	D	N	N	\$ 242.69	\$ 242.69
78452		A	XXX	6	N	D	N	N	\$ 294.74	\$ 294.74
78453	26	A	XXX	6	N	D	N	N	\$ 32.54	\$ 32.54
78453	TC	A	XXX	6	N	D	N	N	\$ 153.52	\$ 153.52
78453		A	XXX	6	N	D	N	N	\$ 186.05	\$ 186.05
78454	26	A	XXX	6	N	D	N	N	\$ 43.38	\$ 43.38
78454	TC	A	XXX	6	N	D	N	N	\$ 225.09	\$ 225.09
78454		A	XXX	6	N	D	N	N	\$ 268.72	\$ 268.72
78456	26	A	XXX	6	N	N	N	N	\$ 32.54	\$ 32.54
78456	TC	A	XXX	6	N	N	N	N	\$ 162.43	\$ 162.43
78456		A	XXX	6	N	N	N	N	\$ 194.97	\$ 194.97
78457	26	A	XXX	6	N	D	N	N	\$ 25.31	\$ 25.31
78457	TC	A	XXX	6	N	D	N	N	\$ 87.00	\$ 87.00
78457		A	XXX	6	N	D	N	N	\$ 112.31	\$ 112.31
78458	26	A	XXX	6	B	D	N	N	\$ 29.64	\$ 29.64
78458	TC	A	XXX	6	B	D	N	N	\$ 99.05	\$ 99.05
78458		A	XXX	6	B	D	N	N	\$ 128.69	\$ 128.69

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78459	26	A	XXX	N	N	D	N	N	\$ 45.07	\$ 45.07
78459	TC	A	XXX	N	N	D	N	N	\$ 774.05	\$ 774.05
78459		A	XXX	N	N	D	N	N	\$ 819.24	\$ 819.24
78466	26	A	XXX	6	N	D	N	N	\$ 23.38	\$ 23.38
78466	TC	A	XXX	6	N	D	N	N	\$ 100.02	\$ 100.02
78466		A	XXX	6	N	D	N	N	\$ 123.39	\$ 123.39
78468	26	A	XXX	6	N	D	N	N	\$ 26.03	\$ 26.03
78468	TC	A	XXX	6	N	D	N	N	\$ 97.61	\$ 97.61
78468		A	XXX	6	N	D	N	N	\$ 123.63	\$ 123.63
78469	26	A	XXX	6	N	D	N	N	\$ 29.88	\$ 29.88
78469	TC	A	XXX	6	N	D	N	N	\$ 107.97	\$ 107.97
78469		A	XXX	6	N	D	N	N	\$ 137.85	\$ 137.85
78472	26	A	XXX	6	N	D	N	N	\$ 31.57	\$ 31.57
78472	TC	A	XXX	6	N	D	N	N	\$ 111.10	\$ 111.10
78472		A	XXX	6	N	D	N	N	\$ 142.67	\$ 142.67
78473	26	A	XXX	6	N	D	N	N	\$ 47.00	\$ 47.00
78473	TC	A	XXX	6	N	D	N	N	\$ 134.48	\$ 134.48
78473		A	XXX	6	N	D	N	N	\$ 181.47	\$ 181.47
78481	26	A	XXX	6	N	D	N	N	\$ 31.81	\$ 31.81
78481	TC	A	XXX	6	N	D	N	N	\$ 80.01	\$ 80.01
78481		A	XXX	6	N	D	N	N	\$ 111.82	\$ 111.82
78483	26	A	XXX	6	N	D	N	N	\$ 47.72	\$ 47.72
78483	TC	A	XXX	6	N	D	N	N	\$ 105.32	\$ 105.32
78483		A	XXX	6	N	D	N	N	\$ 153.04	\$ 153.04
78491	26	A	XXX	N	N	D	N	N	\$ 43.62	\$ 43.62
78491	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78491		A	XXX	N	N	D	N	N	\$ 921.11	\$ 921.11
78492	26	A	XXX	N	N	D	N	N	\$ 52.30	\$ 52.30
78492	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78492		A	XXX	N	N	D	N	N	\$ 929.69	\$ 929.69
78494	26	A	XXX	6	N	D	N	N	\$ 38.56	\$ 38.56
78494	TC	A	XXX	6	N	D	N	N	\$ 105.08	\$ 105.08
78494		A	XXX	6	N	D	N	N	\$ 143.64	\$ 143.64
78496	26	A	ZZZ	N	N	D	N	N	\$ 16.15	\$ 16.15
78496	TC	A	ZZZ	N	N	D	N	N	\$ 11.57	\$ 11.57
78496		A	ZZZ	N	N	D	N	N	\$ 27.96	\$ 27.96
78499	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78499	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78499		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78579	26	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
78579	TC	A	XXX	N	N	D	N	N	\$ 100.26	\$ 100.26
78579		A	XXX	N	N	D	N	N	\$ 115.92	\$ 115.92

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78580	26	A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
78580	TC	A	XXX	N	N	D	N	N	\$ 122.91	\$ 122.91
78580		A	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
78582	26	A	XXX	N	N	D	N	N	\$ 34.46	\$ 34.46
78582	TC	A	XXX	N	N	D	N	N	\$ 172.56	\$ 172.56
78582		A	XXX	N	N	D	N	N	\$ 206.78	\$ 206.78
78597	26	A	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
78597	TC	A	XXX	N	N	D	N	N	\$ 102.43	\$ 102.43
78597		A	XXX	N	N	D	N	N	\$ 126.28	\$ 126.28
78598	26	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
78598	TC	A	XXX	N	N	D	N	N	\$ 161.23	\$ 161.23
78598		A	XXX	N	N	D	N	N	\$ 188.46	\$ 188.46
78599	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78599	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78599		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78600	26	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
78600	TC	A	XXX	N	N	D	N	N	\$ 99.29	\$ 99.29
78600		A	XXX	N	N	D	N	N	\$ 113.51	\$ 113.51
78601	26	A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
78601	TC	A	XXX	N	N	D	N	N	\$ 117.13	\$ 117.13
78601		A	XXX	N	N	D	N	N	\$ 133.51	\$ 133.51
78605	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
78605	TC	A	XXX	N	N	D	N	N	\$ 106.52	\$ 106.52
78605		A	XXX	N	N	D	N	N	\$ 123.63	\$ 123.63
78606	26	A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
78606	TC	A	XXX	N	N	D	N	N	\$ 183.64	\$ 183.64
78606		A	XXX	N	N	D	N	N	\$ 204.85	\$ 204.85
78608	26	A	XXX	N	N	D	N	N	\$ 42.18	\$ 42.18
78608	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78608		A	XXX	N	N	D	N	N	\$ 919.63	\$ 919.63
78609	26	A	XXX	N	N	N	N	N	\$ 49.89	\$ 49.89
78609	TC	C	XXX	N	N	N	N	N	\$ -	\$ -
78609		A	XXX	N	N	N	N	N	\$ 49.89	\$ 49.89
78610	26	A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
78610	TC	A	XXX	N	N	D	N	N	\$ 98.09	\$ 98.09
78610		A	XXX	N	N	D	N	N	\$ 107.49	\$ 107.49
78630	26	A	XXX	N	N	D	N	N	\$ 22.41	\$ 22.41
78630	TC	A	XXX	N	N	D	N	N	\$ 186.05	\$ 186.05
78630		A	XXX	N	N	D	N	N	\$ 208.47	\$ 208.47
78635	26	A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
78635	TC	A	XXX	N	N	D	N	N	\$ 187.98	\$ 187.98
78635		A	XXX	N	N	D	N	N	\$ 208.47	\$ 208.47

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78645	26	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
78645	TC	A	XXX	N	N	D	N	N	\$ 181.23	\$ 181.23
78645		A	XXX	N	N	D	N	N	\$ 199.31	\$ 199.31
78650	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
78650	TC	A	XXX	N	N	D	N	N	\$ 154.24	\$ 154.24
78650		A	XXX	N	N	D	N	N	\$ 171.59	\$ 171.59
78660	26	A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
78660	TC	A	XXX	N	N	D	N	N	\$ 100.26	\$ 100.26
78660		A	XXX	N	N	D	N	N	\$ 117.85	\$ 117.85
78699	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78699	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78699		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78700	26	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
78700	TC	A	XXX	N	N	D	N	N	\$ 92.06	\$ 92.06
78700		A	XXX	N	N	D	N	N	\$ 106.52	\$ 106.52
78701	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
78701	TC	A	XXX	N	N	D	N	N	\$ 120.26	\$ 120.26
78701		A	XXX	N	N	D	N	N	\$ 136.17	\$ 136.17
78707	26	A	XXX	N	N	D	N	N	\$ 30.85	\$ 30.85
78707	TC	A	XXX	N	N	D	N	N	\$ 113.99	\$ 113.99
78707		A	XXX	N	N	D	N	N	\$ 144.60	\$ 144.60
78708	26	A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
78708	TC	A	XXX	N	N	D	N	N	\$ 73.51	\$ 73.51
78708		A	XXX	N	N	D	N	N	\$ 112.31	\$ 112.31
78709	26	A	XXX	N	N	D	N	N	\$ 44.83	\$ 44.83
78709	TC	A	XXX	N	N	D	N	N	\$ 184.12	\$ 184.12
78709		A	XXX	N	N	D	N	N	\$ 229.19	\$ 229.19
78725	26	A	XXX	N	N	D	N	N	\$ 12.05	\$ 12.05
78725	TC	A	XXX	N	N	D	N	N	\$ 58.08	\$ 58.08
78725		A	XXX	N	N	D	N	N	\$ 70.13	\$ 70.13
78730	26	A	ZZZ	N	N	D	N	N	\$ 5.06	\$ 5.06
78730	TC	A	ZZZ	N	N	D	N	N	\$ 42.18	\$ 42.18
78730		A	ZZZ	N	N	D	N	N	\$ 47.24	\$ 47.24
78740	26	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
78740	TC	A	XXX	N	N	D	N	N	\$ 118.33	\$ 118.33
78740		A	XXX	N	N	D	N	N	\$ 136.65	\$ 136.65
78761	26	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
78761	TC	A	XXX	N	N	D	N	N	\$ 108.21	\$ 108.21
78761		A	XXX	N	N	D	N	N	\$ 132.07	\$ 132.07
78799	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78799	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78799		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78800	26	A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
78800	TC	A	XXX	N	N	D	N	N	\$ 137.37	\$ 137.37
78800		A	XXX	N	N	D	N	N	\$ 158.58	\$ 158.58
78801	26	A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
78801	TC	A	XXX	N	N	D	N	N	\$ 151.11	\$ 151.11
78801		A	XXX	N	N	D	N	N	\$ 175.21	\$ 175.21
78802	26	A	XXX	Y	N	D	N	N	\$ 25.79	\$ 25.79
78802	TC	A	XXX	Y	N	D	N	N	\$ 167.98	\$ 167.98
78802		A	XXX	Y	N	D	N	N	\$ 194.01	\$ 194.01
78803	26	A	XXX	Y	N	D	N	N	\$ 34.46	\$ 34.46
78803	TC	A	XXX	Y	N	D	N	N	\$ 205.33	\$ 205.33
78803		A	XXX	Y	N	D	N	N	\$ 239.80	\$ 239.80
78804	26	A	XXX	N	N	D	N	N	\$ 32.29	\$ 32.29
78804	TC	A	XXX	N	N	D	N	N	\$ 373.79	\$ 373.79
78804		A	XXX	N	N	D	N	N	\$ 406.09	\$ 406.09
78808		Not Covered	XXX	N	N	D	N	N	\$ 25.31	\$ 25.31
78811	26	A	XXX	N	N	D	N	N	\$ 44.10	\$ 44.10
78811	TC	A	XXX	N	N	D	N	N	\$ 774.05	\$ 774.05
78811		A	XXX	N	N	D	N	N	\$ 818.28	\$ 818.28
78812	26	A	XXX	N	N	D	N	N	\$ 55.19	\$ 55.19
78812	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78812		A	XXX	N	N	D	N	N	\$ 932.56	\$ 932.56
78813	26	A	XXX	N	N	D	N	N	\$ 54.71	\$ 54.71
78813	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78813		A	XXX	N	N	D	N	N	\$ 932.30	\$ 932.30
78814	26	A	XXX	N	N	D	N	N	\$ 62.42	\$ 62.42
78814	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78814		A	XXX	N	N	D	N	N	\$ 939.91	\$ 939.91
78815	26	A	XXX	N	N	D	N	N	\$ 70.13	\$ 70.13
78815	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78815		A	XXX	N	N	D	N	N	\$ 947.72	\$ 947.72
78816	26	A	XXX	N	N	D	N	N	\$ 70.61	\$ 70.61
78816	TC	A	XXX	N	N	D	N	N	\$ 877.38	\$ 877.38
78816		A	XXX	N	N	D	N	N	\$ 948.17	\$ 948.17
78830	26	A	XXX	N	N	D	N	N	\$ 47.00	\$ 47.00
78830	TC	A	XXX	N	N	D	N	N	\$ 257.87	\$ 257.87
78830		A	XXX	N	N	D	N	N	\$ 304.87	\$ 304.87
78831	26	A	XXX	N	N	D	N	N	\$ 57.36	\$ 57.36
78831	TC	A	XXX	N	N	D	N	N	\$ 381.74	\$ 381.74
78831		A	XXX	N	N	D	N	N	\$ 439.10	\$ 439.10
78832	26	A	XXX	N	N	D	N	N	\$ 67.48	\$ 67.48
78832	TC	A	XXX	N	N	D	N	N	\$ 503.45	\$ 503.45

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
78832		A	XXX	N	N	D	N	N	\$ 571.17	\$ 571.17
78835	26	A	ZZZ	N	N	D	N	N	\$ 14.70	\$ 14.70
78835	TC	A	ZZZ	N	N	D	N	N	\$ 48.92	\$ 48.92
78835		A	ZZZ	N	N	D	N	N	\$ 64.11	\$ 64.11
78999	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78999	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
78999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
79005	26	A	XXX	N	N	D	N	N	\$ 57.60	\$ 57.60
79005	TC	A	XXX	N	N	D	N	N	\$ 31.33	\$ 31.33
79005		A	XXX	N	N	D	N	N	\$ 89.17	\$ 89.17
79101	26	A	XXX	N	N	D	N	N	\$ 64.11	\$ 64.11
79101	TC	A	XXX	N	N	D	N	N	\$ 32.29	\$ 32.29
79101		A	XXX	N	N	D	N	N	\$ 96.88	\$ 96.88
79200	26	A	XXX	N	N	D	N	N	\$ 55.43	\$ 55.43
79200	TC	A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
79200		A	XXX	N	N	D	N	N	\$ 88.93	\$ 88.93
79300	26	A	XXX	N	N	D	N	N	\$ 44.59	\$ 44.59
79300	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
79300		C	XXX	N	N	D	N	N	\$ -	\$ -
79403	26	A	XXX	N	N	D	N	N	\$ 70.85	\$ 70.85
79403	TC	A	XXX	N	N	D	N	N	\$ 49.89	\$ 49.89
79403		A	XXX	N	N	D	N	N	\$ 120.74	\$ 120.74
79440	26	A	XXX	N	N	D	N	N	\$ 55.43	\$ 55.43
79440	TC	A	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
79440		A	XXX	N	N	D	N	N	\$ 80.49	\$ 80.49
79445	26	A	XXX	N	N	D	N	N	\$ 75.92	\$ 75.92
79445	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
79445		C	XXX	N	N	D	N	N	\$ -	\$ -
79999	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
79999	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
79999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
80047		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80048		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80050		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80051		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80053		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80055		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80061		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80069		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80074		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80076		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80081		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
80143		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80145		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80151		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80155		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80156		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80157		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80158		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80159		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80161		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80162		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80163		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80164		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80165		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80167		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80168		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80169		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80170		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80171		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80173		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80175		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80176		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80177		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80178		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80179		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80180		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80181		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80183		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80184		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80185		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80186		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80187		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80188		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80189		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80190		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80192		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80193		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80194		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80195		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80197		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80198		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80199		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
80200		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80201		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80202		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80203		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80204		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80210		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80230		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80235		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80280		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80285		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80299		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80305		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80306		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80307		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80320		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80321		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80322		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80323		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80324		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80325		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80326		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80327		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80328		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80329		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80330		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80331		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80332		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80333		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80334		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80335		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80336		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80337		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80338		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80339		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80340		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80341		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80342		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80343		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80344		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80345		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80346		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80347		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
80348		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80349		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80350		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80351		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80352		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80353		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80354		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80355		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80356		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80357		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80358		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80359		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80360		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80361		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80362		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80363		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80364		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80365		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80366		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80367		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80368		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80369		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80370		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80371		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80372		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80373		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80374		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80375		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80376		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80377		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
80400		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80402		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80406		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80408		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80410		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80412		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80414		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80415		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80416		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80417		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80418		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80420		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
80422		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80424		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80426		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80428		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80430		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80432		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80434		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80435		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80436		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80438		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80439		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
80500	A		XXX	N	N	D	N	N	\$ 12.77	\$ 14.46
80502	A		XXX	N	N	D	N	N	\$ 46.03	\$ 47.96
81000		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81001		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81002		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81003		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81005		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81007		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81015		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81020		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81025		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81050		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81099		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81105		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81106		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81107		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81108		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81109		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81110		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81111		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81112		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81120		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81121		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81161		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81162		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81163		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81164		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81165		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81166		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81167		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81168		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
81170		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81171		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81172		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81173		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81174		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81175		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81176		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81177		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81178		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81179		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81180		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81181		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81182		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81183		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81184		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81185		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81186		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81187		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81188		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81189		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81190		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81191		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81192		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81193		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81194		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81200		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81201		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81202		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81203		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81204		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81205		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81206		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81207		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81208		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81209		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81210		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81212		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81215		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81216		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81217		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81218		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81219		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81220		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81221		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81222		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81223		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81224		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81225		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81226		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81227		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81228		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81229		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81230		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81231		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81232		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81233		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81234		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81235		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81236		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81237		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81238		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81239		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81240		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81241		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81242		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81243		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81244		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81245		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81246		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81247		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81248		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81249		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81250		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81251		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81252		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81253		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81254		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81255		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81256		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81257		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81258		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81259		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81260		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81261		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81262		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81263		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81264		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81265		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81266		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81267		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81268		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81269		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81270		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81271		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81272		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81273		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81274		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81275		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81276		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81277		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81278		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81279		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81283		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81284		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81285		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81286		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81287		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81288		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81289		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81290		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81291		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81292		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81293		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81294		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81295		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81296		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81297		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81298		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81299		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81301		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81302		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81303		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81304		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81305		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81306		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81307		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81308		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81309		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81310		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81311		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81312		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81313		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81314		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81315		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81316		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81317		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81318		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81319		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81320		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81321		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81322		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81323		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81324		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81325		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81326		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81327		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81328		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81329		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81330		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81331		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81332		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81333		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81334		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81335		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81336		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81337		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81338		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81339		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81340		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81341		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81342		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81343		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81344		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81345		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81346		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81347		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81348		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81350		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81351		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81352		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81353		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81355		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81357		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81360		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81361		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81362		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81363		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81364		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81370		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81371		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81372		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81373		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81374		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81375		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81376		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81377		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81378		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81379		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81380		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81381		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81382		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81383		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81400		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81401		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81402		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81403		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81404		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81405		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81406		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81407		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81408		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81410		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81411		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81412		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81413		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81414		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81415		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81416		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81417		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81419		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81420		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81422		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81425		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81426		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81427		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81430		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81431		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81432		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81433		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81434		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81435		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81436		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81437		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81438		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81439		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81440		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81442		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81443		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81445		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81448		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81450		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81455		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81460		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81465		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81470		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81471		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81479		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
81490		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81493		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81503		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81507		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81508		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81509		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81511		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81512		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81513		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81514		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
81518		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81519		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81520		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81521		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81522		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81525		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81528		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81529		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81535		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81536		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81538		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81539		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81540		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81541		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81542		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81546		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81551		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81552		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81554		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
81595		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81596		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
81599		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
82009		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82010		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82013		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82016		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82017		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82024		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82030		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82040		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82042		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82043		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82044		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82045		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82075		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82077		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
82085		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82088		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82103		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82104		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82105		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82106		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
82107		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82108		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82120		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82127		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82128		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82131		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82135		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82136		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82139		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82140		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82143		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82154		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82157		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82160		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82163		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82164		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82172		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82175		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82180		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82190		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82232		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82239		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82240		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82247		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82248		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82252		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82261		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82270		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82271		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82272		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82274		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82286		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82306		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82308		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82310		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82330		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82331		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82340		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82355		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82360		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
82365		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82370		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82373		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82374		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82375		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82376		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82378		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82379		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82380		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82382		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82383		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82384		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82387		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82390		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82397		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82415		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82435		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82436		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82438		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82441		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82465		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82480		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82482		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82485		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82495		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82507		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82523		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82525		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82528		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82530		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82533		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82540		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82542		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82550		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82552		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82553		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82554		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82565		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82570		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82575		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82585		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82595		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
82600		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82607		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82608		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82610		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82615		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82626		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82627		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82633		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82634		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82638		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82642		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82652		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82656		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82657		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82658		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82664		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82668		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82670		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82671		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82672		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82677		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82679		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82681		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82693		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82696		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82705		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82710		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82715		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82725		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82726		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82728		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82731		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82735		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82746		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82747		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82757		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82759		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82760		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82775		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82776		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82777		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
82784		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
82785		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82787		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82800		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82803		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82805		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82810		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82820		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82930		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82938		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82941		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82943		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82945		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82946		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82947		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82948		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82950		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82951		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82952		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82955		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82960		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82962		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82963		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82965		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82977		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82978		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82979		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
82985		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83001		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83002		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83003		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83006		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
83009		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83010		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83012		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83013		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83014		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83015		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83018		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83020	26	CLFS	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
83020		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83021		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83026		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
83030		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83033		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83036		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83037		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83045		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83050		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83051		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83060		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83065		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83068		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83069		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83070		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83080		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83088		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83090		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83491		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83497		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83498		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83500		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83505		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83516		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83518		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83519		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83520		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83525		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83527		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83528		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83540		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83550		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83570		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83582		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83586		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83593		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83605		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83615		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83625		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83630		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83631		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83632		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83633		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83655		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
83661		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83662		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83663		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83664		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83670		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83690		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83695		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83698		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83700		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83701		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83704		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83718		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83719		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83721		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83722		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
83727		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83735		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83775		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83785		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83789		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83825		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83835		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83857		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83861		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83864		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83872		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83873		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83874		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83876		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83880		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83883		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83885		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83915		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83916		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83918		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83919		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83921		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83930		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83935		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83937		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83945		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83950		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
83951		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83970		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83986		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83987		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
83992		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
83993		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84030		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84035		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84060		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84066		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84075		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84078		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84080		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84081		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84085		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84087		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84100		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84105		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84106		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84110		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84112		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84119		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84120		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84126		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84132		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84133		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84134		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84135		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84138		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84140		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84143		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84144		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
84146		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84152		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84153		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84154		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84155		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84156		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84157		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84160		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
84163		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84165	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
84165		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84166	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
84166		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84181	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
84181		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84182	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
84182		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84202		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84203		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84206		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84207		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84210		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84220		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84228		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84233		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84234		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84235		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84238		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84244		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84252		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84255		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84260		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84270		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84275		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84285		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84295		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84302		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84305		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84307		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84311		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84315		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84375		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84376		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84377		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84378		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84379		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84392		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84402		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84403		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
84410		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84425		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84430		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84431		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
84432		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84436		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84437		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84439		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84442		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84443		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84445		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84446		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84449		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84450		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84460		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84466		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84478		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84479		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84480		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84481		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84482		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84484		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84485		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84488		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84490		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84510		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84512		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84520		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84525		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84540		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84545		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84550		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84560		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84577		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84578		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84580		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84583		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84585		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84586		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84588		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84590		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84591		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
84597		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84600		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84620		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84630		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84681		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84702		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84703		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84704		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84830		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
84999		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
85002		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85004		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85007		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85008		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85009		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85013		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85014		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85018		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85025		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85027		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85032		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85041		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85044		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85045		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85046		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85048		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85049		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85055		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85060		A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
85097		A	XXX	N	N	D	N	N	\$ 32.78	\$ 45.07
85130		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85170		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85175		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85210		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85220		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85230		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85240		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85244		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85245		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85246		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85247		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85250		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
85260		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85270		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85280		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85290		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85291		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85292		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85293		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85301		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85302		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85303		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85305		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85306		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85307		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85335		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85337		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85345		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85347		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85348		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85360		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85362		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85366		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85370		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85378		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85379		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85380		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85384		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85385		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85390	26	A	XXX	N	N	D	N	N	\$ 25.31	\$ 25.31
85390		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85396		A	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01
85397		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
85400		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85410		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85415		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85420		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85421		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85441		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85445		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85460		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85461		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85475		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
85520		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85525		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85530		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85536		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85540		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85547		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85549		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85555		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85557		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85576	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
85576		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85597		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85598		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85610		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85611		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85612		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85613		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85635		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85651		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85652		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85660		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85670		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85675		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85705		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85730		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85732		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85810		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
85999		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
86000		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86001		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86003		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86005		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86008		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86021		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86022		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86023		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86038		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86039		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86060		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86063		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86077		A	XXX	N	N	D	N	N	\$ 33.50	\$ 35.91
86078		A	XXX	N	N	D	N	N	\$ 33.50	\$ 35.91

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
86079		A	XXX	N	N	D	N	N	\$ 33.50	\$ 35.67
86140		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86141		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86146		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86147		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86148		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86152		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86153	26	A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
86155		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86156		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86157		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86160		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86161		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86162		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86171		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86200		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86215		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86225		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86226		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86235		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86255	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86255		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86256	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86256		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86277		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86280		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86294		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86301		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86304		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86305		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
86308		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86309		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86310		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86316		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86317		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86318		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86320	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86320		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86325	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86325		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86327	26	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
86327		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86328		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86329		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86331		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86332		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86334	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86334		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86335	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
86335		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86336		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86337		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86340		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86341		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86343		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86344		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86352		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
86353		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86355		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86356		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86357		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86359		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86360		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86361		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86367		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86376		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86382		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86384		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86386		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86403		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86406		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86408		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86409		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86413		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86430		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86431		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86480		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86481		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86485		CLFS	XXX	N	N	D	N	N	\$ -	\$ -
86486		A	XXX	N	N	D	N	N	\$ 3.62	\$ 3.62
86490		A	XXX	N	N	D	N	N	\$ 54.71	\$ 54.71
86510		A	XXX	N	N	D	N	N	\$ 4.34	\$ 4.34
86580		A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
86590		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86592		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86593		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86602		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86603		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86606		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86609		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86611		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86612		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86615		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86617		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86618		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86619		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86622		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86625		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86628		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86631		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86632		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86635		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86638		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86641		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86644		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86645		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86648		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86651		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86652		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86653		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86654		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86658		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86663		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86664		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86665		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86666		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86668		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86671		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86674		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86677		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86682		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86684		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86687		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86688		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86689		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
86692		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86694		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86695		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86696		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86698		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86701		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86702		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86703		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86704		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86705		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86706		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86707		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86708		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86709		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86710		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86711		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86713		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86717		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86720		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86723		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86727		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86732		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86735		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86738		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86741		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86744		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86747		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86750		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86753		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86756		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86757		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86759		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86762		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86765		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86768		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86769		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86771		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86774		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86777		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86778		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86780		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86784		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
86787		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86788		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86789		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86790		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86793		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86794		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86800		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86803		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86804		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86805		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86806		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86807		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86808		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86812		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86813		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86816		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86817		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86821		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86825		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86826		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86828		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86829		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86830		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86831		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86832		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86833		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86834		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86835		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86849		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86850		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86860		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86870		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86880		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86885		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86886		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86890		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86891		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86900		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86901		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86902		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86904		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86905		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
86906		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86910		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
86911		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
86920		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86921		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86922		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86923		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86927		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86930		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86931		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86932		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86940		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86941		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86945		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86950		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86960		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86965		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86970		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86971		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86972		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86975		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86976		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86977		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86978		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86985		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
86999		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
87003		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87015		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87040		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87045		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87046		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87070		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87071		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87073		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87075		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87076		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87077		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87081		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87084		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87086		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87088		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87101		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
87102		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87103		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87106		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87107		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87109		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87110		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87116		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87118		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87140		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87143		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87147		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87149		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87152		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87153		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87158		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87164	26	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
87164		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87166		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87168		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87169		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87172		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87176		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87177		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87181		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87184		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87185		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87186		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87187		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87188		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87190		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87197		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87205		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87206		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87207	26	A	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
87207		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87209		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87210		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87220		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87230		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87250		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87252		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
87253		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87254		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87255		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87260		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87265		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87267		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87269		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87270		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87271		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87272		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87273		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87274		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87275		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87276		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87278		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87279		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87280		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87281		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87283		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87285		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87290		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87299		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87300		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87301		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87305		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87320		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87324		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87327		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87328		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87329		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87332		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87335		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87336		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87337		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87338		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87339		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87340		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87341		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87350		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87380		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87385		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87389		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlst/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
87390		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87391		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87400		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87420		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87425		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87426		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87427		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87428		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
87430		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87449		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87451		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87471		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87472		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87475		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87476		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87480		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87481		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87482		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87483		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87485		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87486		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87487		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87490		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87491		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87492		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87493		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87495		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87496		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87497		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87498		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87500		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87501		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87502		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87503		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87505		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87506		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87507		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87510		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87511		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87512		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87516		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87517		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
87520		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87521		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87522		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87525		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87526		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87527		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87528		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87529		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87530		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87531		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87532		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87533		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87534		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87535		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87536		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87537		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87538		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87539		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87540		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87541		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87542		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87550		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87551		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87552		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87555		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87556		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87557		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87560		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87561		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87562		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87563		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87580		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87581		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87582		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87590		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87591		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87592		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87623		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87624		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87625		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87631		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87632		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
87633		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87634		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87635		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87636		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87637		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87640		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87641		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87650		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87651		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87652		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87653		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87660		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87661		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87662		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87797		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87798		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87799		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87800		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87801		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87802		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87803		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87804		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87806		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87807		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87808		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87809		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87810		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87811		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87850		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87880		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87899		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87900		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87901		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87902		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87903		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87904		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87905		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
87906		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87910		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87912		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
87999		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
88000		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
88005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88016		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88025		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88029		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88045		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88099		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
88104	26	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
88104	TC	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
88104		A	XXX	N	N	D	N	N	\$ 41.93	\$ 41.93
88106	26	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
88106	TC	A	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
88106		A	XXX	N	N	D	N	N	\$ 40.97	\$ 40.97
88108	26	A	XXX	N	N	D	N	N	\$ 14.94	\$ 14.94
88108	TC	A	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
88108		A	XXX	N	N	D	N	N	\$ 39.52	\$ 39.52
88112	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
88112	TC	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
88112		A	XXX	N	N	D	N	N	\$ 42.18	\$ 42.18
88120	26	A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
88120	TC	A	XXX	N	N	D	N	N	\$ 340.53	\$ 340.53
88120		A	XXX	N	N	D	N	N	\$ 379.58	\$ 379.58
88121	26	A	XXX	N	N	D	N	N	\$ 32.29	\$ 32.29
88121	TC	A	XXX	N	N	D	N	N	\$ 241.96	\$ 241.96
88121		A	XXX	N	N	D	N	N	\$ 274.50	\$ 274.50
88125	26	A	XXX	N	N	D	N	N	\$ 9.16	\$ 9.16
88125	TC	A	XXX	N	N	D	N	N	\$ 7.71	\$ 7.71
88125		A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
88130		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88140		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88141		A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
88142		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88143		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88147		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
88148		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88150		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88152		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88153		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88155		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88160	26	A	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
88160	TC	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
88160		A	XXX	N	N	D	N	N	\$ 44.34	\$ 44.34
88161	26	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
88161	TC	A	XXX	N	N	D	N	N	\$ 27.47	\$ 27.47
88161		A	XXX	N	N	D	N	N	\$ 44.34	\$ 44.34
88162	26	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
88162	TC	A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
88162		A	XXX	N	N	D	N	N	\$ 64.83	\$ 64.83
88164		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88165		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88166		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88167		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88172	26	A	XXX	N	N	D	N	N	\$ 23.62	\$ 23.62
88172	TC	A	XXX	N	N	D	N	N	\$ 11.81	\$ 11.81
88172		A	XXX	N	N	D	N	N	\$ 35.43	\$ 35.43
88173	26	A	XXX	N	N	D	N	N	\$ 47.24	\$ 47.24
88173	TC	A	XXX	N	N	D	N	N	\$ 50.61	\$ 50.61
88173		A	XXX	N	N	D	N	N	\$ 98.09	\$ 98.09
88174		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88175		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88177	26	A	ZZZ	N	N	D	N	N	\$ 14.46	\$ 14.46
88177	TC	A	ZZZ	N	N	D	N	N	\$ 4.34	\$ 4.34
88177		A	ZZZ	N	N	D	N	N	\$ 18.80	\$ 18.80
88182	26	A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
88182	TC	A	XXX	N	N	D	N	N	\$ 60.73	\$ 60.73
88182		A	XXX	N	N	D	N	N	\$ 86.28	\$ 86.28
88184		A	XXX	N	N	D	N	N	\$ 41.45	\$ 41.45
88185		A	ZZZ	N	N	D	N	N	\$ 13.74	\$ 13.74
88187		A	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
88188		A	XXX	N	N	D	N	N	\$ 41.69	\$ 41.69
88189		A	XXX	N	N	D	N	N	\$ 57.12	\$ 57.12
88199	26	CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88199	TC	CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88199		CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88230		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88233		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
88235		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88237		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88239		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88240		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88241		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88245		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88248		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88249		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88261		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88262		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88263		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88264		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88267		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88269		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88271		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88272		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88273		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88274		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88275		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88280		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88283		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88285		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88289		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88291		A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
88299		CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88300	26	A	XXX	N	N	D	N	N	\$ 2.89	\$ 2.89
88300	TC	A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
88300		A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
88302	26	A	XXX	N	N	D	N	N	\$ 4.58	\$ 4.58
88302	TC	A	XXX	N	N	D	N	N	\$ 14.94	\$ 14.94
88302		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
88304	26	A	XXX	N	N	D	N	N	\$ 7.71	\$ 7.71
88304	TC	A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
88304		A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
88305	26	A	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
88305	TC	A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
88305		A	XXX	N	N	D	N	N	\$ 45.07	\$ 45.07
88307	26	A	XXX	N	N	D	N	N	\$ 55.19	\$ 55.19
88307	TC	A	XXX	N	N	D	N	N	\$ 122.91	\$ 122.91
88307		A	XXX	N	N	D	N	N	\$ 178.34	\$ 178.34
88309	26	A	XXX	N	N	D	N	N	\$ 97.12	\$ 97.12
88309	TC	A	XXX	N	N	D	N	N	\$ 175.21	\$ 175.21

