Temporary Appendix C for Administrative Order No. 16-059

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
10021	Y	$136.66
10022	Y	$172.06
10030	Y	$954.54
10035	N	packaged
10036	N	packaged
10040	N	packaged
10060	Y	$122.62
10061	Y	$205.57
10080	Y	$236.32
10081	Y	$315.53
10120	Y	$196.67
10121	Y	$1,458.18
10140	Y	$185.01
10160	Y	$151.86
10180	Y	$1,458.18
11000	Y	$59.92
11001	N	packaged
11004	Y	80% of billed
11005	Y	80% of billed
11006	Y	80% of billed
11008	Y	80% of billed
11010	Y	$954.54
11011	Y	$236.32
11012	Y	$1,458.18
11042	Y	$234.75
11043	Y	$445.49
11044	Y	$954.54
11045	N	packaged
11046	N	packaged
11047	N	packaged
11055	N	packaged
11056	N	packaged
11057	Y	$78.00
11100	Y	$134.01
11101	N	packaged
11200	N	packaged
11201	N	packaged
11300	N	packaged
11301	N	packaged
11302	N	packaged
11303	N	packaged
11305	N	packaged
11306	N	packaged
11307	Y	$181.32
11308	N	packaged
11310	Y	$153.34
11311	Y	$126.67
11312	Y	$203.99
11313	Y	$222.67
11400	Y	$164.07
11401	Y	$182.01
11402	Y	$199.94
11403	Y	$212.26
11404	Y	$954.54
11406	Y	$1,458.18
11420	Y	$149.96
11421	Y	$179.17
11422	Y	$197.33
11423	Y	$216.15
11424	Y	$1,458.18
11426	Y	$1,458.18
11440	Y	$175.37
11441	Y	$199.94
11442	Y	$213.57
11443	Y	$236.94
11444	Y	$954.54
11446	Y	$1,458.18
11450	Y	$1,458.18
11451	Y	$1,458.18
11462	Y	$1,458.18
11463	Y	$1,458.18
11470	Y	$1,458.18
11471	Y	$1,458.18
11600	Y	$231.74
11601	Y	$271.69
11602	Y	$292.94
11603	Y	$309.62
11604	Y	$954.54

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
11606	Y	$1,458.18
11620	Y	$234.34
11621	Y	$266.79
11622	Y	$291.45
11623	Y	$320.67
11624	Y	$1,458.18
11626	Y	$1,458.18
11640	Y	$244.08
11641	Y	$282.32
11642	Y	$311.54
11643	Y	$333.66
11644	Y	$954.54
11646	Y	$1,458.18
11719	N	packaged
11720	N	packaged
11721	N	packaged
11730	N	packaged
11732	N	packaged
11740	N	packaged
11750	Y	$226.13
11752	Y	$340.79
11755	Y	$158.10
11760	Y	$445.49
11762	Y	$317.67
11765	N	packaged
11770	Y	$1,458.18
11771	Y	$1,458.18
11772	Y	$1,458.18
11900	N	packaged
11901	N	packaged
11920	Y	$199.72
11921	Y	$228.35
11922	N	packaged
11950	Y	$78.00
11951	Y	$91.20
11952	Y	$118.50
11954	Y	$157.34
11960	Y	$2,198.27
11970	Y	$3,615.56
11971	N	$1,458.18
11976	N	$135.93
11980	N	packaged
11981	N	packaged
11982	N	packaged
11983	N	packaged
12001	N	packaged
12002	N	packaged
12004	N	packaged
12005	N	$122.62
12006	N	$122.62
12007	Y	$234.75
12011	N	packaged
12013	N	packaged
12014	N	packaged
12015	N	$122.62
12016	N	$122.62
12017	N	$122.62
12018	N	$122.62
12020	Y	$445.49
12021	Y	$445.49
12031	Y	$234.75
12032	Y	$234.75
12034	Y	$234.75
12035	Y	$234.75
12036	Y	$445.49
12037	Y	$1,464.09
12041	N	$122.62
12042	Y	$234.75
12044	Y	$234.75
12045	Y	$234.75
12046	Y	$234.75
12047	Y	$445.49
12051	Y	$234.75
12052	Y	$234.75
12053	Y	$234.75
12054	N	$122.62
12055	Y	$234.75
12056	N	$122.62

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
12057	Y	$234.75
13100	Y	$1,464.09
13101	Y	$445.49
13102	N	packaged
13120	Y	$445.49
13121	Y	$445.49
13122	N	packaged
13131	Y	$445.49
13132	Y	$445.49
13133	N	packaged
13151	Y	$445.49
13152	Y	$445.49
13153	N	packaged
13160	Y	$2,198.27
14000	Y	$1,464.09
14001	Y	$1,464.09
14020	Y	$1,464.09
14021	Y	$1,464.09
14040	Y	$1,464.09
14041	Y	$1,464.09
14060	Y	$1,464.09
14061	Y	$1,464.09
14301	Y	$2,198.27
14302	N	packaged
14350	Y	$2,198.27
15002	Y	$1,464.09
15003	N	packaged
15004	Y	$445.49
15005	N	packaged
15040	Y	$445.49
15050	Y	$445.49
15100	Y	$2,198.27
15101	N	packaged
15110	Y	$1,464.09
15111	N	packaged
15115	Y	$1,464.09
15116	N	packaged
15120	Y	$2,198.27
15121	N	packaged
15130	Y	$1,464.09
15131	N	packaged
15135	Y	$1,464.09
15136	N	packaged
15150	Y	$2,198.27
15151	N	packaged
15152	N	packaged
15155	Y	$1,464.09
15156	N	packaged
15157	N	packaged
15200	Y	$2,198.27
15201	N	packaged
15220	Y	$1,464.09
15221	N	packaged
15240	Y	$1,464.09
15241	N	packaged
15260	Y	$1,464.09
15261	N	packaged
15271	Y	$1,464.09
15272	N	packaged
15273	Y	$2,198.27
15274	N	packaged
15275	Y	$1,464.09
15276	N	packaged
15277	Y	$2,198.27
15278	N	packaged
15570	Y	$2,198.27
15572	Y	$2,198.27
15574	Y	$1,464.09
15576	Y	$1,464.09
15600	Y	$2,198.27
15610	Y	$2,198.27
15620	Y	$2,198.27
15630	Y	$1,464.09
15650	Y	$2,198.27
15731	Y	$2,198.27
15732	Y	$2,198.27
15734	Y	$2,198.27
15736	Y	$1,464.09

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
15738	Y	$2,198.27
15740	Y	$1,464.09
15750	Y	$1,464.09
15756	Y	80% of billed
15757	Y	80% of billed
15758	Y	80% of billed
15760	Y	$2,198.27
15770	Y	$2,198.27
15775	Y	$234.75
15776	Y	$234.75
15777	N	packaged
15780	Y	$923.33
15781	Y	$498.41
15782	Y	$871.16
15783	Y	$445.49
15786	N	packaged
15787	N	packaged
15788	N	packaged
15789	Y	$234.75
15792	N	packaged
15793	N	packaged
15819	Y	$1,464.09
15820	Y	$1,464.09
15821	Y	$1,464.09
15822	Y	$1,464.09
15823	Y	$1,464.09
15824	Y	$2,198.27
15825	Y	$2,198.27
15826	Y	$1,464.09
15828	Y	$2,198.27
15829	Y	$2,198.27
15830	Y	$3,710.51
15832	Y	$1,458.18
15833	Y	$1,458.18
15834	Y	$1,458.18
15835	Y	$1,458.18
15836	Y	$1,458.18
15837	Y	$1,458.18
15838	Y	$1,458.18
15839	Y	$1,458.18
15840	Y	$2,198.27
15841	Y	$2,198.27
15842	Y	$1,464.09
15845	Y	$2,198.27
15847	N	packaged
15850	Y	$1,464.09
15851	Y	$122.49
15852	N	packaged
15860	N	packaged
15876	Y	$2,198.27
15877	Y	$2,198.27
15878	Y	$2,198.27
15879	Y	$2,198.27
15920	Y	$1,458.18
15922	Y	$1,464.09
15931	Y	$1,458.18
15933	Y	$1,458.18
15934	Y	$1,464.09
15935	Y	$2,198.27
15936	Y	$1,464.09
15937	Y	$2,198.27
15940	Y	$1,458.18
15941	Y	$1,458.18
15944	Y	$2,198.27
15945	Y	$2,198.27
15946	Y	$2,198.27
15950	Y	$1,458.18
15951	Y	$1,458.18
15952	Y	$1,464.09
15953	Y	$2,198.27
15956	Y	$1,464.09
15958	Y	$1,464.09
15999	Y	$236.35
16000	N	packaged
16020	N	packaged
16025	Y	$234.75
16030	Y	$234.75
16035	Y	$445.49