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
88309		A	XXX	N	N	D	N	N	\$ 272.09	\$ 272.09
88311	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
88311	TC	A	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
88311		A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
88312	26	A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
88312	TC	A	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
88312		A	XXX	N	N	D	N	N	\$ 68.93	\$ 68.93
88313	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
88313	TC	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
88313		A	XXX	N	N	D	N	N	\$ 49.16	\$ 49.16
88314	26	A	XXX	N	N	D	N	N	\$ 14.46	\$ 14.46
88314	TC	A	XXX	N	N	D	N	N	\$ 47.48	\$ 47.48
88314		A	XXX	N	N	D	N	N	\$ 61.70	\$ 61.70
88319	26	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
88319	TC	A	XXX	N	N	D	N	N	\$ 60.97	\$ 60.97
88319		A	XXX	N	N	D	N	N	\$ 79.29	\$ 79.29
88321		A	XXX	N	N	D	N	N	\$ 56.64	\$ 65.07
88323	26	A	XXX	N	N	D	N	N	\$ 58.32	\$ 58.32
88323	TC	A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
88323		A	XXX	N	N	D	N	N	\$ 74.71	\$ 74.71
88325		A	XXX	N	N	D	N	N	\$ 94.71	\$ 109.90
88329		A	XXX	N	N	D	N	N	\$ 23.86	\$ 37.84
88331	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
88331	TC	A	XXX	N	N	D	N	N	\$ 25.06	\$ 25.06
88331		A	XXX	N	N	D	N	N	\$ 66.52	\$ 66.52
88332	26	A	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49
88332	TC	A	XXX	N	N	D	N	N	\$ 14.22	\$ 14.22
88332		A	XXX	N	N	D	N	N	\$ 34.70	\$ 34.70
88333	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
88333	TC	A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
88333		A	XXX	N	N	D	N	N	\$ 61.46	\$ 61.46
88334	26	A	ZZZ	N	N	D	N	N	\$ 25.06	\$ 25.06
88334	TC	A	ZZZ	N	N	D	N	N	\$ 11.33	\$ 11.33
88334		A	ZZZ	N	N	D	N	N	\$ 36.39	\$ 36.39
88341	26	A	ZZZ	N	N	D	N	N	\$ 18.80	\$ 18.80
88341	TC	A	ZZZ	N	N	D	N	N	\$ 38.56	\$ 38.56
88341		A	ZZZ	N	N	D	N	N	\$ 57.60	\$ 57.60
88342	26	A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
88342	TC	A	XXX	N	N	D	N	N	\$ 41.93	\$ 41.93
88342		A	XXX	N	N	D	N	N	\$ 65.31	\$ 65.31
88344	26	A	XXX	N	N	D	N	N	\$ 25.31	\$ 25.31
88344	TC	A	XXX	N	N	D	N	N	\$ 82.90	\$ 82.90

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
88344		A	XXX	N	N	D	N	N	\$ 108.45	\$ 108.45
88346	26	A	XXX	N	N	D	N	N	\$ 24.10	\$ 24.10
88346	TC	A	XXX	N	N	D	N	N	\$ 65.07	\$ 65.07
88346		A	XXX	N	N	D	N	N	\$ 88.93	\$ 88.93
88348	26	A	XXX	N	N	D	N	N	\$ 51.82	\$ 51.82
88348	TC	A	XXX	N	N	D	N	N	\$ 210.39	\$ 210.39
88348		A	XXX	N	N	D	N	N	\$ 262.45	\$ 262.45
88350	26	A	ZZZ	N	N	D	N	N	\$ 19.52	\$ 19.52
88350	TC	A	ZZZ	N	N	D	N	N	\$ 48.20	\$ 48.20
88350		A	ZZZ	N	N	D	N	N	\$ 67.72	\$ 67.72
88355	26	A	XXX	N	N	D	N	N	\$ 56.15	\$ 56.15
88355	TC	A	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
88355		A	XXX	N	N	D	N	N	\$ 92.54	\$ 92.54
88356	26	A	XXX	N	N	D	N	N	\$ 87.00	\$ 87.00
88356	TC	A	XXX	N	N	D	N	N	\$ 67.72	\$ 67.72
88356		A	XXX	N	N	D	N	N	\$ 154.96	\$ 154.96
88358	26	A	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
88358	TC	A	XXX	N	N	D	N	N	\$ 53.74	\$ 53.74
88358		A	XXX	N	N	D	N	N	\$ 87.24	\$ 87.24
88360	26	A	XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
88360	TC	A	XXX	N	N	D	N	N	\$ 48.92	\$ 48.92
88360		A	XXX	N	N	D	N	N	\$ 77.12	\$ 77.12
88361	26	A	XXX	N	N	D	N	N	\$ 29.40	\$ 29.40
88361	TC	A	XXX	N	N	D	N	N	\$ 47.48	\$ 47.48
88361		A	XXX	N	N	D	N	N	\$ 76.88	\$ 76.88
88362	26	A	XXX	N	N	D	N	N	\$ 74.95	\$ 74.95
88362	TC	A	XXX	N	N	D	N	N	\$ 66.03	\$ 66.03
88362		A	XXX	N	N	D	N	N	\$ 140.99	\$ 140.99
88363		A	XXX	N	N	D	N	N	\$ 13.01	\$ 15.18
88364	26	A	ZZZ	N	N	D	N	N	\$ 23.14	\$ 23.14
88364	TC	A	ZZZ	N	N	D	N	N	\$ 65.07	\$ 65.07
88364		A	ZZZ	N	N	D	N	N	\$ 87.97	\$ 87.97
88365	26	A	XXX	N	N	D	N	N	\$ 29.16	\$ 29.16
88365	TC	A	XXX	N	N	D	N	N	\$ 84.11	\$ 84.11
88365		A	XXX	N	N	D	N	N	\$ 113.51	\$ 113.51
88366	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
88366	TC	A	XXX	N	N	D	N	N	\$ 136.89	\$ 136.89
88366		A	XXX	N	N	D	N	N	\$ 178.58	\$ 178.58
88367	26	A	XXX	N	N	D	N	N	\$ 22.65	\$ 22.65
88367	TC	A	XXX	N	N	D	N	N	\$ 48.68	\$ 48.68
88367		A	XXX	N	N	D	N	N	\$ 71.34	\$ 71.34
88368	26	A	XXX	N	N	D	N	N	\$ 27.72	\$ 27.72

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
88368	TC	A	XXX	N	N	D	N	N	\$ 56.64	\$ 56.64
88368		A	XXX	N	N	D	N	N	\$ 84.59	\$ 84.59
88369	26	A	ZZZ	N	N	D	N	N	\$ 21.69	\$ 21.69
88369	TC	A	ZZZ	N	N	D	N	N	\$ 50.85	\$ 50.85
88369		A	ZZZ	N	N	D	N	N	\$ 72.54	\$ 72.54
88371	26	CLFS	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
88371		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88372	26	CLFS	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
88372		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88373	26	A	ZZZ	N	N	D	N	N	\$ 17.59	\$ 17.59
88373	TC	A	ZZZ	N	N	D	N	N	\$ 27.96	\$ 27.96
88373		A	ZZZ	N	N	D	N	N	\$ 45.55	\$ 45.55
88374	26	A	XXX	N	N	D	N	N	\$ 29.16	\$ 29.16
88374	TC	A	XXX	N	N	D	N	N	\$ 182.92	\$ 182.92
88374		A	XXX	N	N	D	N	N	\$ 212.08	\$ 212.08
88375		Not Covered	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
88377	26	A	XXX	N	N	D	N	N	\$ 43.14	\$ 43.14
88377	TC	A	XXX	N	N	D	N	N	\$ 213.53	\$ 213.53
88377		A	XXX	N	N	D	N	N	\$ 256.91	\$ 256.91
88380	26	A	XXX	N	N	D	N	N	\$ 36.87	\$ 36.87
88380	TC	A	XXX	N	N	D	N	N	\$ 46.75	\$ 46.75
88380		A	XXX	N	N	D	N	N	\$ 83.87	\$ 83.87
88381	26	A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
88381	TC	A	XXX	N	N	D	N	N	\$ 107.00	\$ 107.00
88381		A	XXX	N	N	D	N	N	\$ 123.63	\$ 123.63
88387	26	A	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
88387	TC	A	XXX	N	N	D	N	N	\$ 4.82	\$ 4.82
88387		A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
88388	26	A	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
88388	TC	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
88388		A	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
88399	26	CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88399	TC	CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88399		CLFS	XXX	N	N	D	N	N	\$ -	\$ -
88720		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88738		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88740		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88741		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
88749		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89049		A	XXX	N	N	D	N	N	\$ 42.66	\$ 165.33
89050		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89051		CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
89055		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89060	26	CLFS	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
89060		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89125		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89160		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89190		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89220	A	CLFS	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
89230	A	CLFS	XXX	N	N	D	N	N	\$ 1.45	\$ 1.45
89240	Unlisted/Manual	CLFS	XXX	N	N	D	N	N	\$ -	\$ -
89250	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89251	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89253	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89254	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89255	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89257	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89258	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89259	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89260	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89261	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89264	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89268	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89272	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89280	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89281	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89290	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89291	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89300	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89310	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89320	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89321	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89322	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89325	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89329	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89330	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89331	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89335	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89337	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89342	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89343	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89344	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89346	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -
89352	Not Covered	CLFS	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
89353		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
89354		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
89356		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
89398		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90281		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90283		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90284		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90287		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90288		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
90291		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90296		C	XXX	N	N	N	N	N	\$ -	\$ -
90371		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90375		C	XXX	N	N	N	N	N	\$ -	\$ -
90376		C	XXX	N	N	N	N	N	\$ -	\$ -
90377		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90378		C	XXX	N	N	N	N	N	\$ -	\$ -
90384		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90385		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90386		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90389		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90393		C	XXX	N	N	N	N	N	\$ -	\$ -
90396		C	XXX	N	N	N	N	N	\$ -	\$ -
90399		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
90460		Not Covered	XXX	N	N	D	N	N	\$ 10.85	\$ 10.85
90461		Not Covered	ZZZ	N	N	D	N	N	\$ 8.19	\$ 8.19
90471		A	XXX	N	N	D	N	N	\$ 12.00	\$ 12.00
90472		A	ZZZ	N	N	D	N	N	\$ 12.00	\$ 12.00
90473		A	XXX	N	N	D	N	N	\$ 10.85	\$ 10.85
90474		A	ZZZ	N	N	D	N	N	\$ 8.19	\$ 8.19
90476		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90477		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90581		C	XXX	N	N	N	N	N	\$ -	\$ -
90585		C	XXX	N	N	N	N	N	\$ -	\$ -
90586		C	XXX	N	N	N	N	N	\$ -	\$ -
90587		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90619		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90620		C	XXX	N	N	N	N	N	\$ -	\$ -
90621		C	XXX	N	N	N	N	N	\$ -	\$ -
90625		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90630		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90632		C	XXX	N	N	N	N	N	\$ -	\$ -
90633		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
90634		C	XXX	N	N	N	N	N	\$ -	\$ -
90636		C	XXX	N	N	N	N	N	\$ -	\$ -
90644		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90647		C	XXX	N	N	N	N	N	\$ -	\$ -
90648		C	XXX	N	N	N	N	N	\$ -	\$ -
90649		C	XXX	N	N	N	N	N	\$ -	\$ -
90650		C	XXX	N	N	N	N	N	\$ -	\$ -
90651		C	XXX	N	N	N	N	N	\$ -	\$ -
90653		C	XXX	N	N	N	N	N	\$ -	\$ -
90654		C	XXX	N	N	N	N	N	\$ -	\$ -
90655		C	XXX	N	N	N	N	N	\$ -	\$ -
90656		C	XXX	N	N	N	N	N	\$ -	\$ -
90657		C	XXX	N	N	N	N	N	\$ -	\$ -
90658		C	XXX	N	N	N	N	N	\$ -	\$ -
90660		C	XXX	N	N	N	N	N	\$ -	\$ -
90661		C	XXX	N	N	N	N	N	\$ -	\$ -
90662		C	XXX	N	N	N	N	N	\$ -	\$ -
90664		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90666		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90667		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90668		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90670		C	XXX	N	N	N	N	N	\$ -	\$ -
90672		C	XXX	N	N	N	N	N	\$ -	\$ -
90673		C	XXX	N	N	N	N	N	\$ -	\$ -
90674		C	XXX	N	N	N	N	N	\$ -	\$ -
90675		C	XXX	N	N	N	N	N	\$ -	\$ -
90676		C	XXX	N	N	N	N	N	\$ -	\$ -
90680		C	XXX	N	N	N	N	N	\$ -	\$ -
90681		C	XXX	N	N	N	N	N	\$ -	\$ -
90682		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90685		C	XXX	N	N	N	N	N	\$ -	\$ -
90686		C	XXX	N	N	N	N	N	\$ -	\$ -
90687		C	XXX	N	N	N	N	N	\$ -	\$ -
90688		C	XXX	N	N	N	N	N	\$ -	\$ -
90689		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90690		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90691		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90694		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90696		C	XXX	N	N	N	N	N	\$ -	\$ -
90697		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90698		C	XXX	N	N	N	N	N	\$ -	\$ -
90700		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
90702		C	XXX	N	N	N	N	N	\$ -	\$ -
90707		C	XXX	N	N	N	N	N	\$ -	\$ -
90710		C	XXX	N	N	N	N	N	\$ -	\$ -
90713		C	XXX	N	N	N	N	N	\$ -	\$ -
90714		C	XXX	N	N	N	N	N	\$ -	\$ -
90715		C	XXX	N	N	N	N	N	\$ -	\$ -
90716		C	XXX	N	N	N	N	N	\$ -	\$ -
90717		C	XXX	N	N	N	N	N	\$ -	\$ -
90723		C	XXX	N	N	N	N	N	\$ -	\$ -
90732		C	XXX	N	N	N	N	N	\$ -	\$ -
90733		C	XXX	N	N	N	N	N	\$ -	\$ -
90734		C	XXX	N	N	N	N	N	\$ -	\$ -
90736		C	XXX	N	N	N	N	N	\$ -	\$ -
90738		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90739		C	XXX	N	N	N	N	N	\$ -	\$ -
90740		C	XXX	N	N	N	N	N	\$ -	\$ -
90743		C	XXX	N	N	N	N	N	\$ -	\$ -
90744		C	XXX	N	N	N	N	N	\$ -	\$ -
90746		C	XXX	N	N	N	N	N	\$ -	\$ -
90747		C	XXX	N	N	N	N	N	\$ -	\$ -
90748		C	XXX	N	N	N	N	N	\$ -	\$ -
90749		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
90750		A	XXX	N	N	N	N	N	\$ -	\$ -
90756		A	XXX	N	N	N	N	N	\$ -	\$ -
90785		Not Covered	ZZZ	N	N	N	N	N	\$ 8.92	\$ 10.12
90791		A	XXX	N	N	N	N	N	\$ 107.00	\$ 121.46
90792		A	XXX	N	N	N	N	N	\$ 120.02	\$ 134.96
90832		A	XXX	N	N	N	N	N	\$ 47.00	\$ 52.30
90833		A	ZZZ	N	N	N	N	N	\$ 43.14	\$ 47.72
90834		A	XXX	N	N	N	N	N	\$ 62.42	\$ 69.65
90836		A	ZZZ	N	N	N	N	N	\$ 54.47	\$ 60.25
90837		A	XXX	N	N	N	N	N	\$ 92.30	\$ 102.91
90838		Not Covered	ZZZ	N	N	N	N	N	\$ 72.54	\$ 80.01
90839		A	XXX	N	N	D	N	N	\$ 87.72	\$ 97.85
90840		A	ZZZ	N	N	D	N	N	\$ 41.45	\$ 46.27
90845		Not Covered	XXX	N	N	D	N	N	\$ 59.77	\$ 66.03
90846		A	XXX	N	N	D	N	N	\$ 67.24	\$ 67.72
90847		A	XXX	N	N	D	N	N	\$ 69.65	\$ 70.13
90849		Not Covered	XXX	N	N	D	N	N	\$ 18.80	\$ 22.90
90853		A	XXX	N	N	D	N	N	\$ 16.39	\$ 18.32
90863		A	XXX	N	N	N	N	N	\$ 16.63	\$ 17.59
90865		Not Covered	XXX	N	N	D	N	N	\$ 85.07	\$ 111.10

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
90867		Not Covered	000	N	N	N	N	N	\$ -	\$ -
90868		Not Covered	000	N	N	N	N	N	\$ -	\$ -
90869		Not Covered	000	N	N	N	N	N	\$ -	\$ -
90870		A	000	N	N	D	N	N	\$ 73.51	\$ 114.48
90875		A	XXX	N	N	N	N	N	\$ 41.21	\$ 41.69
90876		A	XXX	N	N	N	N	N	\$ 65.31	\$ 71.58
90880		Not Covered	XXX	N	N	D	N	N	\$ 61.70	\$ 72.06
90882		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90885		B	XXX	N	N	N	N	N	\$ 33.98	\$ 33.98
90887		B	XXX	N	N	N	N	N	\$ 51.33	\$ 58.80
90889		B	XXX	N	N	N	N	N	\$ -	\$ -
90899		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
90901		Not Covered	000	N	N	D	N	N	\$ 13.26	\$ 26.27
90912		Not Covered	000	N	N	D	N	N	\$ 29.64	\$ 52.78
90913		Not Covered	ZZZ	N	N	D	N	N	\$ 16.87	\$ 21.45
90935		A	000	N	N	D	N	N	\$ 49.16	\$ 49.16
90937		A	000	N	N	D	N	N	\$ 70.85	\$ 70.85
90940		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
90945		A	000	N	N	D	N	N	\$ 57.60	\$ 57.60
90947		A	000	N	N	D	N	N	\$ 83.87	\$ 83.87
90951		A	XXX	N	N	D	N	N	\$ 804.94	\$ 804.94
90952		C	XXX	N	N	D	N	N	\$ -	\$ -
90953		C	XXX	N	N	D	N	N	\$ -	\$ -
90954		A	XXX	N	N	D	N	N	\$ 531.16	\$ 531.16
90955		A	XXX	N	N	D	N	N	\$ 356.92	\$ 356.92
90956		A	XXX	N	N	D	N	N	\$ 236.66	\$ 236.66
90957		A	XXX	N	N	D	N	N	\$ 528.27	\$ 528.27
90958		A	XXX	N	N	D	N	N	\$ 343.18	\$ 343.18
90959		A	XXX	N	N	D	N	N	\$ 220.76	\$ 220.76
90960		A	XXX	N	N	D	N	N	\$ 241.48	\$ 241.48
90961		A	XXX	N	N	D	N	N	\$ 199.55	\$ 199.55
90962		A	XXX	N	N	D	N	N	\$ 135.68	\$ 135.68
90963		A	XXX	N	N	D	N	N	\$ 414.76	\$ 414.76
90964		A	XXX	N	N	D	N	N	\$ 355.96	\$ 355.96
90965		A	XXX	N	N	D	N	N	\$ 342.22	\$ 342.22
90966		A	XXX	N	N	D	N	N	\$ 199.31	\$ 199.31
90967		A	XXX	N	N	D	N	N	\$ 12.05	\$ 12.05
90968		A	XXX	N	N	D	N	N	\$ 11.81	\$ 11.81
90969		A	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
90970		A	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
90989		C	XXX	N	N	N	N	N	\$ -	\$ -
90993		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
90997		A	000	N	N	D	N	N	\$ 60.73	\$ 60.73
90999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
91010	26	A	000	N	N	D	N	N	\$ 43.86	\$ 43.86
91010	TC	A	000	N	N	D	N	N	\$ 95.92	\$ 95.92
91010		A	000	N	N	D	N	N	\$ 139.78	\$ 139.78
91013	26	A	ZZZ	N	N	D	N	N	\$ 6.27	\$ 6.27
91013	TC	A	ZZZ	N	N	D	N	N	\$ 10.60	\$ 10.60
91013		A	ZZZ	N	N	D	N	N	\$ 16.87	\$ 16.87
91020	26	A	000	N	N	D	N	N	\$ 49.41	\$ 49.41
91020	TC	A	000	N	N	D	N	N	\$ 127.01	\$ 127.01
91020		A	000	N	N	D	N	N	\$ 176.41	\$ 176.41
91022	26	A	000	N	N	D	N	N	\$ 49.16	\$ 49.16
91022	TC	A	000	N	N	D	N	N	\$ 62.42	\$ 62.42
91022		A	000	N	N	D	N	N	\$ 111.58	\$ 111.58
91030	26	A	000	N	N	D	N	N	\$ 31.33	\$ 31.33
91030	TC	A	000	N	N	D	N	N	\$ 61.94	\$ 61.94
91030		A	000	N	N	D	N	N	\$ 93.27	\$ 93.27
91034	26	A	000	N	N	D	N	N	\$ 33.50	\$ 33.50
91034	TC	A	000	N	N	D	N	N	\$ 91.34	\$ 91.34
91034		A	000	N	N	D	N	N	\$ 124.84	\$ 124.84
91035	26	A	000	N	N	D	N	N	\$ 55.43	\$ 55.43
91035	TC	A	000	N	N	D	N	N	\$ 257.15	\$ 257.15
91035		A	000	N	N	D	N	N	\$ 312.58	\$ 312.58
91037	26	A	000	N	N	D	N	N	\$ 33.26	\$ 33.26
91037	TC	A	000	N	N	D	N	N	\$ 76.40	\$ 76.40
91037		A	000	N	N	D	N	N	\$ 109.66	\$ 109.66
91038	26	A	000	N	N	D	N	N	\$ 37.60	\$ 37.60
91038	TC	A	000	N	N	D	N	N	\$ 240.04	\$ 240.04
91038		A	000	N	N	D	N	N	\$ 277.63	\$ 277.63
91040	26	A	000	N	N	D	N	N	\$ 33.26	\$ 33.26
91040	TC	A	000	N	N	D	N	N	\$ 303.66	\$ 303.66
91040		A	000	N	N	D	N	N	\$ 336.92	\$ 336.92
91065	26	A	000	N	N	D	N	N	\$ 6.99	\$ 6.99
91065	TC	A	000	N	N	D	N	N	\$ 49.65	\$ 49.65
91065		A	000	N	N	D	N	N	\$ 56.64	\$ 56.64
91110	26	A	XXX	N	N	D	N	N	\$ 85.31	\$ 85.31
91110	TC	A	XXX	N	N	D	N	N	\$ 448.74	\$ 448.74
91110		A	XXX	N	N	D	N	N	\$ 534.06	\$ 534.06
91111	26	Not Covered	XXX	N	N	D	N	N	\$ 31.09	\$ 31.09
91111	TC	Not Covered	XXX	N	N	D	N	N	\$ 479.83	\$ 479.83
91111		Not Covered	XXX	N	N	D	N	N	\$ 510.86	\$ 510.86
91112	26	A	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
91112	TC	A	XXX	N	N	D	N	N	\$ 953.64	\$ 953.64
91112		A	XXX	N	N	D	N	N	\$ 1,025.21	\$ 1,025.21
91117		Not Covered	000	N	N	D	N	N	\$ 91.58	\$ 91.58
91120	26	A	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
91120	TC	A	XXX	N	N	D	N	N	\$ 295.47	\$ 295.47
91120		A	XXX	N	N	D	N	N	\$ 328.72	\$ 328.72
91122	26	A	000	N	N	D	N	N	\$ 59.77	\$ 59.77
91122	TC	A	000	N	N	D	N	N	\$ 112.31	\$ 112.31
91122		A	000	N	N	D	N	N	\$ 172.07	\$ 172.07
91132	26	Not Covered	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
91132	TC	Not Covered	XXX	N	N	D	N	N	\$ 237.87	\$ 237.87
91132		Not Covered	XXX	N	N	D	N	N	\$ 255.94	\$ 255.94
91133	26	Not Covered	XXX	N	N	D	N	N	\$ 22.41	\$ 22.41
91133	TC	Not Covered	XXX	N	N	D	N	N	\$ 247.51	\$ 247.51
91133		Not Covered	XXX	N	N	D	N	N	\$ 270.16	\$ 270.16
91200	26	A	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
91200	TC	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
91200		A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
91299	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
91299	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
91299		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
91300		C	XXX	N	N	N	N	N	\$ -	\$ -
91301		C	XXX	N	N	N	N	N	\$ -	\$ -
92002		A	XXX	N	B	D	N	N	\$ 31.57	\$ 55.19
92004		A	XXX	N	B	D	N	N	\$ 63.87	\$ 97.12
92012		A	XXX	N	B	D	N	N	\$ 34.22	\$ 57.60
92014		A	XXX	N	B	D	N	N	\$ 51.33	\$ 81.46
92015		Not Covered	XXX	N	N	N	N	N	\$ 13.50	\$ 13.74
92018		A	XXX	N	N	D	N	N	\$ 93.27	\$ 93.27
92019		A	XXX	N	N	D	N	N	\$ 47.96	\$ 47.96
92020		A	XXX	N	B	D	N	N	\$ 13.50	\$ 18.08
92025	26	A	XXX	7	B	D	N	N	\$ 12.77	\$ 12.77
92025	TC	A	XXX	7	B	D	N	N	\$ 10.60	\$ 10.60
92025		A	XXX	7	B	D	N	N	\$ 23.38	\$ 23.38
92060	26	A	XXX	7	B	D	N	N	\$ 24.58	\$ 24.58
92060	TC	A	XXX	7	B	D	N	N	\$ 15.91	\$ 15.91
92060		A	XXX	7	B	D	N	N	\$ 40.49	\$ 40.49
92065	26	A	XXX	N	B	D	N	N	\$ 11.81	\$ 11.81
92065	TC	A	XXX	N	B	D	N	N	\$ 21.69	\$ 21.69
92065		A	XXX	N	B	D	N	N	\$ 33.50	\$ 33.50
92071		Not Covered	XXX	N	Y	D	N	N	\$ 21.69	\$ 24.34
92072		Not Covered	XXX	N	B	D	N	N	\$ 64.83	\$ 84.35

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92081	26	A	XXX	7	B	D	N	N	\$ 10.60	\$ 10.60
92081	TC	A	XXX	7	B	D	N	N	\$ 10.85	\$ 10.85
92081		A	XXX	7	B	D	N	N	\$ 21.45	\$ 21.45
92082	26	A	XXX	7	B	D	N	N	\$ 13.98	\$ 13.98
92082	TC	A	XXX	7	B	D	N	N	\$ 15.91	\$ 15.91
92082		A	XXX	7	B	D	N	N	\$ 29.88	\$ 29.88
92083	26	A	XXX	7	B	D	N	N	\$ 17.83	\$ 17.83
92083	TC	A	XXX	7	B	D	N	N	\$ 21.93	\$ 21.93
92083		A	XXX	7	B	D	N	N	\$ 39.77	\$ 39.77
92100		A	XXX	N	B	D	N	N	\$ 21.69	\$ 53.50
92132	26	Not Covered	XXX	7	B	D	N	N	\$ 10.85	\$ 10.85
92132	TC	Not Covered	XXX	7	B	D	N	N	\$ 9.40	\$ 9.40
92132		Not Covered	XXX	7	B	D	N	N	\$ 20.00	\$ 20.00
92133	26	A	XXX	7	B	D	N	N	\$ 14.46	\$ 14.46
92133	TC	A	XXX	7	B	D	N	N	\$ 9.40	\$ 9.40
92133		A	XXX	7	B	D	N	N	\$ 23.86	\$ 23.86
92134	26	A	XXX	7	B	D	N	N	\$ 16.63	\$ 16.63
92134	TC	A	XXX	7	B	D	N	N	\$ 9.64	\$ 9.64
92134		A	XXX	7	B	D	N	N	\$ 26.27	\$ 26.27
92136	26	A	XXX	7	N	D	N	N	\$ 20.00	\$ 20.00
92136	TC	A	XXX	7	B	D	N	N	\$ 14.70	\$ 14.70
92136		A	XXX	7	B	D	N	N	\$ 34.70	\$ 34.70
92145	26	Not Covered	XXX	7	B	D	N	N	\$ 4.10	\$ 4.10
92145	TC	Not Covered	XXX	7	B	D	N	N	\$ 4.34	\$ 4.34
92145		Not Covered	XXX	7	B	D	N	N	\$ 8.44	\$ 8.44
92201		A	XXX	N	B	D	N	N	\$ 15.18	\$ 16.39
92202		A	XXX	N	B	D	N	N	\$ 9.64	\$ 10.36
92227		A	XXX	N	B	D	N	N	\$ 9.64	\$ 9.64
92228	26	A	XXX	7	B	D	N	N	\$ 11.81	\$ 11.81
92228	TC	A	XXX	7	B	D	N	N	\$ 7.71	\$ 7.71
92228		A	XXX	7	B	D	N	N	\$ 19.52	\$ 19.52
92229		Not Covered	XXX	7	B	D	N	N	\$ -	\$ -
92230		A	XXX	N	N	D	N	N	\$ 22.41	\$ 57.12
92235	26	A	XXX	7	B	D	N	N	\$ 27.72	\$ 27.72
92235	TC	A	XXX	7	B	D	N	N	\$ 45.55	\$ 45.55
92235		A	XXX	7	B	D	N	N	\$ 73.26	\$ 73.26
92240	26	A	XXX	7	B	D	N	N	\$ 30.85	\$ 30.85
92240	TC	A	XXX	7	B	D	N	N	\$ 94.95	\$ 94.95
92240		A	XXX	7	B	D	N	N	\$ 125.80	\$ 125.80
92242	26	A	XXX	7	B	D	N	N	\$ 35.67	\$ 35.67
92242	TC	A	XXX	7	B	D	N	N	\$ 119.78	\$ 119.78
92242		A	XXX	7	B	D	N	N	\$ 155.69	\$ 155.69

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92250	26	A	XXX	7	B	D	N	N	\$ 13.98	\$ 13.98
92250	TC	A	XXX	7	B	D	N	N	\$ 11.09	\$ 11.09
92250		A	XXX	7	B	D	N	N	\$ 25.06	\$ 25.06
92260		A	XXX	N	B	D	N	N	\$ 7.23	\$ 12.77
92265	26	A	XXX	7	B	D	N	N	\$ 30.13	\$ 30.13
92265	TC	A	XXX	7	B	D	N	N	\$ 25.31	\$ 25.31
92265		A	XXX	7	B	D	N	N	\$ 55.43	\$ 55.43
92270	26	A	XXX	7	B	D	N	N	\$ 27.72	\$ 27.72
92270	TC	A	XXX	7	B	D	N	N	\$ 37.11	\$ 37.11
92270		A	XXX	7	B	D	N	N	\$ 64.83	\$ 64.83
92273	26	A	XXX	7	B	D	N	N	\$ 24.34	\$ 24.34
92273	TC	A	XXX	7	B	D	N	N	\$ 57.36	\$ 57.36
92273		A	XXX	7	B	D	N	N	\$ 81.94	\$ 81.94
92274	26	A	XXX	7	B	D	N	N	\$ 21.45	\$ 21.45
92274	TC	A	XXX	7	B	D	N	N	\$ 34.46	\$ 34.46
92274		A	XXX	7	B	D	N	N	\$ 55.91	\$ 55.91
92283	26	A	XXX	7	B	D	N	N	\$ 6.03	\$ 6.03
92283	TC	A	XXX	7	B	D	N	N	\$ 27.47	\$ 27.47
92283		A	XXX	7	B	D	N	N	\$ 33.50	\$ 33.50
92284	26	A	XXX	7	B	D	N	N	\$ 8.19	\$ 8.19
92284	TC	A	XXX	7	B	D	N	N	\$ 28.44	\$ 28.44
92284		A	XXX	7	B	D	N	N	\$ 36.63	\$ 36.63
92285	26	A	XXX	7	B	D	N	N	\$ 2.17	\$ 2.17
92285	TC	A	XXX	7	B	D	N	N	\$ 12.05	\$ 12.05
92285		A	XXX	7	B	D	N	N	\$ 13.98	\$ 13.98
92286	26	A	XXX	7	B	D	N	N	\$ 14.46	\$ 14.46
92286	TC	A	XXX	7	B	D	N	N	\$ 10.60	\$ 10.60
92286		A	XXX	7	B	D	N	N	\$ 25.06	\$ 25.06
92287	26	A	XXX	N	B	D	N	N	\$ 27.23	\$ 27.23
92287	TC	A	XXX	N	B	D	N	N	\$ 66.60	\$ 66.60
92287		A	XXX	N	B	D	N	N	\$ 93.70	\$ 93.70
92310		A	XXX	N	N	N	N	N	\$ 40.49	\$ 67.00
92311		A	XXX	N	N	D	N	N	\$ 35.91	\$ 68.44
92312		A	XXX	N	B	D	N	N	\$ 41.21	\$ 78.81
92313		A	XXX	N	N	D	N	N	\$ 29.40	\$ 64.11
92314		A	XXX	N	N	N	N	N	\$ 23.62	\$ 56.15
92315		A	XXX	N	N	D	N	N	\$ 14.22	\$ 51.33
92316		A	XXX	N	B	D	N	N	\$ 21.45	\$ 63.87
92317		A	XXX	N	N	D	N	N	\$ 14.22	\$ 53.98
92325		A	XXX	N	N	D	N	N	\$ 28.68	\$ 28.68
92326		A	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
92340		Not Covered	XXX	N	N	N	N	N	\$ 13.01	\$ 22.65

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92341		Not Covered	XXX	N	N	N	N	N	\$ 16.15	\$ 26.03
92342		Not Covered	XXX	N	N	N	N	N	\$ 18.32	\$ 27.72
92352		B	XXX	N	N	N	N	N	\$ 13.01	\$ 29.64
92353		B	XXX	N	N	N	N	N	\$ 17.11	\$ 33.74
92354		B	XXX	N	N	N	N	N	\$ 8.19	\$ 8.19
92355		B	XXX	N	N	N	N	N	\$ 12.77	\$ 12.77
92358		B	XXX	N	N	N	N	N	\$ 6.75	\$ 6.75
92370		A	XXX	N	N	N	N	N	\$ 11.33	\$ 20.49
92371		B	XXX	N	N	N	N	N	\$ 6.75	\$ 6.75
92499	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
92499	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
92499		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
92502		A	000	N	N	D	N	N	\$ 62.42	\$ 62.42
92504		A	XXX	N	N	D	N	N	\$ 6.27	\$ 18.32
92507		A	XXX	5	N	D	N	N	\$ 51.09	\$ 51.09
92508		A	XXX	5	N	D	N	N	\$ 15.42	\$ 15.42
92511		A	000	N	N	D	N	N	\$ 24.82	\$ 73.75
92512		A	XXX	N	N	D	N	N	\$ 18.80	\$ 38.56
92516		A	XXX	N	N	D	N	N	\$ 15.67	\$ 43.86
92517		Not Covered	XXX	N	B	D	N	N	\$ 29.16	\$ 54.71
92518		Not Covered	XXX	N	B	D	N	N	\$ 29.16	\$ 51.33
92519		Not Covered	XXX	N	B	D	N	N	\$ 43.62	\$ 84.83
92520		A	XXX	N	N	D	N	N	\$ 26.75	\$ 51.82
92521		A	XXX	5	N	D	N	N	\$ 89.41	\$ 89.41
92522		A	XXX	5	N	D	N	N	\$ 75.19	\$ 75.19
92523		A	XXX	5	N	D	N	N	\$ 153.76	\$ 153.76
92524		A	XXX	5	N	D	N	N	\$ 73.75	\$ 73.75
92526		A	XXX	5	N	D	N	N	\$ 56.39	\$ 56.39
92531		B	XXX	N	N	N	N	N	\$ -	\$ -
92532		B	XXX	N	N	N	N	N	\$ -	\$ -
92533		B	XXX	N	N	N	N	N	\$ -	\$ -
92534		B	XXX	N	N	N	N	N	\$ -	\$ -
92537	26	A	XXX	N	B	D	N	N	\$ 20.97	\$ 20.97
92537	TC	A	XXX	N	B	D	N	N	\$ 6.51	\$ 6.51
92537		A	XXX	N	B	D	N	N	\$ 27.23	\$ 27.23
92538	26	A	XXX	N	B	D	N	N	\$ 10.60	\$ 10.60
92538	TC	A	XXX	N	B	D	N	N	\$ 4.10	\$ 4.10
92538		A	XXX	N	B	D	N	N	\$ 14.70	\$ 14.70
92540	26	A	XXX	N	N	D	N	N	\$ 52.54	\$ 52.54
92540	TC	A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
92540		A	XXX	N	N	D	N	N	\$ 71.82	\$ 71.82
92541	26	A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92541	TC	A	XXX	N	N	D	N	N	\$ 2.65	\$ 2.65
92541		A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
92542	26	A	XXX	N	N	D	N	N	\$ 16.87	\$ 16.87
92542	TC	A	XXX	N	N	D	N	N	\$ 2.65	\$ 2.65
92542		A	XXX	N	N	D	N	N	\$ 19.52	\$ 19.52
92544	26	A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
92544	TC	A	XXX	N	N	D	N	N	\$ 2.41	\$ 2.41
92544		A	XXX	N	N	D	N	N	\$ 12.05	\$ 12.05
92545	26	A	XXX	N	N	D	N	N	\$ 8.92	\$ 8.92
92545	TC	A	XXX	N	N	D	N	N	\$ 2.17	\$ 2.17
92545		A	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
92546	26	A	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
92546	TC	A	XXX	N	N	D	N	N	\$ 63.14	\$ 63.14
92546		A	XXX	N	N	D	N	N	\$ 73.26	\$ 73.26
92547		A	ZZZ	N	N	D	N	N	\$ 6.03	\$ 6.03
92548	26	A	XXX	N	N	D	N	N	\$ 23.14	\$ 23.14
92548	TC	A	XXX	N	N	D	N	N	\$ 9.40	\$ 9.40
92548		A	XXX	N	N	D	N	N	\$ 32.54	\$ 32.54
92549	26	Not Covered	XXX	N	N	D	N	N	\$ 30.37	\$ 30.37
92549	TC	Not Covered	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
92549		Not Covered	XXX	N	N	D	N	N	\$ 41.93	\$ 41.93
92550		A	XXX	N	B	D	N	N	\$ 14.70	\$ 14.70
92551		A	XXX	N	N	N	N	N	\$ 6.99	\$ 6.99
92552		A	XXX	N	B	D	N	N	\$ 19.52	\$ 19.52
92553		A	XXX	N	B	D	N	N	\$ 23.86	\$ 23.86
92555		A	XXX	N	B	D	N	N	\$ 14.94	\$ 14.94
92556		A	XXX	N	B	D	N	N	\$ 23.62	\$ 23.62
92557		A	XXX	N	B	D	N	N	\$ 22.17	\$ 25.55
92558		Not Covered	XXX	N	N	N	N	N	\$ 5.78	\$ 6.51
92559		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
92560		C	XXX	N	N	N	N	N	\$ -	\$ -
92561		A	XXX	N	B	D	N	N	\$ 23.86	\$ 23.86
92562		A	XXX	N	B	D	N	N	\$ 27.96	\$ 27.96
92563		A	XXX	N	B	D	N	N	\$ 18.80	\$ 18.80
92564		A	XXX	N	B	D	N	N	\$ 14.22	\$ 14.22
92565		A	XXX	N	B	D	N	N	\$ 10.60	\$ 10.60
92567		A	XXX	N	B	D	N	N	\$ 7.23	\$ 10.60
92568		A	XXX	N	B	D	N	N	\$ 10.12	\$ 10.36
92570		A	XXX	N	B	D	N	N	\$ 20.24	\$ 22.41
92571		A	XXX	N	B	D	N	N	\$ 16.87	\$ 16.87
92572		A	XXX	N	B	D	N	N	\$ 21.45	\$ 21.45
92575		A	XXX	N	B	D	N	N	\$ 41.21	\$ 41.21

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
92576		A	XXX	N	B	D	N	N	\$ 22.90	\$ 22.90
92577		A	XXX	N	B	D	N	N	\$ 9.16	\$ 9.16
92579		A	XXX	N	B	D	N	N	\$ 25.79	\$ 31.09
92582		A	XXX	N	B	D	N	N	\$ 45.31	\$ 45.31
92583		A	XXX	N	B	D	N	N	\$ 30.37	\$ 30.37
92584		A	XXX	N	B	D	N	N	\$ 75.67	\$ 75.67
92587	26	A	XXX	N	B	D	N	N	\$ 12.29	\$ 12.29
92587	TC	A	XXX	N	B	D	N	N	\$ 2.41	\$ 2.41
92587		A	XXX	N	B	D	N	N	\$ 14.70	\$ 14.70
92588	26	A	XXX	N	B	D	N	N	\$ 19.04	\$ 19.04
92588	TC	A	XXX	N	B	D	N	N	\$ 3.37	\$ 3.37
92588		A	XXX	N	B	D	N	N	\$ 22.41	\$ 22.41
92590		C	XXX	N	N	N	N	N	\$ -	\$ -
92591		C	XXX	N	N	N	N	N	\$ -	\$ -
92592		C	XXX	N	N	N	N	N	\$ -	\$ -
92593		C	XXX	N	N	N	N	N	\$ -	\$ -
92594		C	XXX	N	N	N	N	N	\$ -	\$ -
92595		C	XXX	N	N	N	N	N	\$ -	\$ -
92596		A	XXX	N	B	D	N	N	\$ 40.49	\$ 40.49
92597		A	XXX	5	N	D	N	N	\$ 47.72	\$ 47.72
92601		A	XXX	N	N	D	N	N	\$ 83.63	\$ 109.66
92602		A	XXX	N	N	D	N	N	\$ 47.24	\$ 68.93
92603		A	XXX	N	N	D	N	N	\$ 81.46	\$ 102.43
92604		A	XXX	N	N	D	N	N	\$ 45.31	\$ 61.46
92605		B	XXX	N	N	N	N	N	\$ 60.25	\$ 63.87
92606		B	XXX	N	N	N	N	N	\$ 48.68	\$ 56.39
92607		A	XXX	5	N	D	N	N	\$ 82.42	\$ 82.42
92608		A	ZZZ	N	N	D	N	N	\$ 33.26	\$ 33.26
92609		A	XXX	5	N	D	N	N	\$ 68.93	\$ 68.93
92610		A	XXX	N	N	D	N	N	\$ 46.75	\$ 56.15
92611		A	XXX	N	N	D	N	N	\$ 60.97	\$ 60.97
92612		A	XXX	N	N	D	N	N	\$ 44.59	\$ 124.12
92613		Not Covered	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
92614		A	XXX	N	N	D	N	N	\$ 44.10	\$ 93.75
92615		A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
92616		A	XXX	N	N	D	N	N	\$ 66.52	\$ 138.09
92617		A	XXX	N	N	D	N	N	\$ 27.72	\$ 27.72
92618		Not Covered	ZZZ	N	N	N	N	N	\$ 22.17	\$ 22.41
92620		A	XXX	N	B	D	N	N	\$ 53.98	\$ 61.46
92621		A	ZZZ	N	N	D	N	N	\$ 12.53	\$ 14.94
92625		A	XXX	N	B	D	N	N	\$ 41.45	\$ 46.27
92626		A	XXX	N	B	D	N	N	\$ 50.37	\$ 59.29

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92627		A	ZZZ	N	N	D	N	N	\$ 11.81	\$ 13.98
92630		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
92633		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
92640		A	XXX	N	B	D	N	N	\$ 63.62	\$ 74.95
92650		A	XXX	N	B	D	N	N	\$ 18.08	\$ 18.08
92651		A	XXX	N	B	D	N	N	\$ 58.08	\$ 58.08
92652		A	XXX	N	B	D	N	N	\$ 76.88	\$ 76.88
92653		A	XXX	N	B	D	N	N	\$ 55.91	\$ 55.91
92700		C	XXX	N	N	D	N	N	\$ -	\$ -
92920		A	000	Y	N	D	N	N	\$ 370.90	\$ 370.90
92921		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92924		A	000	Y	N	D	N	N	\$ 442.24	\$ 442.24
92925		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92928		A	000	Y	N	D	N	N	\$ 412.83	\$ 412.83
92929		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92933		A	000	Y	N	D	N	N	\$ 463.44	\$ 463.44
92934		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92937		A	000	Y	N	D	N	N	\$ 412.35	\$ 412.35
92938		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92941		A	000	Y	N	D	N	N	\$ 463.68	\$ 463.68
92943		A	000	Y	N	D	N	N	\$ 464.17	\$ 464.17
92944		B	ZZZ	N	N	N	N	N	\$ -	\$ -
92950		A	000	N	N	D	N	N	\$ 127.97	\$ 217.86
92953		A	000	N	N	D	N	N	\$ 0.72	\$ 0.72
92960		A	000	N	N	D	N	N	\$ 73.51	\$ 104.11
92961		A	000	N	N	N	N	N	\$ 171.59	\$ 171.59
92970		A	000	N	N	D	N	N	\$ 132.07	\$ 132.07
92971		A	000	N	N	D	N	N	\$ 69.89	\$ 69.89
92973		A	ZZZ	N	N	D	N	N	\$ 124.12	\$ 124.12
92974		A	ZZZ	N	N	D	N	N	\$ 113.03	\$ 113.03
92975		A	000	Y	N	D	N	N	\$ 263.65	\$ 263.65
92977		A	XXX	N	N	D	N	N	\$ 33.74	\$ 33.74
92978	26	A	ZZZ	N	N	D	N	N	\$ 66.28	\$ 66.28
92978	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
92978		C	ZZZ	N	N	D	N	N	\$ -	\$ -
92979	26	A	ZZZ	N	N	D	N	N	\$ 52.54	\$ 52.54
92979	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
92979		C	ZZZ	N	N	D	N	N	\$ -	\$ -
92986		A	090	Y	N	D	N	N	\$ 913.39	\$ 913.39
92987		A	090	Y	N	D	N	N	\$ 944.72	\$ 944.72
92990		A	090	Y	N	D	N	N	\$ 752.64	\$ 752.64
92997		A	000	Y	N	D	N	N	\$ 442.24	\$ 442.24

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
92998		A	ZZZ	N	N	D	N	N	\$ 220.52	\$ 220.52
93000		A	XXX	6	N	D	N	N	\$ 9.64	\$ 9.64
93005		A	XXX	6	N	D	N	N	\$ 3.86	\$ 3.86
93010		A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
93015		A	XXX	6	N	D	N	N	\$ 45.55	\$ 45.55
93016		A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
93017		A	XXX	6	N	D	N	N	\$ 20.97	\$ 20.97
93018		A	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
93024	26	A	XXX	6	N	D	N	N	\$ 37.84	\$ 37.84
93024	TC	A	XXX	6	N	D	N	N	\$ 31.81	\$ 31.81
93024		A	XXX	6	N	D	N	N	\$ 69.89	\$ 69.89
93025	26	A	XXX	6	N	D	N	N	\$ 25.06	\$ 25.06
93025	TC	A	XXX	6	N	D	N	N	\$ 59.29	\$ 59.29
93025		A	XXX	6	N	D	N	N	\$ 84.35	\$ 84.35
93040		A	XXX	6	N	D	N	N	\$ 8.19	\$ 8.19
93041		A	XXX	6	N	D	N	N	\$ 3.62	\$ 3.62
93042		A	XXX	N	N	D	N	N	\$ 4.58	\$ 4.58
93050	26	Not Covered	XXX	6	B	D	N	N	\$ 5.54	\$ 5.54
93050	TC	Not Covered	XXX	6	B	D	N	N	\$ 4.82	\$ 4.82
93050		Not Covered	XXX	6	B	D	N	N	\$ 10.36	\$ 10.36
93224		A	XXX	6	N	D	N	N	\$ 49.41	\$ 49.41
93225		A	XXX	6	N	D	N	N	\$ 12.05	\$ 12.05
93226		A	XXX	6	N	D	N	N	\$ 24.58	\$ 24.58
93227		A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
93228		A	XXX	N	N	D	N	N	\$ 17.59	\$ 17.59
93229		A	XXX	6	N	D	N	N	\$ 425.61	\$ 425.61
93241		C	XXX	6	N	D	N	N	\$ -	\$ -
93242		A	XXX	6	N	D	N	N	\$ 9.16	\$ 9.16
93243		C	XXX	6	N	D	N	N	\$ -	\$ -
93244		A	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
93245		C	XXX	6	N	D	N	N	\$ -	\$ -
93246		A	XXX	6	N	D	N	N	\$ 9.16	\$ 9.16
93247		C	XXX	6	N	D	N	N	\$ -	\$ -
93248		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
93260	26	Not Covered	XXX	6	N	D	N	N	\$ 28.92	\$ 28.92
93260	TC	Not Covered	XXX	6	N	D	N	N	\$ 20.00	\$ 20.00
93260		Not Covered	XXX	6	N	D	N	N	\$ 48.92	\$ 48.92
93261	26	Not Covered	XXX	6	N	D	N	N	\$ 24.58	\$ 24.58
93261	TC	Not Covered	XXX	6	N	D	N	N	\$ 20.00	\$ 20.00
93261		Not Covered	XXX	6	N	D	N	N	\$ 44.59	\$ 44.59
93264		Not Covered	XXX	N	N	D	N	N	\$ 24.10	\$ 32.78
93268		A	XXX	6	N	D	N	N	\$ 121.71	\$ 121.71

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93270		A	XXX	6	N	D	N	N	\$ 5.30	\$ 5.30
93271		A	XXX	6	N	D	N	N	\$ 99.29	\$ 99.29
93272		A	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
93278	26	A	XXX	6	N	D	N	N	\$ 8.44	\$ 8.44
93278	TC	A	XXX	6	N	D	N	N	\$ 10.60	\$ 10.60
93278		A	XXX	6	N	D	N	N	\$ 18.80	\$ 18.80
93279	26	A	XXX	6	N	D	N	N	\$ 21.21	\$ 21.21
93279	TC	A	XXX	6	N	D	N	N	\$ 20.97	\$ 20.97
93279		A	XXX	6	N	D	N	N	\$ 42.42	\$ 42.42
93280	26	A	XXX	6	N	D	N	N	\$ 26.03	\$ 26.03
93280	TC	A	XXX	6	N	D	N	N	\$ 24.34	\$ 24.34
93280		A	XXX	6	N	D	N	N	\$ 50.37	\$ 50.37
93281	26	A	XXX	6	N	D	N	N	\$ 28.92	\$ 28.92
93281	TC	A	XXX	6	N	D	N	N	\$ 24.82	\$ 24.82
93281		A	XXX	6	N	D	N	N	\$ 53.74	\$ 53.74
93282	26	A	XXX	6	N	D	N	N	\$ 28.68	\$ 28.68
93282	TC	A	XXX	6	N	D	N	N	\$ 22.65	\$ 22.65
93282		A	XXX	6	N	D	N	N	\$ 51.33	\$ 51.33
93283	26	A	XXX	6	N	D	N	N	\$ 38.32	\$ 38.32
93283	TC	A	XXX	6	N	D	N	N	\$ 24.58	\$ 24.58
93283		A	XXX	6	N	D	N	N	\$ 63.14	\$ 63.14
93284	26	A	XXX	6	N	D	N	N	\$ 41.93	\$ 41.93
93284	TC	A	XXX	6	N	D	N	N	\$ 26.27	\$ 26.27
93284		A	XXX	6	N	D	N	N	\$ 68.20	\$ 68.20
93285	26	A	XXX	6	N	D	N	N	\$ 17.35	\$ 17.35
93285	TC	A	XXX	6	N	D	N	N	\$ 20.24	\$ 20.24
93285		A	XXX	6	N	D	N	N	\$ 37.84	\$ 37.84
93286	26	Not Covered	XXX	6	N	D	N	N	\$ 10.12	\$ 10.12
93286	TC	Not Covered	XXX	6	N	D	N	N	\$ 18.32	\$ 18.32
93286		Not Covered	XXX	6	N	D	N	N	\$ 28.44	\$ 28.44
93287	26	Not Covered	XXX	6	N	D	N	N	\$ 15.18	\$ 15.18
93287	TC	Not Covered	XXX	6	N	D	N	N	\$ 18.32	\$ 18.32
93287		Not Covered	XXX	6	N	D	N	N	\$ 33.74	\$ 33.74
93288	26	A	XXX	6	N	D	N	N	\$ 13.98	\$ 13.98
93288	TC	A	XXX	6	N	D	N	N	\$ 20.73	\$ 20.73
93288		A	XXX	6	N	D	N	N	\$ 34.70	\$ 34.70
93289	26	A	XXX	6	N	D	N	N	\$ 25.31	\$ 25.31
93289	TC	A	XXX	6	N	D	N	N	\$ 20.97	\$ 20.97
93289		A	XXX	6	N	D	N	N	\$ 46.27	\$ 46.27
93290	26	Not Covered	XXX	6	N	D	N	N	\$ 14.46	\$ 14.46
93290	TC	Not Covered	XXX	6	N	D	N	N	\$ 18.80	\$ 18.80
93290		Not Covered	XXX	6	N	D	N	N	\$ 33.50	\$ 33.50

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93291	26	A	XXX	6	N	D	N	N	\$ 12.29	\$ 12.29
93291	TC	A	XXX	6	N	D	N	N	\$ 18.32	\$ 18.32
93291		A	XXX	6	N	D	N	N	\$ 30.61	\$ 30.61
93292	26	A	XXX	6	N	D	N	N	\$ 14.22	\$ 14.22
93292	TC	A	XXX	6	N	D	N	N	\$ 17.11	\$ 17.11
93292		A	XXX	6	N	D	N	N	\$ 31.57	\$ 31.57
93293	26	A	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
93293	TC	A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
93293		A	XXX	N	N	D	N	N	\$ 31.81	\$ 31.81
93294		A	XXX	N	N	D	N	N	\$ 20.73	\$ 20.73
93295		A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
93296		A	XXX	N	N	D	N	N	\$ 15.42	\$ 15.42
93297		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
93298		A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
93303	26	A	XXX	6	N	D	N	N	\$ 41.93	\$ 41.93
93303	TC	A	XXX	6	N	D	N	N	\$ 103.87	\$ 103.87
93303		A	XXX	6	N	D	N	N	\$ 145.81	\$ 145.81
93304	26	A	XXX	6	N	D	N	N	\$ 24.82	\$ 24.82
93304	TC	A	XXX	6	N	D	N	N	\$ 76.88	\$ 76.88
93304		A	XXX	6	N	D	N	N	\$ 101.94	\$ 101.94
93306	26	A	XXX	6	N	D	N	N	\$ 47.48	\$ 47.48
93306	TC	A	XXX	6	N	D	N	N	\$ 81.22	\$ 81.22
93306		A	XXX	6	N	D	N	N	\$ 128.69	\$ 128.69
93307	26	A	XXX	6	N	D	N	N	\$ 30.37	\$ 30.37
93307	TC	A	XXX	6	N	D	N	N	\$ 60.25	\$ 60.25
93307		A	XXX	6	N	D	N	N	\$ 90.62	\$ 90.62
93308	26	A	XXX	6	N	D	N	N	\$ 16.87	\$ 16.87
93308	TC	A	XXX	6	N	D	N	N	\$ 46.03	\$ 46.03
93308		A	XXX	6	N	D	N	N	\$ 63.14	\$ 63.14
93312	26	A	XXX	6	N	D	N	N	\$ 73.26	\$ 73.26
93312	TC	A	XXX	6	N	D	N	N	\$ 84.83	\$ 84.83
93312		A	XXX	6	N	D	N	N	\$ 158.34	\$ 158.34
93313		A	XXX	N	N	D	N	N	\$ 7.71	\$ 7.71
93314	26	A	XXX	6	N	D	N	N	\$ 61.70	\$ 61.70
93314	TC	A	XXX	6	N	D	N	N	\$ 90.13	\$ 90.13
93314		A	XXX	6	N	D	N	N	\$ 152.31	\$ 152.31
93315	26	A	XXX	N	N	D	N	N	\$ 78.08	\$ 78.08
93315	TC	A	XXX	N	N	D	N	N	\$ 286.24	\$ 286.24
93315		A	XXX	N	N	D	N	N	\$ 364.45	\$ 364.45
93316		A	XXX	N	N	D	N	N	\$ 18.80	\$ 18.80
93317	26	A	XXX	N	N	D	N	N	\$ 61.21	\$ 61.21
93317	TC	C	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93317		C	XXX	N	N	D	N	N	\$ -	\$ -
93318	26	Not Covered	XXX	6	N	D	N	N	\$ 63.14	\$ 63.14
93318	TC	Not Covered	XXX	6	N	D	N	N	\$ 286.24	\$ 286.24
93318		Not Covered	XXX	6	N	D	N	N	\$ 349.53	\$ 349.53
93320	26	A	ZZZ	N	N	D	N	N	\$ 12.05	\$ 12.05
93320	TC	A	ZZZ	N	N	D	N	N	\$ 21.45	\$ 21.45
93320		A	ZZZ	N	N	D	N	N	\$ 33.74	\$ 33.74
93321	26	A	ZZZ	N	N	D	N	N	\$ 4.82	\$ 4.82
93321	TC	A	ZZZ	N	N	D	N	N	\$ 11.81	\$ 11.81
93321		A	ZZZ	N	N	D	N	N	\$ 16.63	\$ 16.63
93325	26	A	ZZZ	N	N	D	N	N	\$ 2.17	\$ 2.17
93325	TC	A	ZZZ	N	N	D	N	N	\$ 13.26	\$ 13.26
93325		A	ZZZ	N	N	D	N	N	\$ 15.42	\$ 15.42
93350	26	A	XXX	6	N	D	N	N	\$ 47.48	\$ 47.48
93350	TC	A	XXX	6	N	D	N	N	\$ 74.71	\$ 74.71
93350		A	XXX	6	N	D	N	N	\$ 122.19	\$ 122.19
93351	26	A	XXX	6	N	N	N	N	\$ 56.39	\$ 56.39
93351	TC	A	XXX	6	N	N	N	N	\$ 94.47	\$ 94.47
93351		A	XXX	6	N	N	N	N	\$ 150.87	\$ 150.87
93352		A	ZZZ	N	N	D	N	N	\$ 20.97	\$ 20.97
93355		A	XXX	N	N	D	N	N	\$ 155.20	\$ 155.20
93356		Not Covered	ZZZ	N	N	D	N	N	\$ 8.19	\$ 25.31
93451	26	A	000	Y	N	D	N	N	\$ 90.86	\$ 90.86
93451	TC	A	000	N	N	D	N	N	\$ 475.25	\$ 475.25
93451		A	000	Y	N	D	N	N	\$ 566.11	\$ 566.11
93452	26	A	000	Y	N	D	N	N	\$ 164.36	\$ 164.36
93452	TC	A	000	N	N	D	N	N	\$ 440.07	\$ 440.07
93452		A	000	Y	N	D	N	N	\$ 604.19	\$ 604.19
93453	26	A	000	Y	N	D	N	N	\$ 220.27	\$ 220.27
93453	TC	A	000	N	N	D	N	N	\$ 552.37	\$ 552.37
93453		A	000	Y	N	D	N	N	\$ 772.65	\$ 772.65
93454	26	A	000	Y	N	D	N	N	\$ 166.53	\$ 166.53
93454	TC	A	000	N	N	D	N	N	\$ 439.10	\$ 439.10
93454		A	000	Y	N	D	N	N	\$ 605.63	\$ 605.63
93455	26	A	000	Y	N	D	N	N	\$ 194.25	\$ 194.25
93455	TC	A	000	N	N	D	N	N	\$ 487.06	\$ 487.06
93455		A	000	Y	N	D	N	N	\$ 681.07	\$ 681.07
93456	26	A	000	Y	N	D	N	N	\$ 216.90	\$ 216.90
93456	TC	A	000	N	N	D	N	N	\$ 543.46	\$ 543.46
93456		A	000	Y	N	D	N	N	\$ 760.11	\$ 760.11
93457	26	A	000	Y	N	D	N	N	\$ 244.13	\$ 244.13
93457	TC	A	000	N	N	D	N	N	\$ 590.69	\$ 590.69

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93457		A	000	Y	N	D	N	N	\$ 834.82	\$ 834.82
93458	26	A	000	Y	N	D	N	N	\$ 204.85	\$ 204.85
93458	TC	A	000	N	N	D	N	N	\$ 496.46	\$ 496.46
93458		A	000	Y	N	D	N	N	\$ 701.31	\$ 701.31
93459	26	A	000	Y	N	D	N	N	\$ 233.05	\$ 233.05
93459	TC	A	000	N	N	D	N	N	\$ 527.31	\$ 527.31
93459		A	000	Y	N	D	N	N	\$ 760.36	\$ 760.36
93460	26	A	000	Y	N	D	N	N	\$ 261.00	\$ 261.00
93460	TC	A	000	N	N	D	N	N	\$ 582.98	\$ 582.98
93460		A	000	Y	N	D	N	N	\$ 843.98	\$ 843.98
93461	26	A	000	Y	N	D	N	N	\$ 287.75	\$ 287.75
93461	TC	A	000	N	N	D	N	N	\$ 647.33	\$ 647.33
93461		A	000	Y	N	D	N	N	\$ 935.32	\$ 935.32
93462		A	ZZZ	N	N	D	N	N	\$ 146.53	\$ 146.53
93463		A	ZZZ	N	N	D	N	N	\$ 67.00	\$ 67.00
93464	26	A	ZZZ	N	N	D	N	N	\$ 59.77	\$ 59.77
93464	TC	A	ZZZ	N	N	D	N	N	\$ 91.58	\$ 91.58
93464		A	ZZZ	N	N	D	N	N	\$ 151.35	\$ 151.35
93503		A	000	N	N	D	N	N	\$ 60.97	\$ 60.97
93505	26	A	000	Y	N	D	N	N	\$ 154.96	\$ 154.96
93505	TC	A	000	N	N	D	N	N	\$ 293.30	\$ 293.30
93505		A	000	Y	N	D	N	N	\$ 448.26	\$ 448.26
93530	26	A	000	Y	N	D	N	N	\$ 138.58	\$ 138.58
93530	TC	C	000	N	N	D	N	N	\$ -	\$ -
93530		C	000	Y	N	D	N	N	\$ -	\$ -
93531	26	A	000	Y	N	D	N	N	\$ 289.44	\$ 289.44
93531	TC	C	000	N	N	D	N	N	\$ -	\$ -
93531		C	000	Y	N	D	N	N	\$ -	\$ -
93532	26	A	000	Y	N	D	N	N	\$ 367.28	\$ 367.28
93532	TC	C	000	N	N	D	N	N	\$ -	\$ -
93532		C	000	Y	N	D	N	N	\$ -	\$ -
93533	26	A	000	Y	N	D	N	N	\$ 245.58	\$ 245.58
93533	TC	C	000	N	N	D	N	N	\$ -	\$ -
93533		C	000	Y	N	D	N	N	\$ -	\$ -
93561	26	A	ZZZ	N	N	D	N	N	\$ 30.85	\$ 30.85
93561	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93561		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93562	26	A	ZZZ	N	N	D	N	N	\$ 25.31	\$ 25.31
93562	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93562		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93563		A	ZZZ	N	N	D	N	N	\$ 39.52	\$ 39.52
93564		A	ZZZ	N	N	D	N	N	\$ 42.42	\$ 42.42

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93565		A	ZZZ	N	N	D	N	N	\$ 31.09	\$ 31.09
93566		A	ZZZ	N	N	D	N	N	\$ 31.57	\$ 90.13
93567		A	ZZZ	N	N	D	N	N	\$ 36.39	\$ 77.60
93568		A	ZZZ	N	N	D	N	N	\$ 33.26	\$ 84.83
93571	26	A	ZZZ	N	N	D	N	N	\$ 50.61	\$ 50.61
93571	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93571		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93572	26	A	ZZZ	N	N	D	N	N	\$ 36.87	\$ 36.87
93572	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93572		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93580		A	000	Y	N	D	N	N	\$ 679.62	\$ 679.62
93581		A	000	Y	N	D	N	N	\$ 928.09	\$ 928.09
93582		A	000	Y	N	D	N	N	\$ 464.89	\$ 464.89
93583		A	000	Y	N	D	N	N	\$ 519.60	\$ 519.60
93590		Not Covered	000	Y	N	Y	D	N	\$ 735.53	\$ 735.53
93591		Not Covered	000	Y	N	D	Y	D	\$ 607.08	\$ 607.08
93592		Not Covered	ZZZ	N	N	Y	D	N	\$ 267.99	\$ 267.99
93600	26	A	000	N	N	D	N	N	\$ 82.66	\$ 82.66
93600	TC	C	000	N	N	D	N	N	\$ -	\$ -
93600		C	000	N	N	D	N	N	\$ -	\$ -
93602	26	A	000	N	N	D	N	N	\$ 81.22	\$ 81.22
93602	TC	C	000	N	N	D	N	N	\$ -	\$ -
93602		C	000	N	N	D	N	N	\$ -	\$ -
93603	26	A	000	N	N	D	N	N	\$ 81.22	\$ 81.22
93603	TC	C	000	N	N	D	N	N	\$ -	\$ -
93603		C	000	N	N	D	N	N	\$ -	\$ -
93609	26	A	ZZZ	N	N	D	N	N	\$ 192.32	\$ 192.32
93609	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93609		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93610	26	A	000	N	N	D	N	N	\$ 114.23	\$ 114.23
93610	TC	C	000	N	N	D	N	N	\$ -	\$ -
93610		C	000	N	N	D	N	N	\$ -	\$ -
93612	26	A	000	N	N	D	N	N	\$ 113.27	\$ 113.27
93612	TC	C	000	N	N	D	N	N	\$ -	\$ -
93612		C	000	N	N	D	N	N	\$ -	\$ -
93613		A	ZZZ	N	N	D	N	N	\$ 206.78	\$ 206.78
93615	26	A	000	N	N	D	N	N	\$ 25.06	\$ 25.06
93615	TC	C	000	N	N	D	N	N	\$ -	\$ -
93615		C	000	N	N	D	N	N	\$ -	\$ -
93616	26	A	000	N	N	D	N	N	\$ 40.01	\$ 40.01
93616	TC	C	000	N	N	D	N	N	\$ -	\$ -
93616		C	000	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93618	26	A	000	N	N	D	N	N	\$ 152.31	\$ 152.31
93618	TC	C	000	N	N	D	N	N	\$ -	\$ -
93618		C	000	N	N	D	N	N	\$ -	\$ -
93619	26	A	000	Y	N	D	N	N	\$ 271.61	\$ 271.61
93619	TC	C	000	N	N	D	N	N	\$ -	\$ -
93619		C	000	Y	N	D	N	N	\$ -	\$ -
93620	26	A	000	Y	N	D	N	N	\$ 434.76	\$ 434.76
93620	TC	C	000	N	N	D	N	N	\$ -	\$ -
93620		C	000	Y	N	D	N	N	\$ -	\$ -
93621	26	A	ZZZ	N	N	D	N	N	\$ 81.22	\$ 81.22
93621	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93621		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93622	26	A	ZZZ	N	N	D	N	N	\$ 119.30	\$ 119.30
93622	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93622		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93623	26	A	ZZZ	N	N	D	N	N	\$ 81.94	\$ 81.94
93623	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93623		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93624	26	A	000	Y	N	D	N	N	\$ 167.01	\$ 167.01
93624	TC	C	000	N	N	D	N	N	\$ -	\$ -
93624		C	000	Y	N	D	N	N	\$ -	\$ -
93631	26	A	000	N	N	D	N	N	\$ 276.19	\$ 276.19
93631	TC	C	000	N	N	D	N	N	\$ -	\$ -
93631		C	000	N	N	D	N	N	\$ -	\$ -
93640	26	A	000	Y	N	D	N	N	\$ 124.36	\$ 124.36
93640	TC	C	000	N	N	D	N	N	\$ -	\$ -
93640		C	000	Y	N	D	N	N	\$ -	\$ -
93641	26	A	000	Y	N	D	N	N	\$ 216.18	\$ 216.18
93641	TC	C	000	N	N	D	N	N	\$ -	\$ -
93641		C	000	Y	N	D	N	N	\$ -	\$ -
93642	26	A	000	Y	N	D	N	N	\$ 176.41	\$ 176.41
93642	TC	A	000	N	N	D	N	N	\$ 50.61	\$ 50.61
93642		A	000	Y	N	D	N	N	\$ 226.78	\$ 226.78
93644	26	Not Covered	000	Y	N	D	N	N	\$ 97.85	\$ 97.85
93644	TC	Not Covered	000	N	N	D	N	N	\$ 32.29	\$ 32.29
93644		Not Covered	000	Y	N	D	N	N	\$ 130.14	\$ 130.14
93650		A	000	Y	N	D	N	N	\$ 410.91	\$ 410.91
93653		A	000	Y	N	D	N	N	\$ 582.74	\$ 582.74
93654		A	000	Y	N	D	N	N	\$ 780.12	\$ 780.12
93655		A	ZZZ	N	N	D	N	N	\$ 296.67	\$ 296.67
93656		A	000	Y	N	D	N	N	\$ 782.53	\$ 782.53
93657		A	ZZZ	N	N	D	N	N	\$ 296.43	\$ 296.43

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93660	26	A	000	Y	N	D	N	N	\$ 61.94	\$ 61.94
93660	TC	A	000	N	N	D	N	N	\$ 40.25	\$ 40.25
93660		A	000	Y	N	D	N	N	\$ 102.18	\$ 102.18
93662	26	A	ZZZ	N	N	D	N	N	\$ 73.51	\$ 73.51
93662	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
93662		C	ZZZ	N	N	D	N	N	\$ -	\$ -
93668		Not Covered	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
93701		A	XXX	6	N	D	N	N	\$ 16.87	\$ 16.87
93702		Not Covered	XXX	6	N	D	N	N	\$ 88.93	\$ 88.93
93724	26	A	000	6	N	D	N	N	\$ 162.43	\$ 162.43
93724	TC	A	000	6	N	D	N	N	\$ 26.27	\$ 26.27
93724		A	000	6	N	D	N	N	\$ 188.70	\$ 188.70
93740		B	XXX	N	N	N	N	N	\$ 5.30	\$ 5.30
93745	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
93745	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
93745		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
93750		Not Covered	XXX	N	N	D	N	N	\$ 26.99	\$ 33.26
93770		B	XXX	N	N	N	N	N	\$ 5.30	\$ 5.30
93784		A	XXX	6	N	D	N	N	\$ 29.64	\$ 29.64
93786		Not Covered	XXX	6	N	D	N	N	\$ 13.98	\$ 13.98
93788		Not Covered	XXX	6	N	D	N	N	\$ 3.13	\$ 3.13
93790		Not Covered	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
93792		Not Covered	XXX	N	N	D	N	N	\$ 40.49	\$ 40.49
93793		Not Covered	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
93797		A	000	N	N	D	N	N	\$ 6.27	\$ 10.85
93798		A	000	N	N	D	N	N	\$ 9.40	\$ 16.63
93799	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
93799	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
93799		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
93880	26	A	XXX	6	B	D	N	N	\$ 26.27	\$ 26.27
93880	TC	A	XXX	6	B	D	N	N	\$ 97.85	\$ 97.85
93880		A	XXX	6	B	D	N	N	\$ 124.36	\$ 124.36
93882	26	A	XXX	6	N	D	N	N	\$ 16.87	\$ 16.87
93882	TC	A	XXX	6	N	D	N	N	\$ 64.11	\$ 64.11
93882		A	XXX	6	N	D	N	N	\$ 81.22	\$ 81.22
93886	26	A	XXX	6	N	D	N	N	\$ 31.33	\$ 31.33
93886	TC	A	XXX	6	N	D	N	N	\$ 140.50	\$ 140.50
93886		A	XXX	6	N	D	N	N	\$ 171.83	\$ 171.83
93888	26	A	XXX	6	N	D	N	N	\$ 15.67	\$ 15.67
93888	TC	A	XXX	6	N	D	N	N	\$ 64.88	\$ 64.88
93888		A	XXX	6	N	D	N	N	\$ 80.54	\$ 80.54
93890	26	A	XXX	6	N	D	N	N	\$ 30.61	\$ 30.61

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93890	TC	A	XXX	6	N	D	N	N	\$ 136.59	\$ 136.59
93890		A	XXX	6	N	D	N	N	\$ 167.23	\$ 167.23
93892	26	A	XXX	6	N	D	N	N	\$ 36.15	\$ 36.15
93892	TC	A	XXX	6	N	D	N	N	\$ 64.61	\$ 64.61
93892		A	XXX	6	N	D	N	N	\$ 100.63	\$ 100.63
93893	26	A	XXX	6	N	D	N	N	\$ 36.87	\$ 36.87
93893	TC	A	XXX	6	N	D	N	N	\$ 64.61	\$ 64.61
93893		A	XXX	6	N	D	N	N	\$ 101.47	\$ 101.47
93895	26	Not Covered	XXX	6	N	D	N	N	\$ -	\$ -
93895	TC	Not Covered	XXX	6	N	D	N	N	\$ -	\$ -
93895		Not Covered	XXX	6	N	D	N	N	\$ -	\$ -
93922	26	A	XXX	6	B	D	N	N	\$ 8.92	\$ 8.92
93922	TC	A	XXX	6	B	D	N	N	\$ 44.10	\$ 44.10
93922		A	XXX	6	B	D	N	N	\$ 53.02	\$ 53.02
93923	26	A	XXX	6	B	D	N	N	\$ 14.94	\$ 14.94
93923	TC	A	XXX	6	B	D	N	N	\$ 67.00	\$ 67.00
93923		A	XXX	6	B	D	N	N	\$ 81.94	\$ 81.94
93924	26	A	XXX	6	B	D	N	N	\$ 16.63	\$ 16.63
93924	TC	A	XXX	6	B	D	N	N	\$ 84.83	\$ 84.83
93924		A	XXX	6	B	D	N	N	\$ 101.46	\$ 101.46
93925	26	A	XXX	6	B	D	N	N	\$ 25.79	\$ 25.79
93925	TC	A	XXX	6	B	D	N	N	\$ 131.59	\$ 131.59
93925		A	XXX	6	B	D	N	N	\$ 157.61	\$ 157.61
93926	26	A	XXX	6	N	D	N	N	\$ 14.70	\$ 14.70
93926	TC	A	XXX	6	N	D	N	N	\$ 64.68	\$ 64.68
93926		A	XXX	6	N	D	N	N	\$ 79.28	\$ 79.28
93930	26	A	XXX	6	B	D	N	N	\$ 26.99	\$ 26.99
93930	TC	A	XXX	6	B	D	N	N	\$ 101.94	\$ 101.94
93930		A	XXX	6	B	D	N	N	\$ 128.94	\$ 128.94
93931	26	A	XXX	6	N	D	N	N	\$ 16.63	\$ 16.63
93931	TC	A	XXX	6	N	D	N	N	\$ 63.87	\$ 63.87
93931		A	XXX	6	N	D	N	N	\$ 80.25	\$ 80.25
93970	26	A	XXX	6	B	D	N	N	\$ 22.90	\$ 22.90
93970	TC	A	XXX	6	B	D	N	N	\$ 98.81	\$ 98.81
93970		A	XXX	6	B	D	N	N	\$ 121.46	\$ 121.46
93971	26	A	XXX	6	N	D	N	N	\$ 14.94	\$ 14.94
93971	TC	A	XXX	6	N	D	N	N	\$ 61.70	\$ 61.70
93971		A	XXX	6	N	D	N	N	\$ 76.64	\$ 76.64
93975	26	A	XXX	6	N	D	N	N	\$ 38.56	\$ 38.56
93975	TC	A	XXX	6	N	D	N	N	\$ 134.96	\$ 134.96
93975		A	XXX	6	N	D	N	N	\$ 173.52	\$ 173.52
93976	26	A	XXX	6	N	D	N	N	\$ 23.62	\$ 23.62

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
93976	TC	A	XXX	6	N	D	N	N	\$ 64.68	\$ 64.68
93976		A	XXX	6	N	D	N	N	\$ 88.15	\$ 88.15
93978	26	A	XXX	6	N	D	N	N	\$ 26.99	\$ 26.99
93978	TC	A	XXX	6	N	D	N	N	\$ 91.10	\$ 91.10
93978		A	XXX	6	N	D	N	N	\$ 118.09	\$ 118.09
93979	26	A	XXX	6	N	D	N	N	\$ 16.39	\$ 16.39
93979	TC	A	XXX	6	N	D	N	N	\$ 59.53	\$ 59.53
93979		A	XXX	6	N	D	N	N	\$ 75.92	\$ 75.92
93980	26	A	XXX	6	N	D	N	N	\$ 40.97	\$ 40.97
93980	TC	A	XXX	6	N	D	N	N	\$ 36.63	\$ 36.63
93980		A	XXX	6	N	D	N	N	\$ 77.60	\$ 77.60
93981	26	A	XXX	6	N	D	N	N	\$ 14.22	\$ 14.22
93981	TC	A	XXX	6	N	D	N	N	\$ 31.57	\$ 31.57
93981		A	XXX	6	N	D	N	N	\$ 46.03	\$ 46.03
93985	26	A	XXX	6	B	D	N	N	\$ 26.75	\$ 26.75
93985	TC	A	XXX	6	B	D	N	N	\$ 139.30	\$ 139.30
93985		A	XXX	6	B	D	N	N	\$ 166.05	\$ 166.05
93986	26	A	XXX	6	N	D	N	N	\$ 15.42	\$ 15.42
93986	TC	A	XXX	6	N	D	N	N	\$ 64.88	\$ 64.88
93986		A	XXX	6	N	D	N	N	\$ 80.27	\$ 80.27
93990	26	A	XXX	6	N	D	N	N	\$ 15.18	\$ 15.18
93990	TC	A	XXX	6	N	D	N	N	\$ 64.68	\$ 64.68
93990		A	XXX	6	N	D	N	N	\$ 79.70	\$ 79.70
93998		Unlstd/Manual	XXX	N	N	D	D	D	\$ -	\$ -
94002		Not Covered	XXX	N	N	D	N	N	\$ 63.14	\$ 63.14
94003		Not Covered	XXX	N	N	D	N	N	\$ 44.83	\$ 44.83
94004		Not Covered	XXX	N	N	D	N	N	\$ 32.78	\$ 32.78
94005		B	XXX	N	N	N	N	N	\$ 61.46	\$ 61.46
94010	26	A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
94010	TC	A	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
94010		A	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
94011		A	XXX	N	N	D	N	N	\$ 58.80	\$ 58.80
94012		A	XXX	N	N	D	N	N	\$ 95.44	\$ 95.44
94013		A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
94014		Not Covered	XXX	N	N	D	N	N	\$ 35.67	\$ 35.67
94015		Not Covered	XXX	N	N	D	N	N	\$ 18.56	\$ 18.56
94016		Not Covered	XXX	N	N	D	N	N	\$ 16.63	\$ 16.63
94060	26	A	XXX	N	N	D	N	N	\$ 6.99	\$ 6.99
94060	TC	A	XXX	N	N	D	N	N	\$ 21.69	\$ 21.69
94060		A	XXX	N	N	D	N	N	\$ 28.68	\$ 28.68
94070	26	Not Covered	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
94070	TC	Not Covered	XXX	N	N	D	N	N	\$ 20.49	\$ 20.49

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
94070		Not Covered	XXX	N	N	D	N	N	\$ 39.77	\$ 39.77
94150	26	B	XXX	N	N	N	N	N	\$ 2.65	\$ 2.65
94150	TC	B	XXX	N	N	N	N	N	\$ 12.77	\$ 12.77
94150		B	XXX	N	N	N	N	N	\$ 15.42	\$ 15.42
94200	26	A	XXX	N	N	D	N	N	\$ 2.41	\$ 2.41
94200	TC	A	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
94200		A	XXX	N	N	D	N	N	\$ 11.09	\$ 11.09
94375	26	A	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
94375	TC	A	XXX	N	N	D	N	N	\$ 14.70	\$ 14.70
94375		A	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
94450	26	Not Covered	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
94450	TC	Not Covered	XXX	N	N	D	N	N	\$ 26.03	\$ 26.03
94450		Not Covered	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
94452	26	Not Covered	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
94452	TC	Not Covered	XXX	N	N	D	N	N	\$ 22.41	\$ 22.41
94452		Not Covered	XXX	N	N	D	N	N	\$ 32.05	\$ 32.05
94453	26	Not Covered	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
94453	TC	Not Covered	XXX	N	N	D	N	N	\$ 31.33	\$ 31.33
94453		Not Covered	XXX	N	N	D	N	N	\$ 44.10	\$ 44.10
94610		Not Covered	XXX	N	N	D	N	N	\$ 37.84	\$ 37.84
94617	26	A	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
94617	TC	A	XXX	N	N	D	N	N	\$ 36.63	\$ 36.63
94617		A	XXX	N	N	D	N	N	\$ 59.53	\$ 59.53
94618	26	A	XXX	N	N	D	N	N	\$ 15.18	\$ 15.18
94618	TC	A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
94618		A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
94619	26	A	XXX	N	N	D	N	N	\$ 15.91	\$ 15.91
94619	TC	A	XXX	N	N	D	N	N	\$ 30.13	\$ 30.13
94619		A	XXX	N	N	D	N	N	\$ 46.03	\$ 46.03
94621	26	A	XXX	N	N	D	N	N	\$ 46.27	\$ 46.27
94621	TC	A	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
94621		A	XXX	N	N	D	N	N	\$ 100.50	\$ 100.50
94640		A	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
94642		C	XXX	N	N	D	N	N	\$ -	\$ -
94644		Not Covered	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
94645		Not Covered	XXX	N	N	D	N	N	\$ 9.88	\$ 9.88
94660		Not Covered	XXX	N	N	D	N	N	\$ 25.55	\$ 40.97
94662		Not Covered	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
94664		A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
94667		Not Covered	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
94668		Not Covered	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
94669		Not Covered	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
94680	26	Not Covered	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
94680	TC	Not Covered	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
94680		Not Covered	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
94681	26	Not Covered	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
94681	TC	Not Covered	XXX	N	N	D	N	N	\$ 24.82	\$ 24.82
94681		Not Covered	XXX	N	N	D	N	N	\$ 31.57	\$ 31.57
94690	26	Not Covered	XXX	N	N	D	N	N	\$ 2.65	\$ 2.65
94690	TC	Not Covered	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
94690		Not Covered	XXX	N	N	D	N	N	\$ 26.75	\$ 26.75
94726	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
94726	TC	A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
94726		A	XXX	N	N	D	N	N	\$ 34.22	\$ 34.22
94727	26	A	XXX	N	N	D	N	N	\$ 8.19	\$ 8.19
94727	TC	A	XXX	N	N	D	N	N	\$ 19.28	\$ 19.28
94727		A	XXX	N	N	D	N	N	\$ 27.47	\$ 27.47
94728	26	Not Covered	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
94728	TC	Not Covered	XXX	N	N	D	N	N	\$ 17.11	\$ 17.11
94728		Not Covered	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
94729	26	A	ZZZ	N	N	D	N	N	\$ 6.03	\$ 6.03
94729	TC	A	ZZZ	N	N	D	N	N	\$ 30.37	\$ 30.37
94729		A	ZZZ	N	N	D	N	N	\$ 36.39	\$ 36.39
94760		T	XXX	N	N	D	N	N	\$ 1.45	\$ 1.45
94761		T	XXX	N	N	D	N	N	\$ 2.41	\$ 2.41
94762		Not Covered	XXX	N	N	D	N	N	\$ 16.39	\$ 16.39
94772	26	C	XXX	N	N	D	N	N	\$ -	\$ -
94772	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
94772		C	XXX	N	N	D	N	N	\$ -	\$ -
94774		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
94775		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
94776		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
94777		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
94780		Not Covered	XXX	N	N	N	N	N	\$ 16.39	\$ 32.54
94781		Not Covered	ZZZ	N	N	N	N	N	\$ 5.54	\$ 12.53
94799	26	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
94799	TC	Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
94799		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
95004		A	XXX	N	N	D	N	N	\$ 2.65	\$ 2.65
95012		Not Covered	XXX	N	N	D	N	N	\$ 12.05	\$ 12.05
95017		A	XXX	N	N	D	N	N	\$ 2.65	\$ 5.54
95018		A	XXX	N	N	D	N	N	\$ 4.82	\$ 13.26
95024		A	XXX	N	N	D	N	N	\$ 0.72	\$ 5.30
95027		A	XXX	N	N	D	N	N	\$ 2.89	\$ 2.89

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95028		A	XXX	N	N	D	N	N	\$ 7.95	\$ 7.95
95044		A	XXX	N	N	D	N	N	\$ 3.37	\$ 3.37
95052		A	XXX	N	N	D	N	N	\$ 4.10	\$ 4.10
95056		A	XXX	N	N	D	N	N	\$ 29.16	\$ 29.16
95060		A	XXX	N	N	D	N	N	\$ 21.93	\$ 21.93
95065		A	XXX	N	N	D	N	N	\$ 16.15	\$ 16.15
95070		A	XXX	N	N	D	N	N	\$ 21.21	\$ 21.21
95076		A	XXX	N	N	D	N	N	\$ 49.89	\$ 76.64
95079		A	ZZZ	N	N	D	N	N	\$ 45.79	\$ 55.67
95115		A	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
95117		A	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
95120		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95130		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95132		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95133		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95134		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
95144		A	XXX	N	N	D	N	N	\$ 2.17	\$ 10.12
95145		A	XXX	N	N	D	N	N	\$ 2.17	\$ 20.97
95146		A	XXX	N	N	D	N	N	\$ 2.17	\$ 38.32
95147		A	XXX	N	N	D	N	N	\$ 2.17	\$ 37.84
95148		A	XXX	N	N	D	N	N	\$ 2.17	\$ 55.19
95149		A	XXX	N	N	D	N	N	\$ 2.17	\$ 73.51
95165		A	XXX	N	N	D	N	N	\$ 2.17	\$ 9.64
95170		A	XXX	N	N	D	N	N	\$ 2.17	\$ 7.23
95180		A	XXX	N	N	D	N	N	\$ 69.17	\$ 89.41
95199		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
95249		Not Covered	XXX	N	N	D	N	N	\$ 35.19	\$ 35.19
95250		Not Covered	XXX	N	N	D	N	N	\$ 93.75	\$ 93.75
95251		Not Covered	XXX	N	N	D	N	N	\$ 23.86	\$ 23.86
95700		C	XXX	N	N	D	N	N	\$ -	\$ -
95705		C	XXX	N	N	D	N	N	\$ -	\$ -
95706		C	XXX	N	N	D	N	N	\$ -	\$ -
95707		C	XXX	N	N	D	N	N	\$ -	\$ -
95708		C	XXX	N	N	D	N	N	\$ -	\$ -
95709		C	XXX	N	N	D	N	N	\$ -	\$ -
95710		C	XXX	N	N	D	N	N	\$ -	\$ -
95711		C	XXX	N	N	D	N	N	\$ -	\$ -
95712		C	XXX	N	N	D	N	N	\$ -	\$ -
95713		C	XXX	N	N	D	N	N	\$ -	\$ -
95714		C	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95715		C	XXX	N	N	D	N	N	\$ -	\$ -
95716		C	XXX	N	N	D	N	N	\$ -	\$ -
95717		A	XXX	N	N	D	N	N	\$ 68.69	\$ 69.17
95718		A	XXX	N	N	D	N	N	\$ 90.38	\$ 91.82
95719		A	XXX	N	N	D	N	N	\$ 105.56	\$ 106.76
95720		A	XXX	N	N	D	N	N	\$ 138.82	\$ 140.74
95721		A	XXX	N	N	D	N	N	\$ 139.06	\$ 141.47
95722		A	XXX	N	N	D	N	N	\$ 169.42	\$ 172.32
95723		A	XXX	N	N	D	N	N	\$ 172.32	\$ 175.69
95724		A	XXX	N	N	D	N	N	\$ 216.42	\$ 220.03
95725		A	XXX	N	N	D	N	N	\$ 196.66	\$ 200.99
95726		A	XXX	N	N	D	N	N	\$ 274.02	\$ 279.08
95782	26	A	XXX	N	N	D	N	N	\$ 84.59	\$ 84.59
95782	TC	A	XXX	N	N	D	N	N	\$ 488.03	\$ 488.03
95782		A	XXX	N	N	D	N	N	\$ 572.62	\$ 572.62
95783	26	A	XXX	N	N	D	N	N	\$ 91.82	\$ 91.82
95783	TC	A	XXX	N	N	D	N	N	\$ 515.26	\$ 515.26
95783		A	XXX	N	N	D	N	N	\$ 607.08	\$ 607.08
95800	26	Not Covered	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
95800	TC	Not Covered	XXX	N	N	D	N	N	\$ 76.16	\$ 76.16
95800		Not Covered	XXX	N	N	D	N	N	\$ 104.11	\$ 104.11
95801	26	Not Covered	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
95801	TC	Not Covered	XXX	N	N	D	N	N	\$ 29.40	\$ 29.40
95801		Not Covered	XXX	N	N	D	N	N	\$ 57.60	\$ 57.60
95803	26	Not Covered	XXX	N	N	D	N	N	\$ 30.13	\$ 30.13
95803	TC	Not Covered	XXX	N	N	D	N	N	\$ 66.52	\$ 66.52
95803		Not Covered	XXX	N	N	D	N	N	\$ 96.64	\$ 96.64
95805	26	A	XXX	N	N	D	N	N	\$ 39.28	\$ 39.28
95805	TC	A	XXX	N	N	D	N	N	\$ 220.27	\$ 220.27
95805		A	XXX	N	N	D	N	N	\$ 259.56	\$ 259.56
95806	26	A	XXX	N	N	D	N	N	\$ 30.37	\$ 30.37
95806	TC	A	XXX	N	N	D	N	N	\$ 33.98	\$ 33.98
95806		A	XXX	N	N	D	N	N	\$ 64.35	\$ 64.35
95807	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
95807	TC	A	XXX	N	N	D	N	N	\$ 205.57	\$ 205.57
95807		A	XXX	N	N	D	N	N	\$ 246.78	\$ 246.78
95808	26	A	XXX	N	N	D	N	N	\$ 58.32	\$ 58.32
95808	TC	A	XXX	N	N	D	N	N	\$ 348.73	\$ 348.73
95808		A	XXX	N	N	D	N	N	\$ 407.05	\$ 407.05
95810	26	A	XXX	N	N	D	N	N	\$ 81.22	\$ 81.22
95810	TC	A	XXX	N	N	D	N	N	\$ 301.73	\$ 301.73
95810		A	XXX	N	N	D	N	N	\$ 382.95	\$ 382.95

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95811	26	A	XXX	N	N	D	N	N	\$ 84.35	\$ 84.35
95811	TC	A	XXX	N	N	D	N	N	\$ 315.47	\$ 315.47
95811		A	XXX	N	N	D	N	N	\$ 399.58	\$ 399.58
95812	26	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
95812	TC	A	XXX	N	N	D	N	N	\$ 175.45	\$ 175.45
95812		A	XXX	N	N	D	N	N	\$ 214.01	\$ 214.01
95813	26	A	XXX	N	N	D	N	N	\$ 58.56	\$ 58.56
95813	TC	A	XXX	N	N	D	N	N	\$ 205.81	\$ 205.81
95813		A	XXX	N	N	D	N	N	\$ 264.38	\$ 264.38
95816	26	A	XXX	N	N	D	N	N	\$ 38.32	\$ 38.32
95816	TC	A	XXX	N	N	D	N	N	\$ 195.21	\$ 195.21
95816		A	XXX	N	N	D	N	N	\$ 233.53	\$ 233.53
95819	26	A	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
95819	TC	A	XXX	N	N	D	N	N	\$ 240.76	\$ 240.76
95819		A	XXX	N	N	D	N	N	\$ 279.32	\$ 279.32
95822	26	A	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
95822	TC	A	XXX	N	N	D	N	N	\$ 216.42	\$ 216.42
95822		A	XXX	N	N	D	N	N	\$ 255.22	\$ 255.22
95824	26	A	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
95824	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
95824		C	XXX	N	N	D	N	N	\$ -	\$ -
95829	26	A	XXX	N	N	D	N	N	\$ 225.34	\$ 225.34
95829	TC	A	XXX	N	N	D	N	N	\$ 965.45	\$ 965.45
95829		A	XXX	N	N	D	N	N	\$ 1,190.78	\$ 1,190.78
95830		A	XXX	N	N	D	N	N	\$ 62.66	\$ 399.58
95836		Not Covered	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
95851		A	XXX	N	N	D	N	N	\$ 5.06	\$ 14.22
95852		A	XXX	N	N	D	N	N	\$ 3.62	\$ 11.33
95857		A	XXX	N	N	D	N	N	\$ 20.00	\$ 35.91
95860	26	A	XXX	N	N	D	N	N	\$ 34.46	\$ 34.46
95860	TC	A	XXX	N	N	D	N	N	\$ 41.45	\$ 41.45
95860		A	XXX	N	N	D	N	N	\$ 75.92	\$ 75.92
95861	26	A	XXX	N	N	D	N	N	\$ 54.71	\$ 54.71
95861	TC	A	XXX	N	N	D	N	N	\$ 55.19	\$ 55.19
95861		A	XXX	N	N	D	N	N	\$ 109.90	\$ 109.90
95863	26	A	XXX	N	N	D	N	N	\$ 66.52	\$ 66.52
95863	TC	A	XXX	N	N	D	N	N	\$ 76.40	\$ 76.40
95863		A	XXX	N	N	D	N	N	\$ 142.67	\$ 142.67
95864	26	A	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
95864	TC	A	XXX	N	N	D	N	N	\$ 88.21	\$ 88.21
95864		A	XXX	N	N	D	N	N	\$ 159.54	\$ 159.54
95865	26	A	XXX	N	B	D	N	N	\$ 55.43	\$ 55.43

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95865	TC	A	XXX	N	B	D	N	N	\$ 45.07	\$ 45.07
95865		A	XXX	N	B	D	N	N	\$ 100.50	\$ 100.50
95866	26	A	XXX	N	N	D	N	N	\$ 43.86	\$ 43.86
95866	TC	A	XXX	N	N	D	N	N	\$ 43.14	\$ 43.14
95866		A	XXX	N	N	D	N	N	\$ 87.24	\$ 87.24
95867	26	A	XXX	N	N	D	N	N	\$ 28.20	\$ 28.20
95867	TC	A	XXX	N	N	D	N	N	\$ 42.90	\$ 42.90
95867		A	XXX	N	N	D	N	N	\$ 71.10	\$ 71.10
95868	26	A	XXX	N	B	D	N	N	\$ 42.18	\$ 42.18
95868	TC	A	XXX	N	B	D	N	N	\$ 51.09	\$ 51.09
95868		A	XXX	N	B	D	N	N	\$ 93.27	\$ 93.27
95869	26	A	XXX	N	N	D	N	N	\$ 13.26	\$ 13.26
95869	TC	A	XXX	N	N	D	N	N	\$ 50.13	\$ 50.13
95869		A	XXX	N	N	D	N	N	\$ 63.62	\$ 63.62
95870	26	A	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01
95870	TC	A	XXX	N	N	D	N	N	\$ 43.62	\$ 43.62
95870		A	XXX	N	N	D	N	N	\$ 57.12	\$ 57.12
95872	26	A	XXX	N	N	D	N	N	\$ 102.91	\$ 102.91
95872	TC	A	XXX	N	N	D	N	N	\$ 32.54	\$ 32.54
95872		A	XXX	N	N	D	N	N	\$ 135.44	\$ 135.44
95873	26	A	ZZZ	N	N	D	N	N	\$ 13.26	\$ 13.26
95873	TC	A	ZZZ	N	N	D	N	N	\$ 36.15	\$ 36.15
95873		A	ZZZ	N	N	D	N	N	\$ 49.41	\$ 49.41
95874	26	A	ZZZ	N	N	D	N	N	\$ 13.01	\$ 13.01
95874	TC	A	ZZZ	N	N	D	N	N	\$ 38.56	\$ 38.56
95874		A	ZZZ	N	N	D	N	N	\$ 51.57	\$ 51.57
95875	26	A	XXX	N	N	D	N	N	\$ 39.28	\$ 39.28
95875	TC	A	XXX	N	N	D	N	N	\$ 48.20	\$ 48.20
95875		A	XXX	N	N	D	N	N	\$ 87.48	\$ 87.48
95885	26	A	ZZZ	N	N	D	N	N	\$ 12.29	\$ 12.29
95885	TC	A	ZZZ	N	N	D	N	N	\$ 29.16	\$ 29.16
95885		A	ZZZ	N	N	D	N	N	\$ 41.45	\$ 41.45
95886	26	A	ZZZ	N	N	D	N	N	\$ 30.85	\$ 30.85
95886	TC	A	ZZZ	N	N	D	N	N	\$ 34.22	\$ 34.22
95886		A	ZZZ	N	N	D	N	N	\$ 65.07	\$ 65.07
95887	26	A	ZZZ	N	N	D	N	N	\$ 25.31	\$ 25.31
95887	TC	A	ZZZ	N	N	D	N	N	\$ 31.09	\$ 31.09
95887		A	ZZZ	N	N	D	N	N	\$ 56.39	\$ 56.39
95905	26	A	XXX	N	N	D	N	N	\$ 1.93	\$ 1.93
95905	TC	A	XXX	N	N	D	N	N	\$ 27.23	\$ 27.23
95905		A	XXX	N	N	D	N	N	\$ 28.92	\$ 28.92
95907	26	A	XXX	N	N	D	N	N	\$ 35.91	\$ 35.91

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95907	TC	A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
95907		A	XXX	N	N	D	N	N	\$ 61.21	\$ 61.21
95908	26	A	XXX	N	N	D	N	N	\$ 44.83	\$ 44.83
95908	TC	A	XXX	N	N	D	N	N	\$ 32.54	\$ 32.54
95908		A	XXX	N	N	D	N	N	\$ 77.36	\$ 77.36
95909	26	A	XXX	N	N	D	N	N	\$ 53.26	\$ 53.26
95909	TC	A	XXX	N	N	D	N	N	\$ 38.80	\$ 38.80
95909		A	XXX	N	N	D	N	N	\$ 92.30	\$ 92.30
95910	26	A	XXX	N	N	D	N	N	\$ 72.06	\$ 72.06
95910	TC	A	XXX	N	N	D	N	N	\$ 49.65	\$ 49.65
95910		A	XXX	N	N	D	N	N	\$ 121.71	\$ 121.71
95911	26	A	XXX	N	N	D	N	N	\$ 89.17	\$ 89.17
95911	TC	A	XXX	N	N	D	N	N	\$ 56.88	\$ 56.88
95911		A	XXX	N	N	D	N	N	\$ 146.05	\$ 146.05
95912	26	A	XXX	N	N	D	N	N	\$ 107.00	\$ 107.00
95912	TC	A	XXX	N	N	D	N	N	\$ 62.66	\$ 62.66
95912		A	XXX	N	N	D	N	N	\$ 169.66	\$ 169.66
95913	26	A	XXX	N	N	D	N	N	\$ 126.53	\$ 126.53
95913	TC	A	XXX	N	N	D	N	N	\$ 70.61	\$ 70.61
95913		A	XXX	N	N	D	N	N	\$ 197.14	\$ 197.14
95921	26	A	XXX	N	N	D	N	N	\$ 30.61	\$ 30.61
95921	TC	A	XXX	N	N	D	N	N	\$ 26.99	\$ 26.99
95921		A	XXX	N	N	D	N	N	\$ 57.36	\$ 57.36
95922	26	A	XXX	N	N	D	N	N	\$ 32.29	\$ 32.29
95922	TC	A	XXX	N	N	D	N	N	\$ 35.67	\$ 35.67
95922		A	XXX	N	N	D	N	N	\$ 67.72	\$ 67.72
95923	26	A	XXX	N	N	D	N	N	\$ 30.61	\$ 30.61
95923	TC	A	XXX	N	N	D	N	N	\$ 52.06	\$ 52.06
95923		A	XXX	N	N	D	N	N	\$ 82.66	\$ 82.66
95924	26	A	XXX	N	N	D	N	N	\$ 58.80	\$ 58.80
95924	TC	A	XXX	N	N	D	N	N	\$ 39.28	\$ 39.28
95924		A	XXX	N	N	D	N	N	\$ 98.09	\$ 98.09
95925	26	A	XXX	N	B	D	N	N	\$ 19.28	\$ 19.28
95925	TC	A	XXX	N	B	D	N	N	\$ 78.33	\$ 78.33
95925		A	XXX	N	B	D	N	N	\$ 97.85	\$ 97.85
95926	26	A	XXX	N	B	D	N	N	\$ 18.56	\$ 18.56
95926	TC	A	XXX	N	B	D	N	N	\$ 71.58	\$ 71.58
95926		A	XXX	N	B	D	N	N	\$ 90.38	\$ 90.38
95927	26	A	XXX	N	N	D	N	N	\$ 18.08	\$ 18.08
95927	TC	A	XXX	N	N	D	N	N	\$ 70.61	\$ 70.61
95927		A	XXX	N	N	D	N	N	\$ 88.69	\$ 88.69
95928	26	A	XXX	N	B	D	N	N	\$ 53.26	\$ 53.26

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95928	TC	A	XXX	N	B	D	N	N	\$ 96.16	\$ 96.16
95928		A	XXX	N	B	D	N	N	\$ 149.42	\$ 149.42
95929	26	A	XXX	N	B	D	N	N	\$ 52.78	\$ 52.78
95929	TC	A	XXX	N	B	D	N	N	\$ 100.74	\$ 100.74
95929		A	XXX	N	B	D	N	N	\$ 153.52	\$ 153.52
95930	26	A	XXX	N	B	D	N	N	\$ 12.29	\$ 12.29
95930	TC	A	XXX	N	B	D	N	N	\$ 29.64	\$ 29.64
95930		A	XXX	N	B	D	N	N	\$ 41.93	\$ 41.93
95933	26	A	XXX	N	N	D	N	N	\$ 21.45	\$ 21.45
95933	TC	A	XXX	N	N	D	N	N	\$ 33.26	\$ 33.26
95933		A	XXX	N	N	D	N	N	\$ 54.71	\$ 54.71
95937	26	A	XXX	N	N	D	N	N	\$ 23.38	\$ 23.38
95937	TC	A	XXX	N	N	D	N	N	\$ 42.66	\$ 42.66
95937		A	XXX	N	N	D	N	N	\$ 66.03	\$ 66.03
95938	26	A	XXX	N	B	D	N	N	\$ 30.85	\$ 30.85
95938	TC	A	XXX	N	B	D	N	N	\$ 191.60	\$ 191.60
95938		A	XXX	N	B	D	N	N	\$ 222.44	\$ 222.44
95939	26	A	XXX	N	B	D	N	N	\$ 80.01	\$ 80.01
95939	TC	A	XXX	N	B	D	N	N	\$ 260.04	\$ 260.04
95939		A	XXX	N	B	D	N	N	\$ 340.29	\$ 340.29
95940		A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
95941		C	XXX	N	N	N	N	N	\$ -	\$ -
95943	26	C	XXX	N	N	D	N	N	\$ -	\$ -
95943	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
95943		C	XXX	N	N	D	N	N	\$ -	\$ -
95954	26	A	XXX	N	N	D	N	N	\$ 75.67	\$ 75.67
95954	TC	A	XXX	N	N	D	N	N	\$ 173.04	\$ 173.04
95954		A	XXX	N	N	D	N	N	\$ 248.71	\$ 248.71
95955	26	A	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
95955	TC	A	XXX	N	N	D	N	N	\$ 99.29	\$ 99.29
95955		A	XXX	N	N	D	N	N	\$ 135.44	\$ 135.44
95957	26	A	XXX	N	N	D	N	N	\$ 68.69	\$ 68.69
95957	TC	A	XXX	N	N	D	N	N	\$ 92.30	\$ 92.30
95957		A	XXX	N	N	D	N	N	\$ 160.99	\$ 160.99
95958	26	A	XXX	N	N	D	N	N	\$ 152.07	\$ 152.07
95958	TC	A	XXX	N	N	D	N	N	\$ 228.23	\$ 228.23
95958		A	XXX	N	N	D	N	N	\$ 380.54	\$ 380.54
95961	26	A	XXX	N	N	D	N	N	\$ 109.17	\$ 109.17
95961	TC	A	XXX	N	N	D	N	N	\$ 94.47	\$ 94.47
95961		A	XXX	N	N	D	N	N	\$ 203.89	\$ 203.89
95962	26	A	ZZZ	N	N	D	N	N	\$ 116.40	\$ 116.40
95962	TC	A	ZZZ	N	N	D	N	N	\$ 55.91	\$ 55.91

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
95962		A	ZZZ	N	N	D	N	N	\$ 172.56	\$ 172.56
95965	26	A	XXX	N	N	D	N	N	\$ 278.84	\$ 278.84
95965	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
95965		C	XXX	N	N	D	N	N	\$ -	\$ -
95966	26	A	XXX	N	N	D	N	N	\$ 142.43	\$ 142.43
95966	TC	C	XXX	N	N	D	N	N	\$ -	\$ -
95966		C	XXX	N	N	D	N	N	\$ -	\$ -
95967	26	A	ZZZ	N	N	D	N	N	\$ 124.60	\$ 124.60
95967	TC	C	ZZZ	N	N	D	N	N	\$ -	\$ -
95967		C	ZZZ	N	N	D	N	N	\$ -	\$ -
95970		A	XXX	N	N	D	N	N	\$ 13.01	\$ 13.26
95971		A	XXX	N	N	D	N	N	\$ 26.99	\$ 32.78
95972		A	XXX	N	N	D	N	N	\$ 28.44	\$ 37.60
95976		A	XXX	N	N	D	N	N	\$ 26.75	\$ 27.23
95977		A	XXX	N	N	D	N	N	\$ 35.91	\$ 36.63
95980		Not Covered	XXX	N	N	D	N	N	\$ 31.33	\$ 31.33
95981		Not Covered	XXX	N	N	D	N	N	\$ 12.29	\$ 23.86
95982		Not Covered	XXX	N	N	D	N	N	\$ 26.03	\$ 38.80
95983		A	XXX	N	N	D	N	N	\$ 34.22	\$ 34.70
95984		A	ZZZ	N	N	D	N	N	\$ 30.13	\$ 30.37
95990		A	XXX	N	N	D	N	N	\$ 56.64	\$ 56.64
95991		A	XXX	N	N	D	N	N	\$ 27.72	\$ 73.02
95992		A	XXX	N	N	D	N	N	\$ 25.06	\$ 29.40
95999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
96000		Not Covered	XXX	N	B	D	N	N	\$ 60.25	\$ 60.25
96001		Not Covered	XXX	N	B	D	N	N	\$ 75.67	\$ 75.67
96002		Not Covered	XXX	N	B	D	N	N	\$ 15.18	\$ 15.18
96003		Not Covered	XXX	N	B	D	N	N	\$ 11.33	\$ 11.33
96004		Not Covered	XXX	N	B	D	N	N	\$ 75.19	\$ 75.19
96020	26	Not Covered	XXX	N	N	D	N	N	\$ 109.17	\$ 109.17
96020	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
96020		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
96040		B	XXX	N	N	N	N	N	\$ 28.20	\$ 28.20
96105		Not Covered	XXX	N	N	D	N	N	\$ 67.00	\$ 67.00
96110		A	XXX	N	N	N	N	N	\$ 6.03	\$ 6.03
96112		A	XXX	N	N	D	N	N	\$ 86.76	\$ 87.97
96113		A	ZZZ	N	N	D	N	N	\$ 36.63	\$ 39.04
96116		A	XXX	N	N	D	N	N	\$ 56.88	\$ 64.59
96121		Not Covered	ZZZ	N	N	D	N	N	\$ 50.61	\$ 55.43
96125		Not Covered	XXX	5	N	D	N	N	\$ 70.13	\$ 70.13
96127		A	XXX	N	N	D	N	N	\$ 2.89	\$ 2.89
96130		A	XXX	N	N	D	N	N	\$ 73.99	\$ 81.22

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
96131		A	ZZZ	N	N	D	N	N	\$ 55.91	\$ 61.70
96132		A	XXX	N	N	D	N	N	\$ 72.54	\$ 88.69
96133		A	ZZZ	N	N	D	N	N	\$ 54.47	\$ 68.69
96136		A	XXX	N	N	D	N	N	\$ 16.63	\$ 29.88
96137		A	ZZZ	N	N	D	N	N	\$ 12.77	\$ 26.51
96138		Not Covered	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
96139		Not Covered	ZZZ	N	N	D	N	N	\$ 22.17	\$ 22.17
96146		A	XXX	N	N	D	N	N	\$ 1.21	\$ 1.21
96156		A	XXX	N	N	D	N	N	\$ 59.05	\$ 65.55
96158		Not Covered	XXX	N	N	D	N	N	\$ 40.25	\$ 44.83
96159		Not Covered	ZZZ	N	N	D	N	N	\$ 13.98	\$ 15.42
96160		A	ZZZ	N	N	N	N	N	\$ 1.69	\$ 1.69
96161		A	ZZZ	N	N	N	N	N	\$ 1.69	\$ 1.69
96164		Not Covered	XXX	N	N	D	N	N	\$ 6.03	\$ 6.51
96165		Not Covered	ZZZ	N	N	D	N	N	\$ 2.65	\$ 3.13
96167		Not Covered	XXX	N	N	D	N	N	\$ 42.90	\$ 47.96
96168		Not Covered	ZZZ	N	N	D	N	N	\$ 15.18	\$ 17.11
96170		Not Covered	XXX	N	N	N	N	N	\$ 52.06	\$ 54.71
96171		Not Covered	ZZZ	N	N	N	N	N	\$ 18.56	\$ 19.52
96360		A	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
96361		A	ZZZ	N	N	D	N	N	\$ 8.68	\$ 8.68
96365		A	XXX	N	N	D	N	N	\$ 44.83	\$ 44.83
96366		A	ZZZ	N	N	D	N	N	\$ 13.98	\$ 13.98
96367		A	ZZZ	N	N	D	N	N	\$ 19.76	\$ 19.76
96368		A	ZZZ	N	N	D	N	N	\$ 13.26	\$ 13.26
96369		Not Covered	XXX	N	N	D	N	N	\$ 94.95	\$ 94.95
96370		Not Covered	ZZZ	N	N	D	N	N	\$ 9.64	\$ 9.64
96371		Not Covered	ZZZ	N	N	D	N	N	\$ 39.04	\$ 39.04
96372		A	XXX	N	N	D	N	N	\$ 9.16	\$ 9.16
96373		A	XXX	N	N	D	N	N	\$ 11.57	\$ 11.57
96374		A	XXX	N	N	D	N	N	\$ 25.55	\$ 25.55
96375		A	ZZZ	N	N	D	N	N	\$ 10.60	\$ 10.60
96376		C	ZZZ	N	N	N	N	N	\$ -	\$ -
96377		A	XXX	N	N	D	N	N	\$ 12.53	\$ 12.53
96379		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
96401		A	XXX	N	N	D	N	N	\$ 49.89	\$ 49.89
96402		A	XXX	N	N	D	N	N	\$ 20.24	\$ 20.24
96405		A	000	Y	N	N	N	N	\$ 19.52	\$ 53.98
96406		A	000	Y	N	N	N	N	\$ 30.13	\$ 83.87
96409		A	XXX	N	N	D	N	N	\$ 68.44	\$ 68.44
96411		A	ZZZ	N	N	D	N	N	\$ 37.84	\$ 37.84
96413		A	XXX	N	N	D	N	N	\$ 89.65	\$ 89.65

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
96415		A	ZZZ	N	N	D	N	N	\$ 19.28	\$ 19.28
96416		A	XXX	N	N	D	N	N	\$ 88.69	\$ 88.69
96417		A	ZZZ	N	N	D	N	N	\$ 43.62	\$ 43.62
96420		A	XXX	N	N	D	N	N	\$ 69.41	\$ 69.41
96422		A	XXX	N	N	D	N	N	\$ 108.21	\$ 108.21
96423		A	ZZZ	N	N	D	N	N	\$ 49.89	\$ 49.89
96425		A	XXX	N	N	D	N	N	\$ 116.16	\$ 116.16
96440		A	000	N	N	D	N	N	\$ 85.80	\$ 601.54
96446		A	XXX	N	N	D	N	N	\$ 17.83	\$ 130.38
96450		A	000	N	N	D	N	N	\$ 53.02	\$ 114.48
96521		A	XXX	N	N	D	N	N	\$ 92.06	\$ 92.06
96522		A	XXX	N	N	D	N	N	\$ 79.05	\$ 79.05
96523		Not Covered	XXX	N	N	D	N	N	\$ 17.35	\$ 17.35
96542		A	XXX	N	N	D	N	N	\$ 27.96	\$ 86.04
96549		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
96567		A	XXX	N	N	D	N	N	\$ 87.97	\$ 87.97
96570		A	ZZZ	N	N	N	N	N	\$ 38.32	\$ 38.32
96571		A	ZZZ	N	N	N	N	N	\$ 17.83	\$ 17.83
96573		A	000	N	N	D	N	N	\$ 144.36	\$ 144.36
96574		A	000	N	N	D	N	N	\$ 179.30	\$ 179.30
96900		A	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
96902		B	XXX	N	N	N	N	N	\$ 14.46	\$ 15.67
96904		Not Covered	XXX	N	N	D	N	N	\$ 44.10	\$ 44.10
96910		A	XXX	N	N	D	N	N	\$ 72.54	\$ 72.54
96912		A	XXX	N	N	D	N	N	\$ 62.18	\$ 62.18
96913		A	XXX	N	N	D	N	N	\$ 91.82	\$ 91.82
96920		A	000	Y	N	N	N	N	\$ 42.90	\$ 102.67
96921		A	000	Y	N	N	N	N	\$ 47.96	\$ 112.31
96922		A	000	Y	N	N	N	N	\$ 77.84	\$ 153.76
96931		A	XXX	N	N	D	N	N	\$ 109.41	\$ 109.41
96932		A	XXX	N	N	D	N	N	\$ 79.53	\$ 79.53
96933		A	XXX	N	N	D	N	N	\$ 29.88	\$ 29.88
96934		A	ZZZ	N	N	D	N	N	\$ 72.06	\$ 72.06
96935		A	ZZZ	N	N	D	N	N	\$ 43.38	\$ 43.38
96936		A	ZZZ	N	N	D	N	N	\$ 28.68	\$ 28.68
96999		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
97010		B	XXX	N	N	N	N	N	\$ 3.86	\$ 3.86
97012		A	XXX	5	N	D	N	N	\$ 9.88	\$ 9.88
97014		A	XXX	N	N	N	N	N	\$ 8.68	\$ 8.68
97016		A	XXX	5	N	D	N	N	\$ 7.95	\$ 7.95
97018		A	XXX	5	N	D	N	N	\$ 3.86	\$ 3.86
97022		A	XXX	5	N	D	N	N	\$ 11.33	\$ 11.33

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
97024		A	XXX	5	N	D	N	N	\$ 4.58	\$ 4.58
97026		A	XXX	5	N	D	N	N	\$ 4.10	\$ 4.10
97028		A	XXX	5	N	D	N	N	\$ 5.30	\$ 5.30
97032		A	XXX	5	N	D	N	N	\$ 9.88	\$ 9.88
97033		Not Covered	XXX	5	N	D	N	N	\$ 13.01	\$ 13.01
97034		A	XXX	5	N	D	N	N	\$ 9.64	\$ 9.64
97035		A	XXX	5	N	D	N	N	\$ 9.40	\$ 9.40
97036		A	XXX	5	N	D	N	N	\$ 21.93	\$ 21.93
97039		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
97110		A	XXX	5	N	D	N	N	\$ 19.52	\$ 19.52
97112		A	XXX	5	N	D	N	N	\$ 22.65	\$ 22.65
97113		A	XXX	5	N	D	N	N	\$ 24.34	\$ 24.34
97116		A	XXX	5	N	D	N	N	\$ 19.52	\$ 19.52
97124		A	XXX	5	N	D	N	N	\$ 18.80	\$ 18.80
97129		Not Covered	XXX	N	N	D	N	N	\$ 15.67	\$ 15.67
97130		Not Covered	ZZZ	N	N	D	N	N	\$ 14.94	\$ 15.18
97139		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
97140		A	XXX	5	N	D	N	N	\$ 18.08	\$ 18.08
97150		A	XXX	5	N	D	N	N	\$ 11.81	\$ 11.81
97151		A	XXX	N	N	D	N	N	\$ -	\$ -
97152		A	XXX	N	N	D	N	N	\$ -	\$ -
97153		A	XXX	N	N	D	N	N	\$ -	\$ -
97154		A	XXX	N	N	D	N	N	\$ -	\$ -
97155		A	XXX	N	N	D	N	N	\$ -	\$ -
97156		A	XXX	N	N	D	N	N	\$ -	\$ -
97157		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
97158		A	XXX	N	N	D	N	N	\$ -	\$ -
97161		A	XXX	5	N	D	N	N	\$ 66.03	\$ 66.03
97162		A	XXX	5	N	D	N	N	\$ 66.03	\$ 66.03
97163		A	XXX	5	N	D	N	N	\$ 66.03	\$ 66.03
97164		A	XXX	5	N	D	N	N	\$ 45.07	\$ 45.07
97165		A	XXX	5	N	D	N	N	\$ 64.11	\$ 64.11
97166		A	XXX	5	N	D	N	N	\$ 64.11	\$ 64.11
97167		A	XXX	5	N	D	N	N	\$ 64.11	\$ 64.11
97168		A	XXX	5	N	D	N	N	\$ 43.14	\$ 43.14
97169		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
97170		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
97171		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
97172		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
97530		A	XXX	5	N	D	N	N	\$ 24.82	\$ 24.82
97533		A	XXX	5	N	D	N	N	\$ 37.60	\$ 37.60
97535		Not Covered	XXX	5	N	D	N	N	\$ 21.69	\$ 21.69

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
97537		Not Covered	XXX	5	N	D	N	N	\$ 20.97	\$ 20.97
97542		Not Covered	XXX	5	N	D	N	N	\$ 21.21	\$ 21.21
97545		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
97546		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
97597	A		000	N	N	D	N	N	\$ 24.58	\$ 63.87
97598	A		ZZZ	N	N	D	N	N	\$ 17.11	\$ 29.88
97602	C		XXX	N	N	N	N	N	\$ -	\$ -
97605	A		XXX	N	N	D	N	N	\$ 17.11	\$ 27.47
97606	A		XXX	N	N	D	N	N	\$ 18.56	\$ 32.54
97607		Not Covered	XXX	N	N	D	N	N	\$ 16.15	\$ 210.63
97608		Not Covered	XXX	N	N	D	N	N	\$ 17.59	\$ 205.33
97610		Not Covered	XXX	N	N	D	N	N	\$ 12.29	\$ 247.99
97750	A		XXX	5	N	D	N	N	\$ 22.17	\$ 22.17
97755		Not Covered	XXX	5	N	D	N	N	\$ 25.06	\$ 25.06
97760		Not Covered	XXX	5	N	D	N	N	\$ 31.57	\$ 31.57
97761		Not Covered	XXX	5	N	D	N	N	\$ 26.99	\$ 26.99
97763		Not Covered	XXX	5	N	D	N	N	\$ 34.46	\$ 34.46
97799		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
97802	A		XXX	N	N	D	N	N	\$ 21.45	\$ 24.10
97803	A		XXX	N	N	D	N	N	\$ 18.32	\$ 20.73
97804		Not Covered	XXX	N	N	D	N	N	\$ 10.12	\$ 11.09
97810		Not Covered	XXX	N	N	N	N	N	\$ 20.73	\$ 24.34
97811		Not Covered	ZZZ	N	N	N	N	N	\$ 17.11	\$ 18.56
97813		Not Covered	XXX	N	N	N	N	N	\$ 22.17	\$ 27.72
97814		Not Covered	ZZZ	N	N	N	N	N	\$ 19.04	\$ 22.90
98925	A		000	N	N	D	N	N	\$ 16.39	\$ 20.97
98926	A		000	N	N	D	N	N	\$ 24.10	\$ 29.64
98927	A		000	N	N	D	N	N	\$ 31.81	\$ 38.80
98928	A		000	N	N	D	N	N	\$ 39.77	\$ 47.24
98929	A		000	N	N	D	N	N	\$ 48.68	\$ 57.36
98940	A		000	N	N	D	N	N	\$ 14.94	\$ 18.32
98941	A		000	N	N	D	N	N	\$ 22.65	\$ 26.51
98942	A		000	N	N	D	N	N	\$ 31.09	\$ 34.70
98943		Not Covered	XXX	N	N	N	N	N	\$ 15.91	\$ 18.32
98960		Not Covered	XXX	N	N	N	N	N	\$ 16.63	\$ 16.63
98961		Not Covered	XXX	N	N	N	N	N	\$ 8.19	\$ 8.19
98962		Not Covered	XXX	N	N	N	N	N	\$ 6.03	\$ 6.03
98966		Not Covered	XXX	N	N	D	N	N	\$ 8.68	\$ 9.16
98967		Not Covered	XXX	N	N	D	N	N	\$ 17.11	\$ 18.08
98968		Not Covered	XXX	N	N	D	N	N	\$ 25.55	\$ 26.27
98970		Not Covered	XXX	N	N	D	N	N	\$ 7.71	\$ 7.95
98971		Not Covered	XXX	N	N	D	N	N	\$ 13.74	\$ 13.98

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
98972		Not Covered	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
99000		B	XXX	N	N	N	N	N	\$ -	\$ -
99001		B	XXX	N	N	N	N	N	\$ -	\$ -
99002		B	XXX	N	N	N	N	N	\$ -	\$ -
99024		B	XXX	N	N	N	N	N	\$ -	\$ -
99026		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99050		B	XXX	N	N	N	N	N	\$ -	\$ -
99051		B	XXX	N	N	N	N	N	\$ -	\$ -
99053		B	XXX	N	N	N	N	N	\$ -	\$ -
99056		B	XXX	N	N	N	N	N	\$ -	\$ -
99058		B	XXX	N	N	N	N	N	\$ -	\$ -
99060		B	XXX	N	N	N	N	N	\$ -	\$ -
99070		B	XXX	N	N	N	N	N	\$ -	\$ -
99071		B	XXX	N	N	N	N	N	\$ -	\$ -
99072		B	XXX	N	N	N	N	N	\$ -	\$ -
99075		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99078		B	XXX	N	N	N	N	N	\$ -	\$ -
99080		B	XXX	N	N	N	N	N	\$ -	\$ -
99082		C	XXX	N	N	D	N	N	\$ -	\$ -
99091		Not Covered	XXX	N	N	D	N	N	\$ 37.84	\$ 37.84
99100		B	ZZZ	N	N	N	N	N	\$ -	\$ -
99116		B	ZZZ	N	N	N	N	N	\$ -	\$ -
99135		B	ZZZ	N	N	N	N	N	\$ -	\$ -
99140		C	ZZZ	N	N	N	N	N	\$ -	\$ -
99151		A	XXX	N	N	N	N	N	\$ 17.11	\$ 54.71
99152		A	XXX	N	N	N	N	N	\$ 8.44	\$ 32.05
99153		A	ZZZ	N	N	N	N	N	\$ 6.51	\$ 6.51
99155		A	XXX	N	N	N	N	N	\$ 58.32	\$ 58.32
99156		A	XXX	N	N	N	N	N	\$ 52.78	\$ 52.78
99157		A	ZZZ	N	N	N	N	N	\$ 42.90	\$ 42.90
99170		A	000	Y	N	N	N	N	\$ 58.80	\$ 104.11
99172		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99173		A	XXX	N	N	N	N	N	\$ 1.93	\$ 1.93
99174		Not Covered	XXX	N	N	N	N	N	\$ 3.37	\$ 3.37
99175		A	XXX	N	N	D	N	N	\$ 17.83	\$ 17.83
99177		A	XXX	N	N	N	N	N	\$ 2.65	\$ 2.65
99183		A	XXX	N	N	D	N	N	\$ 74.47	\$ 74.47
99184		Not Covered	XXX	N	N	D	N	N	\$ 149.42	\$ 149.42
99188		A	XXX	N	N	D	N	N	\$ 20.00	\$ 20.00
99190		C	XXX	N	N	N	N	N	\$ -	\$ -
99191		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
99192		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99195		A	XXX	N	N	D	N	N	\$ 64.83	\$ 64.83
99199		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
99202		A	XXX	N	N	D	N	N	\$ 33.50	\$ 47.72
99203		A	XXX	N	N	D	N	N	\$ 56.64	\$ 74.23
99204		A	XXX	N	N	D	N	N	\$ 92.30	\$ 111.58
99205		A	XXX	N	N	D	N	N	\$ 125.08	\$ 147.49
99211		A	XXX	N	N	D	N	N	\$ 6.03	\$ 14.22
99212		A	XXX	N	N	D	N	N	\$ 24.34	\$ 36.63
99213		A	XXX	N	N	D	N	N	\$ 45.55	\$ 60.01
99213	TH	A	XXX	N	N	D	N	N	\$ 60.16	\$ 79.26
99214		A	XXX	N	N	D	N	N	\$ 67.24	\$ 85.56
99215		A	XXX	N	N	D	N	N	\$ 99.05	\$ 119.78
99217		A	XXX	N	N	D	N	N	\$ 47.96	\$ 47.96
99218		A	XXX	N	N	D	N	N	\$ 66.03	\$ 66.03
99219		A	XXX	N	N	D	N	N	\$ 90.13	\$ 90.13
99220		A	XXX	N	N	D	N	N	\$ 121.95	\$ 121.95
99221		A	XXX	N	N	D	N	N	\$ 68.20	\$ 68.20
99222		A	XXX	N	N	D	N	N	\$ 91.34	\$ 91.34
99223		A	XXX	N	N	D	N	N	\$ 134.24	\$ 134.24
99224		A	XXX	N	N	D	N	N	\$ 26.03	\$ 26.03
99225		A	XXX	N	N	D	N	N	\$ 48.20	\$ 48.20
99226		A	XXX	N	N	D	N	N	\$ 69.17	\$ 69.17
99231		A	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
99232		A	XXX	N	N	D	N	N	\$ 48.20	\$ 48.20
99233		A	XXX	N	N	D	N	N	\$ 69.17	\$ 69.17
99234		A	XXX	N	N	D	N	N	\$ 88.45	\$ 88.45
99235		A	XXX	N	N	D	N	N	\$ 112.07	\$ 112.07
99236		A	XXX	N	N	D	N	N	\$ 144.12	\$ 144.12
99238		A	XXX	N	N	D	N	N	\$ 47.96	\$ 47.96
99239		A	XXX	N	N	D	N	N	\$ 70.85	\$ 70.85
99241		Not Covered	XXX	N	N	N	N	N	\$ 21.93	\$ 30.61
99242		Not Covered	XXX	N	N	N	N	N	\$ 46.03	\$ 58.08
99243		Not Covered	XXX	N	N	N	N	N	\$ 64.35	\$ 79.77
99244		Not Covered	XXX	N	N	N	N	N	\$ 103.63	\$ 120.50
99245		Not Covered	XXX	N	N	N	N	N	\$ 127.97	\$ 147.01
99251		Not Covered	XXX	N	N	N	N	N	\$ 33.26	\$ 33.26
99252		Not Covered	XXX	N	N	N	N	N	\$ 50.85	\$ 50.85
99253		Not Covered	XXX	N	N	N	N	N	\$ 77.60	\$ 77.60
99254		Not Covered	XXX	N	N	N	N	N	\$ 112.31	\$ 112.31
99255		Not Covered	XXX	N	N	N	N	N	\$ 135.44	\$ 135.44
99281		A	XXX	N	N	D	N	N	\$ 15.18	\$ 15.18

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
99282		A	XXX	N	N	D	N	N	\$ 29.64	\$ 29.64
99283		A	XXX	N	N	D	N	N	\$ 49.89	\$ 49.89
99284		A	XXX	N	N	D	N	N	\$ 84.83	\$ 84.83
99285		A	XXX	N	N	D	N	N	\$ 124.36	\$ 124.36
99288		B	XXX	N	N	N	N	N	\$ -	\$ -
99291		A	XXX	N	N	D	N	N	\$ 149.66	\$ 186.53
99292		A	ZZZ	N	N	D	N	N	\$ 75.19	\$ 82.90
99304		A	XXX	N	N	D	N	N	\$ 59.53	\$ 59.53
99305		A	XXX	N	N	D	N	N	\$ 86.04	\$ 86.04
99306		A	XXX	N	N	D	N	N	\$ 110.86	\$ 110.86
99307		A	XXX	N	N	D	N	N	\$ 29.16	\$ 29.16
99308		A	XXX	N	N	D	N	N	\$ 45.79	\$ 45.79
99309		A	XXX	N	N	D	N	N	\$ 60.01	\$ 60.01
99310		A	XXX	N	N	D	N	N	\$ 89.41	\$ 89.41
99315		A	XXX	N	N	D	N	N	\$ 48.44	\$ 48.44
99316		A	XXX	N	N	D	N	N	\$ 69.89	\$ 69.89
99318		A	XXX	N	N	D	N	N	\$ 63.38	\$ 63.38
99324		A	XXX	N	N	D	N	N	\$ 35.91	\$ 35.91
99325		A	XXX	N	N	D	N	N	\$ 53.02	\$ 53.02
99326		A	XXX	N	N	D	N	N	\$ 92.30	\$ 92.30
99327		A	XXX	N	N	D	N	N	\$ 123.39	\$ 123.39
99328		A	XXX	N	N	D	N	N	\$ 145.56	\$ 145.56
99334		A	XXX	N	N	D	N	N	\$ 39.52	\$ 39.52
99335		A	XXX	N	N	D	N	N	\$ 63.38	\$ 63.38
99336		A	XXX	N	N	D	N	N	\$ 89.89	\$ 89.89
99337		A	XXX	N	N	D	N	N	\$ 128.69	\$ 128.69
99339		B	XXX	N	N	N	N	N	\$ 51.09	\$ 51.09
99340		Not Covered	XXX	N	N	N	N	N	\$ 71.58	\$ 71.58
99341		A	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
99342		A	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
99343		A	XXX	N	N	D	N	N	\$ 85.07	\$ 85.07
99344		A	XXX	N	N	D	N	N	\$ 120.50	\$ 120.50
99345		A	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
99347		A	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
99348		A	XXX	N	N	D	N	N	\$ 55.67	\$ 55.67
99349		A	XXX	N	N	D	N	N	\$ 85.80	\$ 85.80
99350		A	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
99354		A	ZZZ	N	N	D	N	N	\$ 80.74	\$ 85.80
99355		A	ZZZ	N	N	D	N	N	\$ 59.53	\$ 64.11
99356		A	ZZZ	N	N	D	N	N	\$ 60.97	\$ 60.97
99357		A	ZZZ	N	N	D	N	N	\$ 60.97	\$ 60.97
99358		Not Covered	XXX	N	N	D	N	N	\$ 74.71	\$ 74.71

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
99359		Not Covered	ZZZ	N	N	D	N	N	\$ 35.43	\$ 35.43
99360		Not Covered	XXX	N	N	N	N	N	\$ 41.21	\$ 41.21
99366		Not Covered	XXX	N	N	N	N	N	\$ 27.96	\$ 28.68
99367		Not Covered	XXX	N	N	N	N	N	\$ 38.08	\$ 38.08
99368		Not Covered	XXX	N	N	N	N	N	\$ 24.58	\$ 24.58
99374	B		XXX	N	N	N	N	N	\$ 38.08	\$ 45.79
99375	A		XXX	N	N	N	N	N	\$ 59.53	\$ 69.17
99377	B		XXX	N	N	N	N	N	\$ 38.08	\$ 45.79
99378	A		XXX	N	N	N	N	N	\$ 59.53	\$ 69.17
99379	B		XXX	N	N	N	N	N	\$ 38.08	\$ 45.79
99380	B		XXX	N	N	N	N	N	\$ 59.53	\$ 69.17
99381	A		XXX	N	N	N	N	N	\$ 52.06	\$ 72.78
99382	A		XXX	N	N	N	N	N	\$ 55.19	\$ 76.16
99383	A		XXX	N	N	N	N	N	\$ 58.80	\$ 79.29
99384	A		XXX	N	N	N	N	N	\$ 68.69	\$ 89.17
99385	A		XXX	N	N	N	N	N	\$ 65.79	\$ 86.52
99386	A		XXX	N	N	N	N	N	\$ 80.25	\$ 100.74
99387	A		XXX	N	N	N	N	N	\$ 86.28	\$ 109.17
99391	A		XXX	N	N	N	N	N	\$ 47.00	\$ 65.31
99392	A		XXX	N	N	N	N	N	\$ 52.06	\$ 70.13
99393	A		XXX	N	N	N	N	N	\$ 52.06	\$ 69.89
99394	A		XXX	N	N	N	N	N	\$ 58.80	\$ 76.64
99395	A		XXX	N	N	N	N	N	\$ 60.25	\$ 78.33
99396	A		XXX	N	N	N	N	N	\$ 65.31	\$ 83.39
99397	A		XXX	N	N	N	N	N	\$ 68.69	\$ 89.41
99401	A		XXX	N	N	N	N	N	\$ 16.63	\$ 25.55
99402	A		XXX	N	N	N	N	N	\$ 34.22	\$ 42.90
99403		Not Covered	XXX	N	N	N	N	N	\$ 50.85	\$ 59.77
99404		Not Covered	XXX	N	N	N	N	N	\$ 67.00	\$ 75.92
99406	A		XXX	N	N	D	N	N	\$ 8.44	\$ 10.12
99407	A		XXX	N	N	D	N	N	\$ 17.35	\$ 19.28
99408		Not Covered	XXX	N	N	N	N	N	\$ 22.17	\$ 24.10
99409		Not Covered	XXX	N	N	N	N	N	\$ 44.83	\$ 46.75
99411		Not Covered	XXX	N	N	N	N	N	\$ 5.06	\$ 13.01
99412		Not Covered	XXX	N	N	N	N	N	\$ 8.68	\$ 16.39
99415		Not Covered	ZZZ	N	N	D	N	N	\$ 6.03	\$ 6.03
99416		Not Covered	ZZZ	N	N	D	N	N	\$ 3.13	\$ 3.13
99417		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99421		Not Covered	XXX	N	N	D	N	N	\$ 8.68	\$ 9.88
99422		Not Covered	XXX	N	N	D	N	N	\$ 17.59	\$ 19.76
99423		Not Covered	XXX	N	N	D	N	N	\$ 27.47	\$ 31.33
99429		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
99439		Not Covered	ZZZ	N	N	D	N	N	\$ 19.04	\$ 24.58
99441		Not Covered	XXX	N	N	D	N	N	\$ 24.34	\$ 36.63
99442		Not Covered	XXX	N	N	D	N	N	\$ 45.79	\$ 60.25
99443		Not Covered	XXX	N	N	D	N	N	\$ 67.48	\$ 85.80
99446		Not Covered	XXX	N	N	D	N	N	\$ 12.77	\$ 12.77
99447		Not Covered	XXX	N	N	D	N	N	\$ 22.90	\$ 22.90
99448		Not Covered	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
99449		Not Covered	XXX	N	N	D	N	N	\$ 49.16	\$ 49.16
99450	C		XXX	N	N	N	N	N	\$ -	\$ -
99451		Not Covered	XXX	N	N	D	N	N	\$ 24.34	\$ 24.34
99452		Not Covered	XXX	N	N	D	N	N	\$ 24.58	\$ 24.58
99453		Not Covered	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
99454		Not Covered	XXX	N	N	D	N	N	\$ 37.36	\$ 37.36
99455		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
99456		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
99457		Not Covered	XXX	N	N	D	N	N	\$ 21.21	\$ 32.54
99458		Not Covered	ZZZ	N	N	D	N	N	\$ 21.21	\$ 26.75
99460	A		XXX	N	N	D	N	N	\$ 64.35	\$ 64.35
99461	A		XXX	N	N	D	N	N	\$ 42.42	\$ 60.01
99462	A		XXX	N	N	D	N	N	\$ 27.96	\$ 27.96
99463	A		XXX	N	N	D	N	N	\$ 73.75	\$ 73.75
99464	A		XXX	N	N	D	N	N	\$ 50.13	\$ 50.13
99465	A		XXX	N	N	D	N	N	\$ 98.09	\$ 98.09
99466	A		XXX	N	N	D	N	N	\$ 159.78	\$ 159.78
99467	A		ZZZ	N	N	D	N	N	\$ 80.01	\$ 80.01
99468	A		XXX	N	N	D	N	N	\$ 615.27	\$ 615.27
99469	A		XXX	N	N	D	N	N	\$ 266.06	\$ 266.06
99471	A		XXX	N	N	D	N	N	\$ 532.37	\$ 532.37
99472	A		XXX	N	N	D	N	N	\$ 270.64	\$ 270.64
99473		Not Covered	XXX	N	N	D	N	N	\$ 6.75	\$ 6.75
99474		Not Covered	XXX	N	N	D	N	N	\$ 5.78	\$ 9.64
99475	A		XXX	N	N	D	N	N	\$ 384.40	\$ 384.40
99476	A		XXX	N	N	D	N	N	\$ 230.88	\$ 230.88
99477	A		XXX	N	N	D	N	N	\$ 233.29	\$ 233.29
99478	A		XXX	N	N	D	N	N	\$ 91.34	\$ 91.34
99479	A		XXX	N	N	D	N	N	\$ 83.15	\$ 83.15
99480	A		XXX	N	N	D	N	N	\$ 80.01	\$ 80.01
99483		Not Covered	XXX	N	N	D	N	N	\$ 133.03	\$ 182.44
99484		Not Covered	XXX	N	N	D	N	N	\$ 20.73	\$ 30.13
99485		Not Covered	XXX	N	N	N	N	N	\$ 52.06	\$ 52.06
99486		Not Covered	XXX	N	N	N	N	N	\$ 44.83	\$ 44.83
99487		Not Covered	XXX	N	N	D	N	N	\$ 34.22	\$ 58.32

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
99489		Not Covered	ZZZ	N	N	D	N	N	\$ 17.35	\$ 28.20
99490		Not Covered	XXX	N	N	D	N	N	\$ 21.21	\$ 26.75
99491		Not Covered	XXX	N	N	D	N	N	\$ 54.47	\$ 54.47
99492		Not Covered	XXX	N	N	D	N	N	\$ 63.14	\$ 99.05
99493		Not Covered	XXX	N	N	D	N	N	\$ 68.93	\$ 99.53
99494		Not Covered	ZZZ	N	N	D	N	N	\$ 27.47	\$ 38.08
99495	A		XXX	N	N	D	N	N	\$ 96.88	\$ 134.00
99496	A		XXX	N	N	D	N	N	\$ 132.07	\$ 181.71
99497		Not Covered	XXX	N	N	D	N	N	\$ 52.54	\$ 56.88
99498		Not Covered	ZZZ	N	N	D	N	N	\$ 49.41	\$ 49.65
99499		Unlstd/Manual	XXX	N	N	D	N	N	\$ -	\$ -
99500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99501		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99502		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99503		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99505		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99507		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99509		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99511		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99512		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99600		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99601		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99602		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99605		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99606		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
99607		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0001A	A		XXX	N	N	N	N	N	\$ -	\$ -
0001F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0002A	A		XXX	N	N	N	N	N	\$ -	\$ -
0005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0011A	A		XXX	N	N	N	N	N	\$ -	\$ -
0012A	A		XXX	N	N	N	N	N	\$ -	\$ -
0012F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0014F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0042T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0054T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0055T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0071T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0072T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0075T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0075T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0075T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0076T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0076T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0076T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0095T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0098T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0100T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0101T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0102T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0106T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0107T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0108T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0109T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0110T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0163T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0164T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0165T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0174T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0175T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0184T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0191T		C	XXX	N	N	D	N	N	\$ -	\$ -
0198T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0200T		Not Covered	XXX	N	Y	D	N	N	\$ -	\$ -
0201T		Not Covered	XXX	N	B	D	N	N	\$ -	\$ -
0202T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0207T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0208T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0209T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0210T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0211T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0212T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0213T		Not Covered	XXX	N	Y	D	N	N	\$ -	\$ -
0214T		Not Covered	ZZZ	N	Y	D	N	N	\$ -	\$ -
0215T		Not Covered	ZZZ	N	Y	D	N	N	\$ -	\$ -
0216T		Not Covered	XXX	N	Y	D	N	N	\$ -	\$ -
0217T		Not Covered	ZZZ	N	Y	D	N	N	\$ -	\$ -
0218T		Not Covered	ZZZ	N	Y	D	N	N	\$ -	\$ -
0219T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0220T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0221T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0222T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0232T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0234T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0235T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0236T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0237T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0238T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0253T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0263T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0264T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0265T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0266T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0267T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0268T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0269T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0270T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0271T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0272T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0273T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0274T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0275T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0278T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0290T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0308T		Not Covered	YYY	Y	Y	N	N	N	\$ -	\$ -
0312T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0313T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0314T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0315T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0316T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0317T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0329T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0330T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0331T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0332T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0333T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0335T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0338T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0339T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0342T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0345T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0347T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0348T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0349T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0350T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0351T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0352T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0353T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0354T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0355T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0356T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0358T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0362T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0373T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0376T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0378T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0379T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0394T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0395T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0397T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0398T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0402T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0403T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0404T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0408T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0409T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0410T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0411T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0412T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0413T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0414T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0415T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0416T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0417T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0418T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0419T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0420T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0421T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0422T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0423T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0424T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0425T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0426T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0427T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0428T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0429T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0430T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0431T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0432T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0433T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0434T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0435T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0436T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0437T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0439T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0440T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0441T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0442T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0443T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0444T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0445T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0446T		Not Covered	000	Y	N	N	N	N	\$ 39.28	\$ 1,140.41
0447T		Not Covered	000	Y	N	N	N	N	\$ 46.27	\$ 67.48
0448T		Not Covered	000	Y	N	N	N	N	\$ 65.55	\$ 1,149.57
0449T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0450T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0451T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0452T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0453T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0454T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0455T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0456T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0457T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0458T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0459T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0460T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0461T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0462T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0463T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0464T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0465T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0466T		Not Covered	ZZZ	N	N	N	N	N	\$ -	\$ -
0467T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0468T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0469T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0470T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0470T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0470T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0471T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0471T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0471T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0472T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0473T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0474T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0475T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0476T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0477T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0478T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0479T		Not Covered	000	Y	N	N	N	N	\$ -	\$ -
0480T		Not Covered	ZZZ	N	N	N	N	N	\$ -	\$ -
0481T		Not Covered	000	N	N	N	N	N	\$ -	\$ -
0483T		Not Covered	000	Y	N	D	Y	D	\$ -	\$ -
0484T		Not Covered	000	Y	N	D	Y	D	\$ -	\$ -
0485T	26	Not Covered	XXX	N	Y	N	N	N	\$ -	\$ -
0485T	TC	Not Covered	XXX	N	Y	N	N	N	\$ -	\$ -
0485T		Not Covered	XXX	N	Y	N	N	N	\$ -	\$ -
0486T	26	Not Covered	XXX	N	B	N	N	N	\$ -	\$ -
0486T	TC	Not Covered	XXX	N	B	N	N	N	\$ -	\$ -
0486T		Not Covered	XXX	N	B	N	N	N	\$ -	\$ -
0487T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0488T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0489T		Not Covered	000	N	N	N	N	N	\$ -	\$ -
0490T		Not Covered	000	N	N	N	N	N	\$ -	\$ -
0491T		Not Covered	000	N	N	N	N	N	\$ -	\$ -
0492T		Not Covered	ZZZ	N	N	N	N	N	\$ -	\$ -
0493T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0494T		Not Covered	XXX	Y	B	Y	D	N	\$ -	\$ -
0495T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0496T		Not Covered	ZZZ	N	N	N	N	N	\$ -	\$ -
0497T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0498T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0499T		Not Covered	000	Y	N	N	N	N	\$ -	\$ -
0500F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0500T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0501F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0501T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0502F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0502T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0503F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0503T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0504T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0505F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0505T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0506T	26	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0506T	TC	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0506T		Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0507F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0507T	26	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0507T	TC	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0507T		Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0508T	26	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0508T	TC	Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0508T		Not Covered	XXX	7	N	D	N	N	\$ -	\$ -
0509F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0509T	26	Not Covered	XXX	7	B	D	N	N	\$ 14.22	\$ 14.22
0509T	TC	Not Covered	XXX	7	B	D	N	N	\$ 33.98	\$ 33.98
0509T		Not Covered	XXX	7	B	D	N	N	\$ 48.20	\$ 48.20
0510T		Not Covered	YYY	Y	Y	N	N	N	\$ -	\$ -
0511T		Not Covered	YYY	Y	Y	N	N	N	\$ -	\$ -
0512T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0513F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0513T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0514F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0514T		Not Covered	ZZZ	N	N	N	N	N	\$ -	\$ -
0515T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0516F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0516T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0517F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0517T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0518F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0518T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0519F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0519T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0520F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0520T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0521F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0521T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0521T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0521T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0522T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0522T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0522T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0523T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0524T		Not Covered	YYY	Y	Y	N	N	N	\$ -	\$ -
0525F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0525T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0526F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0526T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0527T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0528F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0528T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0528T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0528T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0529F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0529T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0529T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0529T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0530T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0531T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0532T		Not Covered	YYY	Y	N	N	N	N	\$ -	\$ -
0533T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0533T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0533T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0534T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0534T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0534T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0535F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0535T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0535T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0535T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0536T	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0536T	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0536T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0537T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0538T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0539T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0540F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0540T		Not Covered	YYY	N	N	N	N	N	\$ -	\$ -
0541T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0542T		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0543T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0544T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0545F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0545T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0546T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0547T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0548T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0549T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0550F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0550T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0551F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0551T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0552T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0553T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0554T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0555F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0555T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0556F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0556T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0557F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0557T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0558T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0559T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0560T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0561T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0562T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0563T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0564T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0565T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0566T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0567T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0568T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0569T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0570T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0571T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0572T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0573T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0574T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0575F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0575T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0576T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0577T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0578T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0579T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0580F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0580T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0581F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0581T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0582F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0582T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0583F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0583T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0584F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
0584T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0585T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0586T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0587T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0588T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0589T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0590T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0591T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0592T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0593T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0594T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0596T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0597T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0598T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0599T		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
0600T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0601T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0602T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0603T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0604T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0605T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0606T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0607T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0608T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0609T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0610T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0611T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0612T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0613T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0614T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0615T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0616T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0617T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
0618T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0619T		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
0620T		Not Covered	YYY	Y	Y	D	N	N	\$ -	\$ -
0621T		Not Covered	YYY	Y	Y	D	N	N	\$ -	\$ -
0622T		Not Covered	YYY	Y	Y	D	N	N	\$ -	\$ -
0623T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0624T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0625T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0626T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0627T		Not Covered	YYY	Y	B	D	N	N	\$ -	\$ -
0628T		Not Covered	ZZZ	N	B	D	N	N	\$ -	\$ -
0629T		Not Covered	YYY	Y	B	D	N	N	\$ -	\$ -
0630T		Not Covered	ZZZ	N	B	D	N	N	\$ -	\$ -
0631T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0632T		Not Covered	YYY	Y	N	D	N	N	\$ -	\$ -
0633T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0633T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0633T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0634T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0634T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0634T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0635T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0635T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0635T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0636T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0636T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0636T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0637T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0637T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0637T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0638T	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0638T	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0638T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
0639T		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
1000F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1002F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1003F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1004F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1006F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1007F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1008F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
1010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1011F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1012F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1018F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1019F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1022F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1026F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1030F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1031F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1032F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1033F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1034F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1035F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1036F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1038F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1039F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1040F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1050F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1052F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1055F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1060F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1061F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1065F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1066F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1070F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1071F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1090F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1091F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1100F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1101F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1110F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1111F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1116F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1118F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1119F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1121F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1123F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1124F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1125F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1126F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1127F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
1128F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1130F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1134F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1135F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1136F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1137F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1150F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1151F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1152F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1153F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1157F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1158F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1159F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1160F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1170F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1175F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1180F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1181F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1182F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1183F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1200F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1205F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1220F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1400F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1450F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1451F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1460F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1461F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1490F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1491F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1493F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1494F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1500F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1501F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1502F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1503F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1504F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
1505F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2000F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2001F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2002F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2004F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
2010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2014F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2016F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2018F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2019F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2020F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2021F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2022F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2023F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2024F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2025F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2026F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2027F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2028F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2029F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2030F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2031F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2033F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2035F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2040F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2044F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2050F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
2060F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3006F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3008F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3011F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3014F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3016F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3017F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3018F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3019F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3020F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3021F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3022F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3023F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3025F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3027F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3028F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3035F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3037F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
3038F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3040F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3042F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3044F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3046F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3048F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3049F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3050F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3051F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3052F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3055F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3056F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3060F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3061F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3062F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3066F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3072F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3073F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3074F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3075F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3077F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3078F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3079F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3080F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3082F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3083F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3084F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3085F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3088F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3089F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3090F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3091F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3092F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3093F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3095F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3096F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3100F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3110F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3111F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3112F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3115F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3117F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
3118F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3119F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3120F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3126F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3130F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3132F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3140F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3141F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3142F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3150F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3155F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3160F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3170F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3200F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3210F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3215F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3216F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3218F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3220F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3230F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3250F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3260F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3265F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3266F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3267F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3268F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3269F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3270F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3271F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3272F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3273F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3274F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3278F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3279F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3280F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3281F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3284F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3285F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3288F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3290F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3291F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3292F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
3293F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3294F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3300F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3301F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3315F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3316F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3317F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3318F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3319F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3320F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3321F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3322F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3323F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3324F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3325F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3328F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3330F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3331F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3340F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3341F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3342F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3343F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3344F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3345F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3350F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3351F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3352F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3353F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3354F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3370F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3372F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3374F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3376F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3378F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3380F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3382F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3384F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3386F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3388F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3390F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3394F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3395F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
3450F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3451F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3452F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3455F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3470F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3471F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3472F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3475F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3476F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3490F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3491F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3492F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3493F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3494F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3495F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3496F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3497F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3498F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3500F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3502F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3503F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3510F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3511F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3512F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3513F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3514F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3515F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3517F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3520F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3550F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3551F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3552F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3555F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3570F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3572F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3573F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3650F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3700F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3720F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3725F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3750F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3751F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
3752F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3753F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3754F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3755F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3756F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3757F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3758F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3759F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3760F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3761F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3762F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3763F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3775F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
3776F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4000F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4001F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4003F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4004F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4008F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4011F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4012F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4013F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4014F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4016F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4017F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4018F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4019F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4025F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4030F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4033F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4035F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4037F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4040F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4041F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4042F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4043F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4044F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4045F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4046F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
4047F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4048F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4049F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4050F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4051F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4052F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4053F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4054F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4055F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4056F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4058F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4060F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4062F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4063F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4064F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4065F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4066F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4067F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4069F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4070F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4073F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4075F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4077F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4079F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4084F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4086F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4090F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4095F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4100F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4110F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4115F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4120F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4124F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4130F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4131F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4132F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4133F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4134F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4135F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4136F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4140F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4142F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
4144F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4145F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4148F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4149F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4150F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4151F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4153F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4155F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4157F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4158F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4159F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4163F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4164F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4165F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4167F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4168F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4169F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4171F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4172F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4174F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4175F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4176F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4177F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4178F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4179F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4180F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4181F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4182F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4185F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4186F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4187F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4188F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4189F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4190F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4191F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4192F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4193F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4194F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4195F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4196F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4200F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4201F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
4210F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4220F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4221F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4230F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4240F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4242F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4245F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4248F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4250F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4255F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4256F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4260F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4261F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4265F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4266F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4267F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4268F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4269F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4270F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4271F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4274F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4276F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4279F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4280F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4290F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4293F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4300F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4301F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4305F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4306F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4320F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4322F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4324F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4325F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4326F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4328F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4330F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4340F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4350F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4400F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4450F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4470F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
4480F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4481F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4500F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4510F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4525F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4526F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4540F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4541F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4550F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4551F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4552F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4553F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4554F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4555F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4556F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4557F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4558F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4559F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4560F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4561F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4562F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
4563F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5020F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5050F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5060F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5062F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5100F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5200F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
5250F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6015F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6020F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6030F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6040F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6045F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6070F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6080F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6090F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
6100F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6101F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6102F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6110F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
6150F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
7010F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
7020F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
7025F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9001F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9002F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9003F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9004F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9005F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9006F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
9007F		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
A0392	X		XXX	N	N	N	N	N	\$ -	\$ -
A0394	X		XXX	N	N	N	N	N	\$ -	\$ -
A0396	X		XXX	N	N	N	N	N	\$ -	\$ -
A0398	X		XXX	N	N	N	N	N	\$ -	\$ -
A0420	X		XXX	N	N	N	N	N	\$ -	\$ -
A0422	X		XXX	N	N	N	N	N	\$ -	\$ -
A0424	X		XXX	N	N	N	N	N	\$ -	\$ -
A0425	X		XXX	N	N	N	N	N	\$ -	\$ -
A0426	X		XXX	N	N	N	N	N	\$ -	\$ -
A0427	X		XXX	N	N	N	N	N	\$ -	\$ -
A0428	X		XXX	N	N	N	N	N	\$ -	\$ -
A0429	X		XXX	N	N	N	N	N	\$ -	\$ -
A0430	X		XXX	N	N	N	N	N	\$ -	\$ -
A0431	X		XXX	N	N	N	N	N	\$ -	\$ -
A0432	X		XXX	N	N	N	N	N	\$ -	\$ -
A0433	X		XXX	N	N	N	N	N	\$ -	\$ -
A0434	X		XXX	N	N	N	N	N	\$ -	\$ -
A0435	X		XXX	N	N	N	N	N	\$ -	\$ -
A0436	X		XXX	N	N	N	N	N	\$ -	\$ -
A0999	X		XXX	N	N	N	N	N	\$ -	\$ -
A4206	X		XXX	N	N	N	N	N	\$ -	\$ -
A4207	X		XXX	N	N	N	N	N	\$ -	\$ -
A4208	X		XXX	N	N	N	N	N	\$ -	\$ -
A4209	X		XXX	N	N	N	N	N	\$ -	\$ -
A4213	X		XXX	N	N	N	N	N	\$ -	\$ -
A4215	X		XXX	N	N	N	N	N	\$ -	\$ -
A4216	X		XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A4217		X	XXX	N	N	N	N	N	\$ -	\$ -
A4218		X	XXX	N	N	N	N	N	\$ -	\$ -
A4221		X	XXX	N	N	N	N	N	\$ -	\$ -
A4222		X	XXX	N	N	N	N	N	\$ -	\$ -
A4223		X	XXX	N	N	N	N	N	\$ -	\$ -
A4224		X	XXX	N	N	N	N	N	\$ -	\$ -
A4225		X	XXX	N	N	N	N	N	\$ -	\$ -
A4230		X	XXX	N	N	N	N	N	\$ -	\$ -
A4231		X	XXX	N	N	N	N	N	\$ -	\$ -
A4233		X	XXX	N	N	N	N	N	\$ -	\$ -
A4234		X	XXX	N	N	N	N	N	\$ -	\$ -
A4235		X	XXX	N	N	N	N	N	\$ -	\$ -
A4236		X	XXX	N	N	N	N	N	\$ -	\$ -
A4244		X	XXX	N	N	N	N	N	\$ -	\$ -
A4245		X	XXX	N	N	N	N	N	\$ -	\$ -
A4246		X	XXX	N	N	N	N	N	\$ -	\$ -
A4247		X	XXX	N	N	N	N	N	\$ -	\$ -
A4248		X	XXX	N	N	N	N	N	\$ -	\$ -
A4255		X	XXX	N	N	N	N	N	\$ -	\$ -
A4257		X	XXX	N	N	N	N	N	\$ -	\$ -
A4262		B	XXX	N	N	N	N	N	\$ -	\$ -
A4263		B	XXX	N	N	N	N	N	\$ -	\$ -
A4270		B	XXX	N	N	N	N	N	\$ -	\$ -
A4280		X	XXX	N	N	N	N	N	\$ -	\$ -
A4281		X	XXX	N	N	N	N	N	\$ -	\$ -
A4282		X	XXX	N	N	N	N	N	\$ -	\$ -
A4283		X	XXX	N	N	N	N	N	\$ -	\$ -
A4284		X	XXX	N	N	N	N	N	\$ -	\$ -
A4285		X	XXX	N	N	N	N	N	\$ -	\$ -
A4286		X	XXX	N	N	N	N	N	\$ -	\$ -
A4290		X	XXX	N	N	N	N	N	\$ -	\$ -
A4300		B	XXX	N	N	N	N	N	\$ -	\$ -
A4331		X	XXX	N	N	N	N	N	\$ -	\$ -
A4332		X	XXX	N	N	N	N	N	\$ -	\$ -
A4333		X	XXX	N	N	N	N	N	\$ -	\$ -
A4334		X	XXX	N	N	N	N	N	\$ -	\$ -
A4336		X	XXX	N	N	N	N	N	\$ -	\$ -
A4337		X	XXX	N	N	N	N	N	\$ -	\$ -
A4349		X	XXX	N	N	N	N	N	\$ -	\$ -
A4353		X	XXX	N	N	N	N	N	\$ -	\$ -
A4360		X	XXX	N	N	N	N	N	\$ -	\$ -
A4363		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A4366		X	XXX	N	N	N	N	N	\$ -	\$ -
A4368		X	XXX	N	N	N	N	N	\$ -	\$ -
A4369		X	XXX	N	N	N	N	N	\$ -	\$ -
A4371		X	XXX	N	N	N	N	N	\$ -	\$ -
A4372		X	XXX	N	N	N	N	N	\$ -	\$ -
A4373		X	XXX	N	N	N	N	N	\$ -	\$ -
A4375		X	XXX	N	N	N	N	N	\$ -	\$ -
A4376		X	XXX	N	N	N	N	N	\$ -	\$ -
A4377		X	XXX	N	N	N	N	N	\$ -	\$ -
A4378		X	XXX	N	N	N	N	N	\$ -	\$ -
A4379		X	XXX	N	N	N	N	N	\$ -	\$ -
A4380		X	XXX	N	N	N	N	N	\$ -	\$ -
A4381		X	XXX	N	N	N	N	N	\$ -	\$ -
A4382		X	XXX	N	N	N	N	N	\$ -	\$ -
A4383		X	XXX	N	N	N	N	N	\$ -	\$ -
A4384		X	XXX	N	N	N	N	N	\$ -	\$ -
A4385		X	XXX	N	N	N	N	N	\$ -	\$ -
A4387		X	XXX	N	N	N	N	N	\$ -	\$ -
A4388		X	XXX	N	N	N	N	N	\$ -	\$ -
A4389		X	XXX	N	N	N	N	N	\$ -	\$ -
A4390		X	XXX	N	N	N	N	N	\$ -	\$ -
A4391		X	XXX	N	N	N	N	N	\$ -	\$ -
A4392		X	XXX	N	N	N	N	N	\$ -	\$ -
A4393		X	XXX	N	N	N	N	N	\$ -	\$ -
A4394		X	XXX	N	N	N	N	N	\$ -	\$ -
A4395		X	XXX	N	N	N	N	N	\$ -	\$ -
A4396		X	XXX	N	N	N	N	N	\$ -	\$ -
A4405		X	XXX	N	N	N	N	N	\$ -	\$ -
A4406		X	XXX	N	N	N	N	N	\$ -	\$ -
A4407		X	XXX	N	N	N	N	N	\$ -	\$ -
A4408		X	XXX	N	N	N	N	N	\$ -	\$ -
A4409		X	XXX	N	N	N	N	N	\$ -	\$ -
A4410		X	XXX	N	N	N	N	N	\$ -	\$ -
A4411		X	XXX	N	N	N	N	N	\$ -	\$ -
A4412		X	XXX	N	N	N	N	N	\$ -	\$ -
A4413		X	XXX	N	N	N	N	N	\$ -	\$ -
A4414		X	XXX	N	N	N	N	N	\$ -	\$ -
A4415		X	XXX	N	N	N	N	N	\$ -	\$ -
A4416		X	XXX	N	N	N	N	N	\$ -	\$ -
A4417		X	XXX	N	N	N	N	N	\$ -	\$ -
A4418		X	XXX	N	N	N	N	N	\$ -	\$ -
A4419		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlst/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A4420		X	XXX	N	N	N	N	N	\$ -	\$ -
A4421		X	XXX	N	N	N	N	N	\$ -	\$ -
A4422		X	XXX	N	N	N	N	N	\$ -	\$ -
A4423		X	XXX	N	N	N	N	N	\$ -	\$ -
A4424		X	XXX	N	N	N	N	N	\$ -	\$ -
A4425		X	XXX	N	N	N	N	N	\$ -	\$ -
A4426		X	XXX	N	N	N	N	N	\$ -	\$ -
A4427		X	XXX	N	N	N	N	N	\$ -	\$ -
A4428		X	XXX	N	N	N	N	N	\$ -	\$ -
A4429		X	XXX	N	N	N	N	N	\$ -	\$ -
A4430		X	XXX	N	N	N	N	N	\$ -	\$ -
A4431		X	XXX	N	N	N	N	N	\$ -	\$ -
A4432		X	XXX	N	N	N	N	N	\$ -	\$ -
A4433		X	XXX	N	N	N	N	N	\$ -	\$ -
A4434		X	XXX	N	N	N	N	N	\$ -	\$ -
A4435		X	XXX	N	N	N	N	N	\$ -	\$ -
A4450		X	XXX	N	N	N	N	N	\$ -	\$ -
A4452		X	XXX	N	N	N	N	N	\$ -	\$ -
A4456		X	XXX	N	N	N	N	N	\$ -	\$ -
A4458		X	XXX	N	N	N	N	N	\$ -	\$ -
A4459		X	XXX	N	N	N	N	N	\$ -	\$ -
A4461		X	XXX	N	N	N	N	N	\$ -	\$ -
A4463		X	XXX	N	N	N	N	N	\$ -	\$ -
A4481		X	XXX	N	N	N	N	N	\$ -	\$ -
A4483		X	XXX	N	N	N	N	N	\$ -	\$ -
A4559		X	XXX	N	N	N	N	N	\$ -	\$ -
A4561		X	XXX	N	N	N	N	N	\$ -	\$ -
A4562		X	XXX	N	N	N	N	N	\$ -	\$ -
A4563		X	XXX	N	N	N	N	N	\$ -	\$ -
A4565		X	XXX	N	N	N	N	N	\$ -	\$ -
A4575		X	XXX	N	N	N	N	N	\$ -	\$ -
A4595		X	XXX	N	N	N	N	N	\$ -	\$ -
A4600		X	XXX	N	N	N	N	N	\$ -	\$ -
A4601		X	XXX	N	N	N	N	N	\$ -	\$ -
A4602		X	XXX	N	N	N	N	N	\$ -	\$ -
A4604		X	XXX	N	N	N	N	N	\$ -	\$ -
A4605		X	XXX	N	N	N	N	N	\$ -	\$ -
A4606		X	XXX	N	N	N	N	N	\$ -	\$ -
A4608		X	XXX	N	N	N	N	N	\$ -	\$ -
A4611		X	XXX	N	N	N	N	N	\$ -	\$ -
A4612		X	XXX	N	N	N	N	N	\$ -	\$ -
A4613		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							24.10	Statewide
		Status	Days	Proc	Surg	Surg	Surg	Surg	31.83	OB/GYN
		Code							Facility	Non-Facility
A4614		X	XXX	N	N	N	N	N	\$ -	\$ -
A4615		X	XXX	N	N	N	N	N	\$ -	\$ -
A4616		X	XXX	N	N	N	N	N	\$ -	\$ -
A4617		X	XXX	N	N	N	N	N	\$ -	\$ -
A4618		X	XXX	N	N	N	N	N	\$ -	\$ -
A4619		X	XXX	N	N	N	N	N	\$ -	\$ -
A4620		X	XXX	N	N	N	N	N	\$ -	\$ -
A4623		X	XXX	N	N	N	N	N	\$ -	\$ -
A4624		X	XXX	N	N	N	N	N	\$ -	\$ -
A4625		X	XXX	N	N	N	N	N	\$ -	\$ -
A4626		X	XXX	N	N	N	N	N	\$ -	\$ -
A4628		X	XXX	N	N	N	N	N	\$ -	\$ -
A4629		X	XXX	N	N	N	N	N	\$ -	\$ -
A4630		X	XXX	N	N	N	N	N	\$ -	\$ -
A4633		X	XXX	N	N	N	N	N	\$ -	\$ -
A4634		X	XXX	N	N	N	N	N	\$ -	\$ -
A4635		X	XXX	N	N	N	N	N	\$ -	\$ -
A4636		X	XXX	N	N	N	N	N	\$ -	\$ -
A4637		X	XXX	N	N	N	N	N	\$ -	\$ -
A4638		X	XXX	N	N	N	N	N	\$ -	\$ -
A4639		X	XXX	N	N	N	N	N	\$ -	\$ -
A4640		X	XXX	N	N	N	N	N	\$ -	\$ -
A4648		X	XXX	N	N	N	N	N	\$ -	\$ -
A4650		X	XXX	N	N	N	N	N	\$ -	\$ -
A4651		X	XXX	N	N	N	N	N	\$ -	\$ -
A4652		X	XXX	N	N	N	N	N	\$ -	\$ -
A4653		X	XXX	N	N	N	N	N	\$ -	\$ -
A4657		X	XXX	N	N	N	N	N	\$ -	\$ -
A4660		X	XXX	N	N	N	N	N	\$ -	\$ -
A4663		X	XXX	N	N	N	N	N	\$ -	\$ -
A4671		X	XXX	N	N	N	N	N	\$ -	\$ -
A4672		X	XXX	N	N	N	N	N	\$ -	\$ -
A4673		X	XXX	N	N	N	N	N	\$ -	\$ -
A4674		X	XXX	N	N	N	N	N	\$ -	\$ -
A4680		X	XXX	N	N	N	N	N	\$ -	\$ -
A4690		X	XXX	N	N	N	N	N	\$ -	\$ -
A4706		X	XXX	N	N	N	N	N	\$ -	\$ -
A4707		X	XXX	N	N	N	N	N	\$ -	\$ -
A4708		X	XXX	N	N	N	N	N	\$ -	\$ -
A4709		X	XXX	N	N	N	N	N	\$ -	\$ -
A4714		X	XXX	N	N	N	N	N	\$ -	\$ -
A4719		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A4720		X	XXX	N	N	N	N	N	\$ -	\$ -
A4721		X	XXX	N	N	N	N	N	\$ -	\$ -
A4722		X	XXX	N	N	N	N	N	\$ -	\$ -
A4723		X	XXX	N	N	N	N	N	\$ -	\$ -
A4724		X	XXX	N	N	N	N	N	\$ -	\$ -
A4725		X	XXX	N	N	N	N	N	\$ -	\$ -
A4726		X	XXX	N	N	N	N	N	\$ -	\$ -
A4728		X	XXX	N	N	N	N	N	\$ -	\$ -
A4730		X	XXX	N	N	N	N	N	\$ -	\$ -
A4736		X	XXX	N	N	N	N	N	\$ -	\$ -
A4737		X	XXX	N	N	N	N	N	\$ -	\$ -
A4740		X	XXX	N	N	N	N	N	\$ -	\$ -
A4750		X	XXX	N	N	N	N	N	\$ -	\$ -
A4755		X	XXX	N	N	N	N	N	\$ -	\$ -
A4760		X	XXX	N	N	N	N	N	\$ -	\$ -
A4765		X	XXX	N	N	N	N	N	\$ -	\$ -
A4766		X	XXX	N	N	N	N	N	\$ -	\$ -
A4770		X	XXX	N	N	N	N	N	\$ -	\$ -
A4771		X	XXX	N	N	N	N	N	\$ -	\$ -
A4772		X	XXX	N	N	N	N	N	\$ -	\$ -
A4773		X	XXX	N	N	N	N	N	\$ -	\$ -
A4774		X	XXX	N	N	N	N	N	\$ -	\$ -
A4802		X	XXX	N	N	N	N	N	\$ -	\$ -
A4860		X	XXX	N	N	N	N	N	\$ -	\$ -
A4870		X	XXX	N	N	N	N	N	\$ -	\$ -
A4911		X	XXX	N	N	N	N	N	\$ -	\$ -
A4913		X	XXX	N	N	N	N	N	\$ -	\$ -
A4918		X	XXX	N	N	N	N	N	\$ -	\$ -
A4927		X	XXX	N	N	N	N	N	\$ -	\$ -
A4928		X	XXX	N	N	N	N	N	\$ -	\$ -
A4929		X	XXX	N	N	N	N	N	\$ -	\$ -
A4930		X	XXX	N	N	N	N	N	\$ -	\$ -
A4931		X	XXX	N	N	N	N	N	\$ -	\$ -
A4932		X	XXX	N	N	N	N	N	\$ -	\$ -
A5056		X	XXX	N	N	N	N	N	\$ -	\$ -
A5057		X	XXX	N	N	N	N	N	\$ -	\$ -
A5083		X	XXX	N	N	N	N	N	\$ -	\$ -
A5120		X	XXX	N	N	N	N	N	\$ -	\$ -
A5200		X	XXX	N	N	N	N	N	\$ -	\$ -
A5500		X	XXX	N	N	N	N	N	\$ -	\$ -
A5501		X	XXX	N	N	N	N	N	\$ -	\$ -
A5503		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A5504		X	XXX	N	N	N	N	N	\$ -	\$ -
A5505		X	XXX	N	N	N	N	N	\$ -	\$ -
A5506		X	XXX	N	N	N	N	N	\$ -	\$ -
A5507		X	XXX	N	N	N	N	N	\$ -	\$ -
A5508		X	XXX	N	N	N	N	N	\$ -	\$ -
A5510		X	XXX	N	N	N	N	N	\$ -	\$ -
A5512		X	XXX	N	N	N	N	N	\$ -	\$ -
A5513		X	XXX	N	N	N	N	N	\$ -	\$ -
A5514		X	XXX	N	N	N	N	N	\$ -	\$ -
A6010		X	XXX	N	N	N	N	N	\$ -	\$ -
A6011		X	XXX	N	N	N	N	N	\$ -	\$ -
A6021		X	XXX	N	N	N	N	N	\$ -	\$ -
A6022		X	XXX	N	N	N	N	N	\$ -	\$ -
A6023		X	XXX	N	N	N	N	N	\$ -	\$ -
A6024		X	XXX	N	N	N	N	N	\$ -	\$ -
A6025		X	XXX	N	N	N	N	N	\$ -	\$ -
A6231		X	XXX	N	N	N	N	N	\$ -	\$ -
A6232		X	XXX	N	N	N	N	N	\$ -	\$ -
A6233		X	XXX	N	N	N	N	N	\$ -	\$ -
A6407		X	XXX	N	N	N	N	N	\$ -	\$ -
A6410		X	XXX	N	N	N	N	N	\$ -	\$ -
A6411		X	XXX	N	N	N	N	N	\$ -	\$ -
A6412		X	XXX	N	N	N	N	N	\$ -	\$ -
A6441		X	XXX	N	N	N	N	N	\$ -	\$ -
A6442		X	XXX	N	N	N	N	N	\$ -	\$ -
A6443		X	XXX	N	N	N	N	N	\$ -	\$ -
A6444		X	XXX	N	N	N	N	N	\$ -	\$ -
A6445		X	XXX	N	N	N	N	N	\$ -	\$ -
A6446		X	XXX	N	N	N	N	N	\$ -	\$ -
A6447		X	XXX	N	N	N	N	N	\$ -	\$ -
A6448		X	XXX	N	N	N	N	N	\$ -	\$ -
A6449		X	XXX	N	N	N	N	N	\$ -	\$ -
A6450		X	XXX	N	N	N	N	N	\$ -	\$ -
A6451		X	XXX	N	N	N	N	N	\$ -	\$ -
A6452		X	XXX	N	N	N	N	N	\$ -	\$ -
A6453		X	XXX	N	N	N	N	N	\$ -	\$ -
A6454		X	XXX	N	N	N	N	N	\$ -	\$ -
A6455		X	XXX	N	N	N	N	N	\$ -	\$ -
A6456		X	XXX	N	N	N	N	N	\$ -	\$ -
A6457		X	XXX	N	N	N	N	N	\$ -	\$ -
A6460		X	XXX	N	N	N	N	N	\$ -	\$ -
A6461		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A6501		X	XXX	N	N	N	N	N	\$ -	\$ -
A6502		X	XXX	N	N	N	N	N	\$ -	\$ -
A6503		X	XXX	N	N	N	N	N	\$ -	\$ -
A6504		X	XXX	N	N	N	N	N	\$ -	\$ -
A6505		X	XXX	N	N	N	N	N	\$ -	\$ -
A6506		X	XXX	N	N	N	N	N	\$ -	\$ -
A6507		X	XXX	N	N	N	N	N	\$ -	\$ -
A6508		X	XXX	N	N	N	N	N	\$ -	\$ -
A6509		X	XXX	N	N	N	N	N	\$ -	\$ -
A6510		X	XXX	N	N	N	N	N	\$ -	\$ -
A6511		X	XXX	N	N	N	N	N	\$ -	\$ -
A6512		X	XXX	N	N	N	N	N	\$ -	\$ -
A6513		X	XXX	N	N	N	N	N	\$ -	\$ -
A6531		X	XXX	N	N	N	N	N	\$ -	\$ -
A6532		X	XXX	N	N	N	N	N	\$ -	\$ -
A6545		X	XXX	N	N	N	N	N	\$ -	\$ -
A6550		X	XXX	N	N	N	N	N	\$ -	\$ -
A7000		X	XXX	N	N	N	N	N	\$ -	\$ -
A7001		X	XXX	N	N	N	N	N	\$ -	\$ -
A7002		X	XXX	N	N	N	N	N	\$ -	\$ -
A7003		X	XXX	N	N	N	N	N	\$ -	\$ -
A7004		X	XXX	N	N	N	N	N	\$ -	\$ -
A7005		X	XXX	N	N	N	N	N	\$ -	\$ -
A7006		X	XXX	N	N	N	N	N	\$ -	\$ -
A7007		X	XXX	N	N	N	N	N	\$ -	\$ -
A7008		X	XXX	N	N	N	N	N	\$ -	\$ -
A7009		X	XXX	N	N	N	N	N	\$ -	\$ -
A7010		X	XXX	N	N	N	N	N	\$ -	\$ -
A7012		X	XXX	N	N	N	N	N	\$ -	\$ -
A7013		X	XXX	N	N	N	N	N	\$ -	\$ -
A7014		X	XXX	N	N	N	N	N	\$ -	\$ -
A7015		X	XXX	N	N	N	N	N	\$ -	\$ -
A7016		X	XXX	N	N	N	N	N	\$ -	\$ -
A7017		X	XXX	N	N	N	N	N	\$ -	\$ -
A7018		X	XXX	N	N	N	N	N	\$ -	\$ -
A7020		X	XXX	N	N	N	N	N	\$ -	\$ -
A7025		X	XXX	N	N	N	N	N	\$ -	\$ -
A7026		X	XXX	N	N	N	N	N	\$ -	\$ -
A7027		X	XXX	N	N	N	N	N	\$ -	\$ -
A7028		X	XXX	N	N	N	N	N	\$ -	\$ -
A7029		X	XXX	N	N	N	N	N	\$ -	\$ -
A7030		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
A7031		X	XXX	N	N	N	N	N	\$ -	\$ -
A7032		X	XXX	N	N	N	N	N	\$ -	\$ -
A7033		X	XXX	N	N	N	N	N	\$ -	\$ -
A7034		X	XXX	N	N	N	N	N	\$ -	\$ -
A7035		X	XXX	N	N	N	N	N	\$ -	\$ -
A7036		X	XXX	N	N	N	N	N	\$ -	\$ -
A7037		X	XXX	N	N	N	N	N	\$ -	\$ -
A7038		X	XXX	N	N	N	N	N	\$ -	\$ -
A7039		X	XXX	N	N	N	N	N	\$ -	\$ -
A7040		X	XXX	N	N	N	N	N	\$ -	\$ -
A7041		X	XXX	N	N	N	N	N	\$ -	\$ -
A7044		X	XXX	N	N	N	N	N	\$ -	\$ -
A7045		X	XXX	N	N	N	N	N	\$ -	\$ -
A7046		X	XXX	N	N	N	N	N	\$ -	\$ -
A7047		X	XXX	N	N	N	N	N	\$ -	\$ -
A7048		X	XXX	N	N	N	N	N	\$ -	\$ -
A7501		X	XXX	N	N	N	N	N	\$ -	\$ -
A7502		X	XXX	N	N	N	N	N	\$ -	\$ -
A7503		X	XXX	N	N	N	N	N	\$ -	\$ -
A7504		X	XXX	N	N	N	N	N	\$ -	\$ -
A7505		X	XXX	N	N	N	N	N	\$ -	\$ -
A7506		X	XXX	N	N	N	N	N	\$ -	\$ -
A7507		X	XXX	N	N	N	N	N	\$ -	\$ -
A7508		X	XXX	N	N	N	N	N	\$ -	\$ -
A7509		X	XXX	N	N	N	N	N	\$ -	\$ -
A7520		X	XXX	N	N	N	N	N	\$ -	\$ -
A7521		X	XXX	N	N	N	N	N	\$ -	\$ -
A7522		X	XXX	N	N	N	N	N	\$ -	\$ -
A7523		X	XXX	N	N	N	N	N	\$ -	\$ -
A7524		X	XXX	N	N	N	N	N	\$ -	\$ -
A7525		X	XXX	N	N	N	N	N	\$ -	\$ -
A7526		X	XXX	N	N	N	N	N	\$ -	\$ -
A7527		X	XXX	N	N	N	N	N	\$ -	\$ -
A8000		X	XXX	N	N	N	N	N	\$ -	\$ -
A8001		X	XXX	N	N	N	N	N	\$ -	\$ -
A8002		X	XXX	N	N	N	N	N	\$ -	\$ -
A8003		X	XXX	N	N	N	N	N	\$ -	\$ -
A8004		X	XXX	N	N	N	N	N	\$ -	\$ -
A9155		X	XXX	N	N	N	N	N	\$ -	\$ -
A9284		X	XXX	N	N	N	N	N	\$ -	\$ -
A9285		X	XXX	N	N	N	N	N	\$ -	\$ -
A9520		X	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
A9575		X	XXX	N	N	N	N	N	\$ -	\$ -
A9576		X	XXX	N	N	N	N	N	\$ -	\$ -
A9577		X	XXX	N	N	N	N	N	\$ -	\$ -
A9578		X	XXX	N	N	N	N	N	\$ -	\$ -
A9579		X	XXX	N	N	N	N	N	\$ -	\$ -
A9581		X	XXX	N	N	N	N	N	\$ -	\$ -
A9582		X	XXX	N	N	N	N	N	\$ -	\$ -
A9583		X	XXX	N	N	N	N	N	\$ -	\$ -
A9584		X	XXX	N	N	N	N	N	\$ -	\$ -
A9585		X	XXX	N	N	N	N	N	\$ -	\$ -
A9587		X	XXX	N	N	N	N	N	\$ -	\$ -
A9588		X	XXX	N	N	N	N	N	\$ -	\$ -
A9589		X	XXX	N	N	N	N	N	\$ -	\$ -
A9590		X	XXX	N	N	N	N	N	\$ -	\$ -
A9591		X	XXX	N	N	N	N	N	\$ -	\$ -
A9597		X	XXX	N	N	N	N	N	\$ -	\$ -
A9598		X	XXX	N	N	N	N	N	\$ -	\$ -
A9604		X	XXX	N	N	N	N	N	\$ -	\$ -
A9606		X	XXX	N	N	N	N	N	\$ -	\$ -
A9698		X	XXX	N	N	N	N	N	\$ -	\$ -
A9900		X	XXX	N	N	N	N	N	\$ -	\$ -
A9901		X	XXX	N	N	N	N	N	\$ -	\$ -
A9999		X	XXX	N	N	N	N	N	\$ -	\$ -
G0008		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0068		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0069		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0070		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0071		Not Covered	XXX	N	N	N	N	N	\$ 15.67	\$ 15.67
G0076		Not Covered	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
G0077		Not Covered	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
G0078		Not Covered	XXX	N	N	D	N	N	\$ 85.07	\$ 85.07
G0079		Not Covered	XXX	N	N	D	N	N	\$ 120.50	\$ 120.50
G0080		Not Covered	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
G0081		Not Covered	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
G0082		Not Covered	XXX	N	N	D	N	N	\$ 55.67	\$ 55.67
G0083		Not Covered	XXX	N	N	D	N	N	\$ 85.80	\$ 85.80
G0084		Not Covered	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
G0085		Not Covered	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
G0086		Not Covered	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0087		Not Covered	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
G0088		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0089		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0101		Not Covered	XXX	N	N	D	N	N	\$ 18.56	\$ 25.55
G0102		Not Covered	XXX	N	N	N	N	N	\$ 6.03	\$ 14.22
G0103		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0104		A	000	Y	N	N	N	N	\$ 37.11	\$ 119.54
G0105		A	000	Y	N	N	N	N	\$ 126.04	\$ 226.06
G0106	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
G0106	TC	A	XXX	N	N	D	N	N	\$ 102.91	\$ 102.91
G0106		A	XXX	N	N	D	N	N	\$ 143.88	\$ 143.88
G0108		A	XXX	N	N	D	N	N	\$ 36.87	\$ 36.87
G0109		A	XXX	N	N	D	N	N	\$ 10.12	\$ 10.12
G0117		Not Covered	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15
G0118		Not Covered	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
G0120	26	A	XXX	N	N	D	N	N	\$ 41.21	\$ 41.21
G0120	TC	A	XXX	N	N	D	N	N	\$ 102.91	\$ 102.91
G0120		A	XXX	N	N	D	N	N	\$ 143.88	\$ 143.88
G0121		Not Covered	000	Y	N	N	N	N	\$ 126.28	\$ 226.30
G0122	26	Not Covered	XXX	N	N	N	N	N	\$ 33.26	\$ 33.26
G0122	TC	Not Covered	XXX	N	N	N	N	N	\$ 173.76	\$ 173.76
G0122		Not Covered	XXX	N	N	N	N	N	\$ 207.02	\$ 207.02
G0123		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0124		Not Covered	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
G0127		Not Covered	000	Y	N	N	N	N	\$ 5.06	\$ 15.18
G0128		Not Covered	XXX	N	N	D	N	N	\$ 4.58	\$ 4.58
G0129		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0130	26	Not Covered	XXX	N	N	D	N	N	\$ 7.47	\$ 7.47
G0130	TC	Not Covered	XXX	N	N	D	N	N	\$ 15.18	\$ 15.18
G0130		Not Covered	XXX	N	N	D	N	N	\$ 22.41	\$ 22.41
G0141		Not Covered	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
G0143		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0144		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0147		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0151		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0153		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0155		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0156		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0157		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0158		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0159		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0160		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0161		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0162		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0166		Not Covered	XXX	N	N	N	N	N	\$ 70.37	\$ 70.37
G0168		Not Covered	000	Y	N	N	N	N	\$ 10.60	\$ 75.19
G0175		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0176		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0177		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0179		Not Covered	XXX	N	N	D	N	N	\$ 26.51	\$ 26.51
G0180		Not Covered	XXX	N	N	D	N	N	\$ 34.22	\$ 34.22
G0181		Not Covered	XXX	N	N	D	N	N	\$ 69.89	\$ 69.89
G0182		Not Covered	XXX	N	N	D	N	N	\$ 70.61	\$ 70.61
G0186		Not Covered	YYY	Y	Y	D	D	D	\$ -	\$ -
G0219	26	C	XXX	N	N	N	N	N	\$ -	\$ -
G0219	TC	C	XXX	N	N	N	N	N	\$ -	\$ -
G0219		C	XXX	N	N	N	N	N	\$ -	\$ -
G0235	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0235	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0235		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0237		A	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
G0238		A	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
G0239		A	XXX	N	N	D	N	N	\$ 7.23	\$ 7.23
G0245		Not Covered	XXX	N	N	D	N	N	\$ 28.20	\$ 42.66
G0246		Not Covered	XXX	N	N	D	N	N	\$ 13.74	\$ 24.82
G0247		Not Covered	ZZZ	N	N	D	N	N	\$ 14.70	\$ 51.82
G0248		Not Covered	XXX	N	N	D	N	N	\$ 39.77	\$ 39.77
G0249		Not Covered	XXX	N	N	D	N	N	\$ 35.19	\$ 35.19
G0250		Not Covered	XXX	N	N	D	N	N	\$ 5.30	\$ 5.30
G0252	26	Not Covered	XXX	N	N	N	N	N	\$ 49.89	\$ 49.89
G0252	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0252		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0255	26	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0255	TC	Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0255		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0257		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0259		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0260		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0268		Not Covered	000	Y	B	N	N	N	\$ 22.90	\$ 33.74
G0269		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlst/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0270		Not Covered	XXX	N	N	D	N	N	\$ 18.32	\$ 20.73
G0271		Not Covered	XXX	N	N	D	N	N	\$ 10.12	\$ 11.09
G0276		Not Covered	000	Y	B	Y	D	N	\$ 256.91	\$ 256.91
G0277		A	XXX	N	N	D	N	N	\$ 98.81	\$ 98.81
G0278		Not Covered	ZZZ	N	N	D	N	N	\$ 9.40	\$ 9.40
G0279	26	A	ZZZ	N	B	N	N	N	\$ 20.24	\$ 20.24
G0279	TC	A	ZZZ	N	B	N	N	N	\$ 15.18	\$ 15.18
G0279		A	ZZZ	N	B	N	N	N	\$ 35.43	\$ 35.43
G0281		Not Covered	XXX	5	N	D	N	N	\$ 8.44	\$ 8.44
G0282		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0283		Not Covered	XXX	5	N	D	N	N	\$ 8.44	\$ 8.44
G0288		Not Covered	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
G0289		Not Covered	ZZZ	N	Y	D	N	N	\$ 59.29	\$ 59.29
G0293		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0294		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0295		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0296		A	XXX	N	N	D	N	N	\$ 17.83	\$ 19.28
G0300		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0302		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0303		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0304		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0305		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0306		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0307		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0328		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0329		Not Covered	XXX	5	N	D	N	N	\$ 6.75	\$ 6.75
G0333		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0337		Not Covered	XXX	N	N	N	N	N	\$ 49.41	\$ 49.41
G0339		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0340		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0341		Not Covered	000	Y	N	D	D	N	\$ 243.41	\$ 1,331.77
G0342		Not Covered	090	Y	N	Y	D	N	\$ 457.66	\$ 457.66
G0343		Not Covered	090	Y	N	Y	D	N	\$ 866.15	\$ 866.15
G0372		Not Covered	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
G0378		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0379		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0380		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0381		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0382		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0383		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0384		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0390		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0396		Not Covered	XXX	N	N	D	N	N	\$ 22.17	\$ 24.10
G0397		Not Covered	XXX	N	N	D	N	N	\$ 43.62	\$ 45.31
G0398	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0398	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0398		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0399	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0399	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0399		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0400	26	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0400	TC	Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0400		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G0402		Not Covered	XXX	N	N	D	N	N	\$ 90.62	\$ 110.62
G0403		Not Covered	XXX	N	N	D	N	N	\$ 9.64	\$ 9.64
G0404		Not Covered	XXX	N	N	D	N	N	\$ 3.86	\$ 3.86
G0405		Not Covered	XXX	N	N	D	N	N	\$ 5.54	\$ 5.54
G0406		Not Covered	XXX	N	N	D	N	N	\$ 25.79	\$ 25.79
G0407		Not Covered	XXX	N	N	D	N	N	\$ 48.20	\$ 48.20
G0408		Not Covered	XXX	N	N	D	N	N	\$ 69.17	\$ 69.17
G0409		Not Covered	XXX	N	N	D	N	N	\$ 8.44	\$ 8.44
G0410		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0411		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0412		Not Covered	090	Y	N	Y	Y	N	\$ 496.22	\$ 496.22
G0413		Not Covered	090	Y	N	Y	Y	N	\$ 727.10	\$ 727.10
G0414		Not Covered	090	Y	N	Y	Y	N	\$ 686.85	\$ 686.85
G0415		Not Covered	090	Y	N	Y	Y	N	\$ 942.31	\$ 942.31
G0416	26	Not Covered	XXX	N	N	D	N	N	\$ 118.57	\$ 118.57
G0416	TC	Not Covered	XXX	N	N	D	N	N	\$ 104.35	\$ 104.35
G0416		Not Covered	XXX	N	N	D	N	N	\$ 222.93	\$ 222.93
G0420		Not Covered	XXX	N	N	D	N	N	\$ 76.16	\$ 76.16
G0421		Not Covered	XXX	N	N	D	N	N	\$ 18.32	\$ 18.32
G0422		Not Covered	XXX	N	N	D	N	N	\$ 76.40	\$ 76.40
G0423		Not Covered	XXX	N	N	D	N	N	\$ 76.40	\$ 76.40
G0424		Not Covered	XXX	N	N	D	N	N	\$ 9.40	\$ 19.04
G0425		Not Covered	XXX	N	N	D	N	N	\$ 68.20	\$ 68.20
G0426		Not Covered	XXX	N	N	D	N	N	\$ 91.34	\$ 91.34
G0427		Not Covered	XXX	N	N	D	N	N	\$ 134.24	\$ 134.24
G0428		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0429		Not Covered	000	Y	N	D	N	N	\$ 46.51	\$ 64.35
G0432		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0433		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0435		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0438		Not Covered	XXX	N	N	D	N	N	\$ 110.38	\$ 110.38

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0439		Not Covered	XXX	N	N	D	N	N	\$ 87.00	\$ 87.00
G0442		Not Covered	XXX	N	N	D	N	N	\$ 6.27	\$ 11.81
G0443		Not Covered	XXX	N	N	D	N	N	\$ 16.15	\$ 17.83
G0444		Not Covered	XXX	N	N	D	N	N	\$ 6.27	\$ 11.81
G0445		Not Covered	XXX	N	N	D	N	N	\$ 15.91	\$ 18.56
G0446		Not Covered	XXX	N	N	D	N	N	\$ 16.15	\$ 17.83
G0447		Not Covered	XXX	N	N	D	N	N	\$ 16.15	\$ 17.83
G0448		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0451		Not Covered	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
G0452	26	Not Covered	XXX	N	N	D	N	N	\$ 31.09	\$ 31.09
G0452	TC	Not Covered	XXX	N	N	D	N	N	\$ 1.93	\$ 1.93
G0452		Not Covered	XXX	N	N	D	N	N	\$ 33.02	\$ 33.02
G0453		Not Covered	XXX	N	N	D	N	N	\$ 22.17	\$ 22.17
G0454		Not Covered	XXX	N	N	D	N	N	\$ 6.03	\$ 6.03
G0455		Not Covered	000	N	N	D	N	N	\$ 48.68	\$ 84.11
G0458		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0459		Not Covered	XXX	N	N	N	N	N	\$ 28.92	\$ 28.92
G0460		Not Covered	XXX	Y	N	N	N	N	\$ -	\$ -
G0463		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0466		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0467		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0468		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0469		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0470		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0471		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0472		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0473		Not Covered	XXX	N	N	N	N	N	\$ 7.95	\$ 8.44
G0475		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0476		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0480		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
G0481		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
G0482		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
G0483		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
G0490		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0491		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0492		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0493		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0494		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0495		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0496		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0498		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
G0499		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G0500		Not Covered	XXX	N	N	N	N	N	\$ 3.62	\$ 35.43
G0501		Not Covered	ZZZ	N	N	D	N	N	\$ -	\$ -
G0506		Not Covered	ZZZ	N	N	D	N	N	\$ 30.13	\$ 40.01
G0508		Not Covered	XXX	N	N	N	N	N	\$ 141.23	\$ 141.23
G0509		Not Covered	XXX	N	N	N	N	N	\$ 128.69	\$ 128.69
G0511		Not Covered	XXX	N	N	N	N	N	\$ 42.42	\$ 42.42
G0512		Not Covered	XXX	N	N	N	N	N	\$ 99.29	\$ 99.29
G0513		Not Covered	ZZZ	N	N	D	N	N	\$ 41.45	\$ 43.62
G0514		Not Covered	ZZZ	N	N	D	N	N	\$ 41.21	\$ 43.62
G0516		Not Covered	000	Y	N	D	N	N	\$ 67.24	\$ 140.26
G0517		Not Covered	000	Y	N	D	N	N	\$ 76.88	\$ 142.19
G0518		Not Covered	000	Y	N	D	N	N	\$ 124.84	\$ 264.86
G0659		CLFS	XXX	N	N	N	N	N	\$ -	\$ -
G0913		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0914		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0915		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0916		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0917		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G0918		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1002		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1003		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1008		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1011		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1015		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1016		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1017		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1018		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1019		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1021		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1022		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G1023		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2000		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
G2001		Not Covered	XXX	N	N	D	N	N	\$ 36.15	\$ 36.15

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G2002		Not Covered	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
G2003		Not Covered	XXX	N	N	D	N	N	\$ 85.07	\$ 85.07
G2004		Not Covered	XXX	N	N	D	N	N	\$ 120.50	\$ 120.50
G2005		Not Covered	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
G2006		Not Covered	XXX	N	N	D	N	N	\$ 36.39	\$ 36.39
G2007		Not Covered	XXX	N	N	D	N	N	\$ 55.67	\$ 55.67
G2008		Not Covered	XXX	N	N	D	N	N	\$ 85.80	\$ 85.80
G2009		Not Covered	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
G2010		Not Covered	XXX	N	N	D	N	N	\$ 6.27	\$ 7.95
G2011		Not Covered	XXX	N	N	D	N	N	\$ 11.33	\$ 11.33
G2012		Not Covered	XXX	N	N	D	N	N	\$ 8.68	\$ 9.64
G2013		Not Covered	XXX	N	N	D	N	N	\$ 147.25	\$ 147.25
G2014		Not Covered	XXX	N	N	D	N	N	\$ 51.09	\$ 51.09
G2015		Not Covered	XXX	N	N	D	N	N	\$ 71.58	\$ 71.58
G2021		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2022		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2023	C		XXX	N	N	N	N	N	\$ 1.45	\$ 9.64
G2024	C		XXX	N	N	N	N	N	\$ -	\$ -
G2025		Not Covered	XXX	N	N	N	N	N	\$ 37.60	\$ 37.60
G2064		Not Covered	XXX	N	N	D	N	N	\$ 51.33	\$ 59.29
G2065		Not Covered	XXX	N	N	D	N	N	\$ 25.31	\$ 25.31
G2066		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
G2067		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2068		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2069		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2070		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2071		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2072		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2073		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2074		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2075		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2076		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2077		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2078		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2079		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2080		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2081		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2082		Not Covered	XXX	N	N	D	N	N	\$ 21.93	\$ 383.91
G2083		Not Covered	XXX	N	N	D	N	N	\$ 21.93	\$ 546.35
G2086		Not Covered	XXX	N	N	D	N	N	\$ 196.42	\$ 260.04
G2087		Not Covered	XXX	N	N	D	N	N	\$ 191.84	\$ 233.77
G2088		Not Covered	ZZZ	N	N	D	N	N	\$ 23.14	\$ 42.66

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G2090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2091		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2092		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2093		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2094		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2095		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2096		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2097		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2098		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2099		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2100		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2101		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2105		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2106		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2107		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2109		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2112		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2113		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2116		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2118		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2121		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2122		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2127		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2129		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2136		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2137		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2138		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2139		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2140		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2141		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2142		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2143		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2144		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2146		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2147		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G2148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2149		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2151		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2167		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2168		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2169		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2170		Not Covered	YYY	Y	N	Y	D	N	\$ -	\$ -
G2171		Not Covered	YYY	Y	N	Y	D	N	\$ -	\$ -
G2173		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2174		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2175		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2176		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2177		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2178		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2179		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2180		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2181		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2182		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2183		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2184		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2185		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2186		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2187		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2188		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2189		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2190		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2191		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2192		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2193		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2194		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2195		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2196		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2197		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2198		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2199		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2200		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2201		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2202		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2203		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2204		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G2205		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2206		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2207		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2208		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2209		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2210		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2212		Not Covered	XXX	N	N	D	N	N	\$ 21.69	\$ 22.41
G2213		Not Covered	ZZZ	N	N	D	N	N	\$ 44.59	\$ 46.51
G2214		Not Covered	XXX	N	N	D	N	N	\$ 26.03	\$ 41.21
G2215		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2216		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G2250		Not Covered	XXX	N	N	D	N	N	\$ 6.27	\$ 7.95
G2251		Not Covered	XXX	N	N	D	N	N	\$ 8.68	\$ 9.64
G2252		Not Covered	XXX	N	N	D	N	N	\$ 17.11	\$ 18.08
G6001	26	A	XXX	N	N	D	N	N	\$ 20.97	\$ 20.97
G6001	TC	A	XXX	N	N	D	N	N	\$ 73.75	\$ 73.75
G6001		A	XXX	N	N	D	N	N	\$ 95.20	\$ 95.20
G6002	26	A	XXX	N	N	D	N	N	\$ 13.50	\$ 13.50
G6002	TC	A	XXX	N	N	D	N	N	\$ 33.50	\$ 33.50
G6002		A	XXX	N	N	D	N	N	\$ 47.00	\$ 47.00
G6003		A	XXX	N	N	D	N	N	\$ 92.79	\$ 92.79
G6004		A	XXX	N	N	D	N	N	\$ 85.80	\$ 85.80
G6005		A	XXX	N	N	D	N	N	\$ 86.04	\$ 86.04
G6006		A	XXX	N	N	D	N	N	\$ 85.56	\$ 85.56
G6007		A	XXX	N	N	D	N	N	\$ 163.16	\$ 163.16
G6008		A	XXX	N	N	D	N	N	\$ 118.81	\$ 118.81
G6009		A	XXX	N	N	D	N	N	\$ 117.85	\$ 117.85
G6010		A	XXX	N	N	D	N	N	\$ 117.61	\$ 117.61
G6011		A	XXX	N	N	D	N	N	\$ 157.86	\$ 157.86
G6012		A	XXX	N	N	D	N	N	\$ 157.13	\$ 157.13
G6013		A	XXX	N	N	D	N	N	\$ 157.37	\$ 157.37
G6014		A	XXX	N	N	D	N	N	\$ 157.13	\$ 157.13
G6015		A	XXX	N	N	D	N	N	\$ 228.95	\$ 228.95
G6016		A	XXX	N	N	D	N	N	\$ 227.99	\$ 227.99
G6017		Not Covered	YYY	N	N	D	N	N	\$ -	\$ -
G8395		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8396		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8397		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8399		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8400		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8404		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8405		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G8410		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8415		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8416		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8417		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8418		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8419		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8420		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8421		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8422		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8427		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8428		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8430		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8431		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8432		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8433		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8450		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8451		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8452		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8465		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8473		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8474		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8475		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8476		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8477		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8478		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8482		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8483		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8484		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8511		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8535		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8536		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8539		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8540		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8541		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8542		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8543		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8559		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8560		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8561		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8562		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G8563		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8564		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8565		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8566		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8567		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8568		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8569		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8570		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8575		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8576		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8577		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8578		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8598		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8599		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8600		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8601		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8602		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8633		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8635		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8647		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8648		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8650		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8651		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8652		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8654		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8655		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8656		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8658		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8659		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8660		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8661		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8662		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8663		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8664		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8666		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8667		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8668		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8670		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8694		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8708		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8709		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8710		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G8711		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8712		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8721		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8722		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8723		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8724		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8733		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8734		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8735		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8749		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8752		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8753		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8754		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8755		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8756		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8783		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8785		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8797		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8798		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8806		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8807		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8808		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8815		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8816		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8817		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8818		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8825		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8826		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8833		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8834		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8838		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8839		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8840		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8841		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8842		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8843		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8844		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8845		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8846		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8849		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8850		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8851		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G8852		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8854		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8855		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8856		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8857		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8858		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8863		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8864		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8865		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8866		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8867		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8869		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8875		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8876		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8877		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8878		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8880		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8881		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8882		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8883		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8884		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8885		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8907		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8908		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8909		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8910		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8911		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8912		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8913		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8914		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8915		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8916		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8917		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8918		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8923		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8924		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8925		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8926		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8934		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8935		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8936		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8937		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G8938		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8941		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8942		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8944		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8946		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8950		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8952		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8955		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8956		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8958		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8961		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8962		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8963		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8964		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8965		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8966		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8967		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8968		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8969		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G8970		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9002		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9003		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9006		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9008	A		XXX	N	N	N	N	N	\$ -	\$ -
G9009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9011		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9016		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9050		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9051		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9052		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9053		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9054		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9055		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9056		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9057		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9058		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9059		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9060		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9061		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9062		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9063		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9064		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9065		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9066		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9067		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9068		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9069		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9070		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9071		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9072		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9073		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9074		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9075		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9077		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9078		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9079		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9080		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9083		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9084		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9085		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9086		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9087		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9088		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9089		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9091		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9092		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9093		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9094		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9095		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9096		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9097		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9098		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9099		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9100		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9101		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9102		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9103		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9104		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9105		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9106		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9107		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9109		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9111		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9112		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9113		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9114		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9116		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9123		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9124		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9129		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9130		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9132		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9133		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9134		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9135		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9136		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9137		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9138		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9139		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9140		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9143		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9147		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9149		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9151		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9153		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9156		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9157		Not Covered	XXX	N	N	N	N	N	\$ 65.79	\$ 65.79
G9187		Not Covered	XXX	N	N	N	N	N	\$ 27.47	\$ 27.47
G9188		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9189		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9190		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9191		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9192		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9196		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9197		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9198		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9212		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9213		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9223		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9225		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9226		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9227		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9228		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9229		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9230		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9231		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9242		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9243		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9246		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9247		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9250		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9251		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9254		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9255		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9267		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9268		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9269		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9270		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9273		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9274		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9275		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9276		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9277		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9278		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9279		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9280		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9281		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9282		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9283		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9284		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9285		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9286		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9287		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9288		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9289		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9290		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9291		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9292		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9293		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9294		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9295		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9296		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9297		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9298		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9299		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9305		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9306		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9307		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9308		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9309		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9310		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9311		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9312		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9313		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9314		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9315		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9316		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9317		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9318		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9319		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9321		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9322		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9341		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9342		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9344		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9345		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9347		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9348		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9349		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9350		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9351		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9352		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9353		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9354		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9355		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9356		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9357		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9358		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9359		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9360		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9361		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9364		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9367		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9368		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9380		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9382		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9383		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9384		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9385		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9386		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9393		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9394		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9395		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9396		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9399		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9400		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9401		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9402		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9403		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9404		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9405		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9406		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9407		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9408		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9409		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9410		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9411		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9412		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9413		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9414		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9415		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9416		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9417		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9418		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9419		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9420		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9421		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9422		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9423		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9424		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9425		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9426		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9427		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9428		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9429		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9430		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9431		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9432		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9434		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9448		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9449		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9450		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9451		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9452		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9453		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9454		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9455		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9456		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9457		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9458		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9459		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9460		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9468		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9470		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9471		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9473		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9474		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9475		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9476		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9477		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9478		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9479		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9480		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9481		Not Covered	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9482		Not Covered	XXX	N	N	D	N	N	\$ 25.06	\$ 25.06
G9483		Not Covered	XXX	N	N	D	N	N	\$ 38.56	\$ 38.56
G9484		Not Covered	XXX	N	N	D	N	N	\$ 65.31	\$ 65.31
G9485		Not Covered	XXX	N	N	D	N	N	\$ 85.31	\$ 85.31
G9486		Not Covered	XXX	N	N	D	N	N	\$ 13.01	\$ 13.01
G9487		Not Covered	XXX	N	N	D	N	N	\$ 26.27	\$ 26.27
G9488		Not Covered	XXX	N	N	D	N	N	\$ 40.25	\$ 40.25
G9489		Not Covered	XXX	N	N	D	N	N	\$ 56.88	\$ 56.88
G9490		Not Covered	XXX	N	N	N	N	N	\$ 27.96	\$ 27.96
G9497		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9498		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9501		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9502		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9505		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9507		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9508		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9509		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9511		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9512		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9513		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9514		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9515		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9516		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9517		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9518		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9519		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9520		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9521		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9522		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9529		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9530		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9531		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9533		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9537		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9539		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9540		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9541		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9542		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9543		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9544		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9547		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9548		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9549		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9550		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9551		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9552		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9553		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9554		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9555		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9556		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9557		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9561		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9562		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9563		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9577		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9578		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9579		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9580		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9582		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9583		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9584		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9585		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9593		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9594		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9595		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9596		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9597		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9598		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9599		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9603		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9604		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9605		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9606		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9607		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9608		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9609		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9610		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9611		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9612		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9613		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9614		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9618		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9620		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9621		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9622		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9623		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9624		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9625		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9626		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9627		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9628		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9629		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9630		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9631		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9632		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9633		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9634		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9635		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9636		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9637		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9638		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9639		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9640		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9641		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9642		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9643		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9644		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9645		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9646		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9647		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9648		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9649		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9651		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9654		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9655		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9656		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9658		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9659		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9660		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9661		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9662		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9663		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9664		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9665		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9666		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9674		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9675		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9676		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9678		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9679		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9680		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9681		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9682		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9683		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9684		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9685		Not Covered	XXX	N	N	D	N	N	\$ 134.48	\$ 134.48
G9687		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9688		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9689		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9690		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9691		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9692		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9693		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9694		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9695		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9696		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9697		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9698		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9699		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9700		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9702		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9703		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9704		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9705		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9706		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9707		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9708		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9709		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9710		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9711		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9712		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9713		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9714		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9715		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9716		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9717		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9718		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9719		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9720		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9721		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9722		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9723		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9724		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9725		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9726		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9727		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9728		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9729		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9730		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9731		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9732		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9733		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9734		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9735		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9736		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9737		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9740		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9741		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9744		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9745		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9746		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9751		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9752		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9753		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9754		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9755		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9756		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9757		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9758		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9760		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9761		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9762		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9763		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9764		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9765		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9766		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9767		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9768		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9769		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9770		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9771		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9772		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9773		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9774		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9775		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9776		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9777		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9778		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9779		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9780		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9781		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9782		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9783		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9784		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9785		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9786		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9787		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9788		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9789		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9790		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9791		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9792		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9793		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9794		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9795		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9796		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9797		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9805		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9806		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9807		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9808		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9809		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9810		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9811		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9812		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9813		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9818		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9819		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9820		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9821		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9822		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9823		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9824		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9830		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9831		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9832		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9838		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9839		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9840		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9841		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9842		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9843		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9844		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9845		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9846		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9847		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9848		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9852		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9853		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9854		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9858		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9859		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9860		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9861		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9862		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9868		Not Covered	XXX	N	N	N	N	N	\$ 19.28	\$ 19.28
G9869		Not Covered	XXX	N	N	N	N	N	\$ 25.79	\$ 25.79
G9870		Not Covered	XXX	N	N	N	N	N	\$ 32.29	\$ 32.29
G9873		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9874		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9875		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9876		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9877		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9878		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9879		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9880		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9881		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9882		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9883		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9884		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9885		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9890		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9891		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9892		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9893		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9894		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9895		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9896		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9897		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9898		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9899		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9900		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9901		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9902		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9903		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9904		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9905		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9906		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9907		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9908		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9909		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9910		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9911		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9912		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9913		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9914		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9915		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9916		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9917		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9918		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9919		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9920		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9921		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9922		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9923		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9925		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9926		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9927		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9928		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9929		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9930		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9931		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
G9932		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9938		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9939		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9940		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9942		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9943		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9945		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9946		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9948		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9949		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9954		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9955		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9956		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9957		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9958		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9959		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9960		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9961		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9962		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9963		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9964		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9965		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9968		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9969		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9970		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9974		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9975		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
G9978		Not Covered	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
G9979		Not Covered	XXX	N	N	D	N	N	\$ 33.50	\$ 33.50
G9980		Not Covered	XXX	N	N	D	N	N	\$ 52.30	\$ 52.30
G9981		Not Covered	XXX	N	N	D	N	N	\$ 88.21	\$ 88.21
G9982		Not Covered	XXX	N	N	D	N	N	\$ 117.13	\$ 117.13
G9983		Not Covered	XXX	N	N	D	N	N	\$ 19.04	\$ 19.04
G9984		Not Covered	XXX	N	N	D	N	N	\$ 37.60	\$ 37.60
G9985		Not Covered	XXX	N	N	D	N	N	\$ 57.12	\$ 57.12
G9986		Not Covered	XXX	N	N	D	N	N	\$ 82.42	\$ 82.42
G9987		Not Covered	XXX	N	N	N	N	N	\$ 27.47	\$ 27.47
H0001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
H0002		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
H0003		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M0075	C		XXX	N	N	N	N	N	\$ -	\$ -
M0076	C		XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
M0100		C	XXX	N	N	N	N	N	\$ -	\$ -
M0239			XXX	N	N	N	N	N	\$ -	\$ -
M0243			XXX	N	N	N	N	N	\$ -	\$ -
M0300		C	XXX	N	N	N	N	N	\$ -	\$ -
M0301		C	XXX	N	N	N	N	N	\$ -	\$ -
M1003		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1006		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1008		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1011		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1016		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1017		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1018		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1019		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1021		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1022		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1025		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1026		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1029		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1031		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1032		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1038		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1039		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1041		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1043		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1045		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1046		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
M1049		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1051		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1052		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1054		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1055		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1056		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1057		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1058		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1059		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1060		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1067		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1068		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1069		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1070		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1071		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1106		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1107		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1109		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1111		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1112		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1113		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1114		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1116		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1118		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1119		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1120		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1121		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1122		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1123		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1124		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1127		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1129		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1130		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1132		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
M1133		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1134		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1135		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1141		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1142		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1143		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1146		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1147		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
M1149		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P2028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P2029		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P2031		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P2033		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P2038		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P3000		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P3001		Not Covered	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
P7001	C		XXX	N	N	N	N	N	\$ -	\$ -
P9010	C		XXX	N	N	N	N	N	\$ -	\$ -
P9011	C		XXX	N	N	N	N	N	\$ -	\$ -
P9012	C		XXX	N	N	N	N	N	\$ -	\$ -
P9016	C		XXX	N	N	N	N	N	\$ -	\$ -
P9017	C		XXX	N	N	N	N	N	\$ -	\$ -
P9019	C		XXX	N	N	N	N	N	\$ -	\$ -
P9020	C		XXX	N	N	N	N	N	\$ -	\$ -
P9021	C		XXX	N	N	N	N	N	\$ -	\$ -
P9022	C		XXX	N	N	N	N	N	\$ -	\$ -
P9023	C		XXX	N	N	N	N	N	\$ -	\$ -
P9031		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9032		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9033		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9038		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9039		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9041		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9043		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9044		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
P9045		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9046		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9047		C	XXX	N	N	N	N	N	\$ -	\$ -
P9048		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9050		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9051		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9052		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9053		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9054		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9055		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9056		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9057		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9058		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9059		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9060		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9070		C	XXX	N	N	N	N	N	\$ -	\$ -
P9071		C	XXX	N	N	N	N	N	\$ -	\$ -
P9073		C	XXX	N	N	N	N	N	\$ -	\$ -
P9099		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9100		C	XXX	N	N	N	N	N	\$ -	\$ -
P9603		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9604		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
P9612		C	XXX	N	N	N	N	N	\$ -	\$ -
P9615		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0035	26	Not Covered	XXX	N	N	D	N	N	\$ 5.78	\$ 5.78
Q0035	TC	Not Covered	XXX	N	N	D	N	N	\$ 6.51	\$ 6.51
Q0035		Not Covered	XXX	N	N	D	N	N	\$ 12.29	\$ 12.29
Q0081		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0083		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0084		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0085		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0091		Not Covered	XXX	N	N	D	N	N	\$ 13.01	\$ 27.72
Q0092		Not Covered	XXX	N	N	D	N	N	\$ 13.98	\$ 13.98
Q0111		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0112		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0113		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0114		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0138		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0139		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0144		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0161		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlst/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q0162		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0163		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0164		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0166		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0167		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0169		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0173		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0174		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0175		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0177		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0180		C	XXX	N	N	N	N	N	\$ -	\$ -
Q0181		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0239		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0243		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0477		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0478		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0479		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0480		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0481		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0482		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0483		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0484		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0485		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0486		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0487		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0488		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0489		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0490		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0491		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0492		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0493		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0494		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0495		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0496		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0497		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0498		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0499		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0501		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0502		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0503		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q0506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0507		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0508		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0509		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0511		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0512		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0513		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0514		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q0515		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q1004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q1005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2017		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2026		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2038		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2039		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2041		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2042		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q2043	C		XXX	N	N	N	N	N	\$ -	\$ -
Q2049	C		XXX	N	N	N	N	N	\$ -	\$ -
Q2050	C		XXX	N	N	N	N	N	\$ -	\$ -
Q2052		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q3001		Not Covered	XXX	N	N	D	N	N	\$ -	\$ -
Q3014	C		XXX	N	N	N	N	N	\$ -	\$ -
Q3027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q3028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q3031		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4001	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4002	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4003	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4004	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4005	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4006	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4007	C		XXX	N	N	N	N	N	\$ -	\$ -
Q4008	C		XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q4009		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4010		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4011		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4012		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4013		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4014		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4015		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4016		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4017		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4018		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4019		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4020		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4021		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4022		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4023		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4024		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4025		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4026		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4027		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4028		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4029		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4030		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4031		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4032		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4033		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4034		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4035		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4036		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4037		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4038		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4039		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4040		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4041		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4042		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4043		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4044		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4045		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4046		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4047		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4048		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4049		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4050		Cost Invoice	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q4051		Cost Invoice	XXX	N	N	N	N	N	\$ -	\$ -
Q4074		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4081		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4082		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4100		Cost Invoice	XXX	N	N	N	N	N	\$ -	\$ -
Q4101		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4102		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4103		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4104		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4105		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4106		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4107		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4108		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4110		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4111		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4112		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4113		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4114		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4116		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4118		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4121		C	XXX	N	N	N	N	N	\$ -	\$ -
Q4122		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4123		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4124		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4127		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4130		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4132		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4133		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4134		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4135		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4136		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4137		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4138		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4139		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4140		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4141		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4142		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q4143		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4146		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4147		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4149		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4151		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4153		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4154		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4155		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4156		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4157		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4158		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4159		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4160		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4161		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4162		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4163		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4164		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4165		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4166		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4167		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4168		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4169		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4170		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4171		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4173		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4174		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4175		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4176		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4177		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4178		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4179		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4180		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4181		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4182		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4183		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4184		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4185		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4186		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlisted/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q4187		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4188		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4189		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4190		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4191		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4192		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4193		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4194		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4195		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4196		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4197		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4198		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4200		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4201		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4202		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4203		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4204		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4205		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4206		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4208		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4209		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4210		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4211		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4212		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4213		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4214		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4215		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4216		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4217		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4218		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4219		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4220		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4221		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4222		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4226		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4227		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4228		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4229		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4230		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4231		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4232		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q4233		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q4234			XXX	N	N	N	N	N	\$ -	\$ -
Q4235			XXX	N	N	N	N	N	\$ -	\$ -
Q4236			XXX	N	N	N	N	N	\$ -	\$ -
Q4237			XXX	N	N	N	N	N	\$ -	\$ -
Q4238			XXX	N	N	N	N	N	\$ -	\$ -
Q4239			XXX	N	N	N	N	N	\$ -	\$ -
Q4240			XXX	N	N	N	N	N	\$ -	\$ -
Q4241			XXX	N	N	N	N	N	\$ -	\$ -
Q4242			XXX	N	N	N	N	N	\$ -	\$ -
Q4244			XXX	N	N	N	N	N	\$ -	\$ -
Q4245			XXX	N	N	N	N	N	\$ -	\$ -
Q4246			XXX	N	N	N	N	N	\$ -	\$ -
Q4247			XXX	N	N	N	N	N	\$ -	\$ -
Q4248			XXX	N	N	N	N	N	\$ -	\$ -
Q4249			XXX	N	N	N	N	N	\$ -	\$ -
Q4250			XXX	N	N	N	N	N	\$ -	\$ -
Q4254			XXX	N	N	N	N	N	\$ -	\$ -
Q4255			XXX	N	N	N	N	N	\$ -	\$ -
Q5001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5002		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5003		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5004		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5006		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5008		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5009		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5101		C	XXX	N	N	N	N	N	\$ -	\$ -
Q5103		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5104		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5105		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5106		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5107		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5109		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q5111			XXX	N	N	N	N	N	\$ -	\$ -
Q5112			XXX	N	N	N	N	N	\$ -	\$ -
Q5113			XXX	N	N	N	N	N	\$ -	\$ -
Q5114			XXX	N	N	N	N	N	\$ -	\$ -
Q5115			XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
Q5116			XXX	N	N	N	N	N	\$ -	\$ -
Q5117			XXX	N	N	N	N	N	\$ -	\$ -
Q5118			XXX	N	N	N	N	N	\$ -	\$ -
Q5119			XXX	N	N	N	N	N	\$ -	\$ -
Q5120			XXX	N	N	N	N	N	\$ -	\$ -
Q5121			XXX	N	N	N	N	N	\$ -	\$ -
Q5122			XXX	N	N	N	N	N	\$ -	\$ -
Q9001			XXX	N	N	N	N	N	\$ -	\$ -
Q9002			XXX	N	N	N	N	N	\$ -	\$ -
Q9003			XXX	N	N	N	N	N	\$ -	\$ -
Q9950		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9951		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9953		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9954		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9955		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9956		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9957		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9958		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9959		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9960		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9961		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9962		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9963		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9964		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9965		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9966		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9967		C	XXX	N	N	N	N	N	\$ -	\$ -
Q9968		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9969		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9982		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9983		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9991		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
Q9992		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
R0070		C	XXX	N	N	D	N	N	\$ -	\$ -
R0075		C	XXX	N	N	D	N	N	\$ -	\$ -
R0076		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0017		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0021		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S0023		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0030		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0032		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0039		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0073		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0074		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0077		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0078		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0080		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0081		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0088		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0091		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0092		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0093		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0104		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0106		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0109	C		XXX	N	N	N	N	N	\$ -	\$ -
S0117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0119		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0122		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0132		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0136	C		XXX	N	N	N	N	N	\$ -	\$ -
S0137	C		XXX	N	N	N	N	N	\$ -	\$ -
S0138	C		XXX	N	N	N	N	N	\$ -	\$ -
S0139	C		XXX	N	N	N	N	N	\$ -	\$ -
S0140	C		XXX	N	N	N	N	N	\$ -	\$ -
S0142	C		XXX	N	N	N	N	N	\$ -	\$ -
S0145	C		XXX	N	N	N	N	N	\$ -	\$ -
S0148		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0155		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0156		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0157		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0160	C		XXX	N	N	N	N	N	\$ -	\$ -
S0164	C		XXX	N	N	N	N	N	\$ -	\$ -
S0166	C		XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S0169		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0170		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0171		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0172		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0174		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0175		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0176		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0177		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0178		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0179		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0182		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0183		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0187		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0189		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0190	C		XXX	N	N	N	N	N	\$ -	\$ -
S0191	C		XXX	N	N	N	N	N	\$ -	\$ -
S0194		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0197		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0199	C		XXX	N	N	N	N	N	\$ -	\$ -
S0201	C		XXX	N	N	N	N	N	\$ -	\$ -
S0207	C		XXX	N	N	N	N	N	\$ -	\$ -
S0208	C		XXX	N	N	N	N	N	\$ -	\$ -
S0209		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0215	C		XXX	N	N	N	N	N	\$ -	\$ -
S0220	C		XXX	N	N	N	N	N	\$ -	\$ -
S0221	C		XXX	N	N	N	N	N	\$ -	\$ -
S0250	C		XXX	N	N	N	N	N	\$ -	\$ -
S0255	C		XXX	N	N	N	N	N	\$ -	\$ -
S0257		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0260	C		XXX	N	N	N	N	N	\$ -	\$ -
S0265		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0270		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0271		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0272		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0273		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0274		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0280		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0281	C		XXX	N	N	N	N	N	\$ -	\$ -
S0285		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0302	C		XXX	N	N	N	N	N	\$ -	\$ -
S0310	C		XXX	N	N	N	N	N	\$ -	\$ -
S0311		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S0315		C	XXX	N	N	N	N	N	\$ -	\$ -
S0316		C	XXX	N	N	N	N	N	\$ -	\$ -
S0317		C	XXX	N	N	N	N	N	\$ -	\$ -
S0320		C	XXX	N	N	N	N	N	\$ -	\$ -
S0340		C	XXX	N	N	N	N	N	\$ -	\$ -
S0341		C	XXX	N	N	N	N	N	\$ -	\$ -
S0342		C	XXX	N	N	N	N	N	\$ -	\$ -
S0353		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0354		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0390		C	XXX	N	N	N	N	N	\$ -	\$ -
S0395		C	XXX	N	N	N	N	N	\$ -	\$ -
S0400		C	XXX	N	N	N	N	N	\$ -	\$ -
S0500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0506		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0508		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0510		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0512		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0514		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0515		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0516		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0518		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0580		C	XXX	N	N	N	N	N	\$ -	\$ -
S0581		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0590		C	XXX	N	N	N	N	N	\$ -	\$ -
S0592		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0595		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0596		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0601		C	XXX	N	N	N	N	N	\$ -	\$ -
S0610		C	XXX	N	N	N	N	N	\$ -	\$ -
S0612		C	XXX	N	N	N	N	N	\$ -	\$ -
S0613		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0618		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0620		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0621		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0622		C	XXX	N	N	N	N	N	\$ -	\$ -
S0630		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S0800		C	XXX	N	N	N	N	N	\$ -	\$ -
S0810		C	XXX	N	N	N	N	N	\$ -	\$ -
S0812		C	XXX	N	N	N	N	N	\$ -	\$ -
S1001		C	XXX	N	N	N	N	N	\$ -	\$ -
S1002		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
S1015		C	XXX	N	N	N	N	N	\$ -	\$ -
S1016		C	XXX	N	N	N	N	N	\$ -	\$ -
S1030		C	XXX	N	N	N	N	N	\$ -	\$ -
S1031		C	XXX	N	N	N	N	N	\$ -	\$ -
S1034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S1035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S1036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S1037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S1040		C	XXX	N	N	N	N	N	\$ -	\$ -
S2053		C	XXX	N	N	N	N	N	\$ -	\$ -
S2054		C	XXX	N	N	N	N	N	\$ -	\$ -
S2055		C	XXX	N	N	N	N	N	\$ -	\$ -
S2060		C	XXX	N	N	N	N	N	\$ -	\$ -
S2061		C	XXX	N	N	N	N	N	\$ -	\$ -
S2065		C	XXX	N	N	N	N	N	\$ -	\$ -
S2066		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2067		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2068		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2070		C	XXX	N	N	N	N	N	\$ -	\$ -
S2079		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2080		C	XXX	N	N	N	N	N	\$ -	\$ -
S2083		C	XXX	N	N	N	N	N	\$ -	\$ -
S2095		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2102		C	XXX	N	N	N	N	N	\$ -	\$ -
S2103		C	XXX	N	N	N	N	N	\$ -	\$ -
S2107		C	XXX	N	N	N	N	N	\$ -	\$ -
S2112		C	XXX	N	N	N	N	N	\$ -	\$ -
S2115		C	XXX	N	N	N	N	N	\$ -	\$ -
S2117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2118		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2120		C	XXX	N	N	N	N	N	\$ -	\$ -
S2140		C	XXX	N	N	N	N	N	\$ -	\$ -
S2142		C	XXX	N	N	N	N	N	\$ -	\$ -
S2150		C	XXX	N	N	N	N	N	\$ -	\$ -
S2152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2202		C	XXX	N	N	N	N	N	\$ -	\$ -
S2205		C	XXX	N	N	N	N	N	\$ -	\$ -
S2206		C	XXX	N	N	N	N	N	\$ -	\$ -
S2207		C	XXX	N	N	N	N	N	\$ -	\$ -
S2208		C	XXX	N	N	N	N	N	\$ -	\$ -
S2209		C	XXX	N	N	N	N	N	\$ -	\$ -
S2225		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
S2230		C	XXX	N	N	N	N	N	\$ -	\$ -
S2235		C	XXX	N	N	N	N	N	\$ -	\$ -
S2260		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2265		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2266		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2267		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2300		C	XXX	N	N	N	N	N	\$ -	\$ -
S2325		C	XXX	N	N	N	N	N	\$ -	\$ -
S2340		C	XXX	N	N	N	N	N	\$ -	\$ -
S2341		C	XXX	N	N	N	N	N	\$ -	\$ -
S2342		C	XXX	N	N	N	N	N	\$ -	\$ -
S2348		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S2350		C	XXX	N	N	N	N	N	\$ -	\$ -
S2351		C	XXX	N	N	N	N	N	\$ -	\$ -
S2400		C	XXX	N	N	N	N	N	\$ -	\$ -
S2401		C	XXX	N	N	N	N	N	\$ -	\$ -
S2402		C	XXX	N	N	N	N	N	\$ -	\$ -
S2403		C	XXX	N	N	N	N	N	\$ -	\$ -
S2404		C	XXX	N	N	N	N	N	\$ -	\$ -
S2405		C	XXX	N	N	N	N	N	\$ -	\$ -
S2409		C	XXX	N	N	N	N	N	\$ -	\$ -
S2411		C	XXX	N	N	N	N	N	\$ -	\$ -
S2900		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3000		C	XXX	N	N	N	N	N	\$ -	\$ -
S3005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3600		C	XXX	N	N	N	N	N	\$ -	\$ -
S3601		C	XXX	N	N	N	N	N	\$ -	\$ -
S3620		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3630		C	XXX	N	N	N	N	N	\$ -	\$ -
S3645		C	XXX	N	N	N	N	N	\$ -	\$ -
S3650		C	XXX	N	N	N	N	N	\$ -	\$ -
S3652		C	XXX	N	N	N	N	N	\$ -	\$ -
S3655		C	XXX	N	N	N	N	N	\$ -	\$ -
S3708		C	XXX	N	N	N	N	N	\$ -	\$ -
S3722		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3800		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3840		C	XXX	N	N	N	N	N	\$ -	\$ -
S3841		C	XXX	N	N	N	N	N	\$ -	\$ -
S3842		C	XXX	N	N	N	N	N	\$ -	\$ -
S3844		C	XXX	N	N	N	N	N	\$ -	\$ -
S3845		C	XXX	N	N	N	N	N	\$ -	\$ -
S3846		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S3849		C	XXX	N	N	N	N	N	\$ -	\$ -
S3850		C	XXX	N	N	N	N	N	\$ -	\$ -
S3852		C	XXX	N	N	N	N	N	\$ -	\$ -
S3853		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3854		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3861		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3865		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3866		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3870		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S3900		C	XXX	N	N	N	N	N	\$ -	\$ -
S3902		C	XXX	N	N	N	N	N	\$ -	\$ -
S3904		C	XXX	N	N	N	N	N	\$ -	\$ -
S4005		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4011		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4015		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4016		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4017		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4018		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4021		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4022		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4023		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4025		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4026		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4027		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4028		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4030		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4031		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4042		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4981		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4989		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4990		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4991		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4993		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S4995		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5000		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S5010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5012		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5013		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5014		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5036		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5100		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5101		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5102		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5105		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5108		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5109		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5111		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5115		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5116		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5120		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5121		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5125	C		XXX	N	N	N	N	N	\$ -	\$ -
S5126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5130	C		XXX	N	N	N	N	N	\$ -	\$ -
S5131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5135	C		XXX	N	N	N	N	N	\$ -	\$ -
S5136		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5140		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5141		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5146		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5151		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5160		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5161	C		XXX	N	N	N	N	N	\$ -	\$ -
S5162		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5165	C		XXX	N	N	N	N	N	\$ -	\$ -
S5170		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5175		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5180		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5181		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5185		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5190	C		XXX	N	N	N	N	N	\$ -	\$ -
S5199		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5497		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S5498		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5501		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5502		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5517		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5518		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5520		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5521		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5522		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5523		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5550		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5551		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5552		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5553		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5560		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5561		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5565		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5566		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5570		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S5571		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8030		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8035		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8037		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8040		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8042		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8055		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8080		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8085		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8092		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8096		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8097		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8100		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8101		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8120		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8121		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8130		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8185		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8186		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8189		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8210		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8265		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S8270		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8301		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8415		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8420		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8421		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8422		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8423		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8424		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8425		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8426		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8427		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8428		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8429		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8430		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8431		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8450		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8451		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8452		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8460		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8490		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8930		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8940		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8948		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8950		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8990		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S8999		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9001		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9007		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9024		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9025		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9034		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9055		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9056		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9061		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9083		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9088		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9097		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9098		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9117		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9122		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S9123		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9124		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9125		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9126		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9127		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9128		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9129		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9131		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9140		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9141		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9145		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9152		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9208		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9209		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9211		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9212		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9213		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9214		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9325		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9326		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9327		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9328		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9329		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9330		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9331		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9335		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9336		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9338		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9339		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9340		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9341		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9342		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9343		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9345		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9346		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9347		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9348		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9349		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9351		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9353		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9355		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S9357		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9359		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9361		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9363		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9364		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9365		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9366		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9367		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9368		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9370		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9372		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9373		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9374		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9375		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9376		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9377		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9379		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9381		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9401		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9430		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9433		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9434		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9435	C		XXX	N	N	N	N	N	\$ -	\$ -
S9436		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9437		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9438		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9439		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9441		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9442	C		XXX	N	N	N	N	N	\$ -	\$ -
S9443		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9444	C		XXX	N	N	N	N	N	\$ -	\$ -
S9445	C		XXX	N	N	N	N	N	\$ -	\$ -
S9446		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9447		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9449	C		XXX	N	N	N	N	N	\$ -	\$ -
S9451	C		XXX	N	N	N	N	N	\$ -	\$ -
S9452	C		XXX	N	N	N	N	N	\$ -	\$ -
S9453		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9454		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9455		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9460		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9465		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S9470		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9472		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9473		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9474		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9475		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9476		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9480		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9482		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9484		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9485		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9490		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9494		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9497		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9500		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9501		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9502		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9503		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9504		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9529	C		XXX	N	N	N	N	N	\$ -	\$ -
S9537		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9538		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9542		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9558		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9559		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9560		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9562		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9590		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9810		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9900		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9901		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9960		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9961		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9970		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9975		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9976		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9977		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9981		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9982		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9986		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9988		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9989		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9990		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor services
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
S9991		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9992		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9994		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9996		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
S9999		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
T4545		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
U0001	C		XXX	N	N	N	N	N	\$ -	\$ -
U0002	C		XXX	N	N	N	N	N	\$ -	\$ -
U0003	C		XXX	N	N	N	N	N	\$ -	\$ -
U0004	C		XXX	N	N	N	N	N	\$ -	\$ -
U0005	C		XXX	N	N	N	N	N	\$ -	\$ -
V2020	C		XXX	N	N	N	N	N	\$ -	\$ -
V2025		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2100	C		XXX	N	N	N	N	N	\$ -	\$ -
V2101	C		XXX	N	N	N	N	N	\$ -	\$ -
V2102	C		XXX	N	N	N	N	N	\$ -	\$ -
V2103	C		XXX	N	N	N	N	N	\$ -	\$ -
V2104	C		XXX	N	N	N	N	N	\$ -	\$ -
V2105	C		XXX	N	N	N	N	N	\$ -	\$ -
V2106	C		XXX	N	N	N	N	N	\$ -	\$ -
V2107	C		XXX	N	N	N	N	N	\$ -	\$ -
V2108	C		XXX	N	N	N	N	N	\$ -	\$ -
V2109	C		XXX	N	N	N	N	N	\$ -	\$ -
V2110	C		XXX	N	N	N	N	N	\$ -	\$ -
V2111	C		XXX	N	N	N	N	N	\$ -	\$ -
V2112	C		XXX	N	N	N	N	N	\$ -	\$ -
V2113	C		XXX	N	N	N	N	N	\$ -	\$ -
V2114	C		XXX	N	N	N	N	N	\$ -	\$ -
V2115	C		XXX	N	N	N	N	N	\$ -	\$ -
V2118	C		XXX	N	N	N	N	N	\$ -	\$ -
V2121	C		XXX	N	N	N	N	N	\$ -	\$ -
V2199		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
V2200	C		XXX	N	N	N	N	N	\$ -	\$ -
V2201	C		XXX	N	N	N	N	N	\$ -	\$ -
V2202	C		XXX	N	N	N	N	N	\$ -	\$ -
V2203	C		XXX	N	N	N	N	N	\$ -	\$ -
V2204	C		XXX	N	N	N	N	N	\$ -	\$ -
V2205	C		XXX	N	N	N	N	N	\$ -	\$ -
V2206	C		XXX	N	N	N	N	N	\$ -	\$ -
V2207	C		XXX	N	N	N	N	N	\$ -	\$ -
V2208	C		XXX	N	N	N	N	N	\$ -	\$ -
V2209	C		XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
V2210		C	XXX	N	N	N	N	N	\$ -	\$ -
V2211		C	XXX	N	N	N	N	N	\$ -	\$ -
V2212		C	XXX	N	N	N	N	N	\$ -	\$ -
V2213		C	XXX	N	N	N	N	N	\$ -	\$ -
V2214		C	XXX	N	N	N	N	N	\$ -	\$ -
V2215		C	XXX	N	N	N	N	N	\$ -	\$ -
V2218		C	XXX	N	N	N	N	N	\$ -	\$ -
V2219		C	XXX	N	N	N	N	N	\$ -	\$ -
V2220		C	XXX	N	N	N	N	N	\$ -	\$ -
V2221		C	XXX	N	N	N	N	N	\$ -	\$ -
V2299		C	XXX	N	N	N	N	N	\$ -	\$ -
V2300		C	XXX	N	N	N	N	N	\$ -	\$ -
V2301		C	XXX	N	N	N	N	N	\$ -	\$ -
V2302		C	XXX	N	N	N	N	N	\$ -	\$ -
V2303		C	XXX	N	N	N	N	N	\$ -	\$ -
V2304		C	XXX	N	N	N	N	N	\$ -	\$ -
V2305		C	XXX	N	N	N	N	N	\$ -	\$ -
V2306		C	XXX	N	N	N	N	N	\$ -	\$ -
V2307		C	XXX	N	N	N	N	N	\$ -	\$ -
V2308		C	XXX	N	N	N	N	N	\$ -	\$ -
V2309		C	XXX	N	N	N	N	N	\$ -	\$ -
V2310		C	XXX	N	N	N	N	N	\$ -	\$ -
V2311		C	XXX	N	N	N	N	N	\$ -	\$ -
V2312		C	XXX	N	N	N	N	N	\$ -	\$ -
V2313		C	XXX	N	N	N	N	N	\$ -	\$ -
V2314		C	XXX	N	N	N	N	N	\$ -	\$ -
V2315		C	XXX	N	N	N	N	N	\$ -	\$ -
V2318		C	XXX	N	N	N	N	N	\$ -	\$ -
V2319		C	XXX	N	N	N	N	N	\$ -	\$ -
V2320		C	XXX	N	N	N	N	N	\$ -	\$ -
V2321		C	XXX	N	N	N	N	N	\$ -	\$ -
V2399		C	XXX	N	N	N	N	N	\$ -	\$ -
V2410		C	XXX	N	N	N	N	N	\$ -	\$ -
V2430		C	XXX	N	N	N	N	N	\$ -	\$ -
V2499		C	XXX	N	N	N	N	N	\$ -	\$ -
V2500		C	XXX	N	N	N	N	N	\$ -	\$ -
V2501		C	XXX	N	N	N	N	N	\$ -	\$ -
V2502		C	XXX	N	N	N	N	N	\$ -	\$ -
V2503		C	XXX	N	N	N	N	N	\$ -	\$ -
V2510		C	XXX	N	N	N	N	N	\$ -	\$ -
V2511		C	XXX	N	N	N	N	N	\$ -	\$ -
V2512		C	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina	Glob	Mult	Bilat	Asst	Co-	Team	Conversion Factors	
		2020							Days	Proc
		Status							31.83	OB/GYN
		Code							Facility	Non-Facility
V2513		C	XXX	N	N	N	N	N	\$ -	\$ -
V2520		C	XXX	N	N	N	N	N	\$ -	\$ -
V2521		C	XXX	N	N	N	N	N	\$ -	\$ -
V2522		C	XXX	N	N	N	N	N	\$ -	\$ -
V2523		C	XXX	N	N	N	N	N	\$ -	\$ -
V2524		C	XXX	N	N	N	N	N	\$ -	\$ -
V2530		C	XXX	N	N	N	N	N	\$ -	\$ -
V2531		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2599		C	XXX	N	N	N	N	N	\$ -	\$ -
V2600		C	XXX	N	N	N	N	N	\$ -	\$ -
V2610		C	XXX	N	N	N	N	N	\$ -	\$ -
V2615		C	XXX	N	N	N	N	N	\$ -	\$ -
V2623		C	XXX	N	N	N	N	N	\$ -	\$ -
V2624		C	XXX	N	N	N	N	N	\$ -	\$ -
V2625		C	XXX	N	N	N	N	N	\$ -	\$ -
V2626		C	XXX	N	N	N	N	N	\$ -	\$ -
V2627		C	XXX	N	N	N	N	N	\$ -	\$ -
V2628		C	XXX	N	N	N	N	N	\$ -	\$ -
V2629		C	XXX	N	N	N	N	N	\$ -	\$ -
V2630		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2631		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2632		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2700		C	XXX	N	N	N	N	N	\$ -	\$ -
V2702		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2710		C	XXX	N	N	N	N	N	\$ -	\$ -
V2715		C	XXX	N	N	N	N	N	\$ -	\$ -
V2718		C	XXX	N	N	N	N	N	\$ -	\$ -
V2730		C	XXX	N	N	N	N	N	\$ -	\$ -
V2744		C	XXX	N	N	N	N	N	\$ -	\$ -
V2745		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2750		C	XXX	N	N	N	N	N	\$ -	\$ -
V2755		C	XXX	N	N	N	N	N	\$ -	\$ -
V2756		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2760		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2761		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2762		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2770		C	XXX	N	N	N	N	N	\$ -	\$ -
V2780		C	XXX	N	N	N	N	N	\$ -	\$ -
V2781		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2782		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2783		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2784		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T - Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
V2785		C	XXX	N	N	N	N	N	\$ -	\$ -
V2786		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2787		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2788		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2790		C	XXX	N	N	N	N	N	\$ -	\$ -
V2797		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V2799		Unlstd/Manual	XXX	N	N	N	N	N	\$ -	\$ -
V5008		C	XXX	N	N	N	N	N	\$ -	\$ -
V5010		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5011		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5014		C	XXX	N	N	N	N	N	\$ -	\$ -
V5020		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5030		C	XXX	N	N	N	N	N	\$ -	\$ -
V5040		C	XXX	N	N	N	N	N	\$ -	\$ -
V5050		C	XXX	N	N	N	N	N	\$ -	\$ -
V5060		C	XXX	N	N	N	N	N	\$ -	\$ -
V5070		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5080		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5090		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5095		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5100		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5110		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5120		C	XXX	N	N	N	N	N	\$ -	\$ -
V5130		C	XXX	N	N	N	N	N	\$ -	\$ -
V5140		C	XXX	N	N	N	N	N	\$ -	\$ -
V5150		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5160		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5171		A	XXX	N	N	N	N	N	\$ -	\$ -
V5172		A	XXX	N	N	N	N	N	\$ -	\$ -
V5181		A	XXX	N	N	N	N	N	\$ -	\$ -
V5190		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5200		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5211		A	XXX	N	N	N	N	N	\$ -	\$ -
V5212		A	XXX	N	N	N	N	N	\$ -	\$ -
V5213		A	XXX	N	N	N	N	N	\$ -	\$ -
V5214		A	XXX	N	N	N	N	N	\$ -	\$ -
V5215		A	XXX	N	N	N	N	N	\$ -	\$ -
V5221		A	XXX	N	N	N	N	N	\$ -	\$ -
V5230		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5240		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5241		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5242		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. A - Active Code
- 2. B - Bundled code
- 3. C - Carrier-Priced
- 4. T- Injections and other minor servi
- 5. Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.
- 6. Manual - Claims are pended for review and pricing.
- 7. CLFS - Rate may be found on the Clinical Lab Fee Schedule.
- 8. Cost Invoice - A cost invoice must be submitted with the claim for payment
- 9. E- Excluded from PFS by regulation

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
V5243		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5244		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5245		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5246	C		XXX	N	N	N	N	N	\$ -	\$ -
V5247	C		XXX	N	N	N	N	N	\$ -	\$ -
V5248		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5249		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5250		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5251		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5252	C		XXX	N	N	N	N	N	\$ -	\$ -
V5253	C		XXX	N	N	N	N	N	\$ -	\$ -
V5254		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5255		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5256	C		XXX	N	N	N	N	N	\$ -	\$ -
V5257	C		XXX	N	N	N	N	N	\$ -	\$ -
V5258		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5259		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5260	C		XXX	N	N	N	N	N	\$ -	\$ -
V5261	C		XXX	N	N	N	N	N	\$ -	\$ -
V5262		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5263		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5264	C		XXX	N	N	N	N	N	\$ -	\$ -
V5265		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5266	C		XXX	N	N	N	N	N	\$ -	\$ -
V5267		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5268		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5269		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5270		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5271		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5272		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5273		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5274		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5275	C		XXX	N	N	N	N	N	\$ -	\$ -
V5281		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5282		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5283		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5284		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5285		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5286		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5287		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5288		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5289		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -

2021 National Physician Fee Schedule Relative Value File January Release
 CPT codes and descriptions only are copyright 2019 American Medical Association. All Rights Reserved.
 Applicable FARS/DFARS Apply.
 Dental codes (D codes) are copyright 2020/21 American Dental Association. All Rights Reserved.

RELEASED 12/07/2020

Status Codes:

- 1. **A - Active Code**
- 2. **B - Bundled code**
- 3. **C - Carrier-Priced**
- 4. **T- Injections and other minor servi**
- 5. **Unlstd/Manual - Per BMS policy unlisted codes require a PA and are reviewed and manually priced.**
- 6. **Manual - Claims are pended for review and pricing.**
- 7. **CLFS - Rate may be found on the Clinical Lab Fee Schedule.**
- 8. **Cost Invoice - A cost invoice must be submitted with the claim for payment**
- 9. **E- Excluded from PFS by regulation**

10. X - Statutory Exclusion

HCPCS	Modifier	Molina 2020 Status Code	Glob Days	Mult Proc	Bilat Surg	Asst Surg	Co- Surg	Team Surg	Conversion Factors	
									24.10 31.83 Facility	Statewide OB/GYN Non-Facility
V5290		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5298		C	XXX	N	N	N	N	N	\$ -	\$ -
V5299		C	XXX	N	N	D	N	N	\$ -	\$ -
V5336		C	XXX	N	N	N	N	N	\$ -	\$ -
V5362		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5363		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -
V5364		Not Covered	XXX	N	N	N	N	N	\$ -	\$ -