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
16036	Y	80% of billed
17000	N	packaged
17003	N	packaged
17004	Y	$179.33
17106	Y	$366.14
17107	Y	$445.49
17108	Y	$634.70
17110	N	packaged
17111	N	packaged
17250	N	packaged
17260	N	packaged
17261	N	packaged
17262	N	packaged
17263	N	packaged
17264	Y	$234.75
17266	Y	$256.98
17270	Y	$180.01
17271	Y	$190.67
17272	N	packaged
17273	Y	$232.66
17274	Y	$262.96
17276	Y	$290.26
17280	N	packaged
17281	Y	$201.34
17282	Y	$226.67
17283	Y	$234.75
17284	Y	$234.75
17286	Y	$234.75
17311	Y	$445.49
17312	N	packaged
17313	Y	$445.49
17314	N	packaged
17315	N	packaged
17340	N	packaged
17360	N	packaged
17380	Y	$445.49
17999	Y	$122.64
19000	Y	$150.11
19001	N	packaged
19020	Y	$1,458.18
19030	N	packaged
19081	Y	$954.54
19082	N	packaged
19083	Y	$954.54
19084	N	packaged
19085	Y	$1,458.18
19086	N	packaged
19100	Y	$954.54
19101	Y	$2,267.91
19105	Y	$3,682.29
19110	Y	$2,267.91
19112	Y	$2,267.91
19120	Y	$2,267.91
19125	Y	$2,267.91
19126	N	packaged
19260	Y	$1,458.43
19271	Y	80% of billed
19272	Y	80% of billed
19281	N	packaged
19282	N	packaged
19283	N	packaged
19284	N	packaged
19285	N	packaged
19286	N	packaged
19287	N	packaged
19288	N	packaged
19296	Y	$3,906.25
19297	N	packaged
19298	Y	$3,906.25
19300	Y	$2,267.91
19301	Y	$2,267.91
19302	Y	$3,710.51
19303	Y	$3,710.51
19304	Y	$2,267.91
19305	Y	80% of billed
19306	Y	80% of billed
19307	Y	$3,711.16
19316	Y	$3,710.51

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
19318	Y	$3,710.51
19324	Y	$3,710.51
19325	Y	$3,906.25
19328	N	$2,267.91
19330	N	$2,267.91
19340	Y	$3,710.51
19342	Y	$3,906.25
19350	Y	$2,267.91
19355	Y	$2,267.91
19357	Y	$3,906.25
19361	Y	80% of billed
19364	Y	80% of billed
19366	Y	$3,710.51
19367	Y	80% of billed
19368	Y	80% of billed
19369	Y	80% of billed
19370	Y	$3,710.51
19371	Y	$2,267.91
19380	Y	$3,710.51
19396	Y	$2,267.91
19499	Y	$2,268.31
20005	Y	$1,458.18
20100	Y	$713.24
20101	Y	$2,198.64
20102	Y	$1,464.36
20103	Y	$954.54
20150	Y	$2,381.67
20200	Y	$1,458.18
20205	Y	$1,458.18
20206	Y	$954.54
20220	Y	$954.54
20225	Y	$1,458.18
20240	Y	$1,458.18
20245	Y	$1,458.18
20250	Y	$2,381.67
20251	Y	$2,381.67
20500	Y	$103.33
20501	N	packaged
20520	Y	$235.63
20525	Y	$1,458.18
20526	Y	$73.98
20527	Y	$82.66
20550	Y	$55.98
20551	Y	$58.65
20552	Y	$55.98
20553	Y	$65.31
20555	Y	$1,498.14
20600	Y	$42.00
20604	Y	$71.32
20605	Y	$44.66
20606	Y	$77.32
20610	Y	$53.98
20611	Y	$89.98
20612	Y	$62.65
20615	Y	$282.37
20650	Y	$2,381.67
20660	Y	$1,133.19
20661	Y	80% of billed
20662	Y	$1,498.14
20663	Y	$2,381.67
20664	Y	80% of billed
20665	N	$94.81
20670	N	$1,458.18
20680	N	$1,458.18
20690	Y	$3,615.56
20692	Y	$4,689.61
20693	Y	$2,381.67
20694	N	$1,498.14
20696	Y	$7,190.01
20697	Y	$1,132.99
20802	Y	80% of billed
20805	Y	80% of billed
20808	Y	80% of billed
20816	Y	80% of billed
20822	Y	$2,381.67
20824	Y	80% of billed
20827	Y	80% of billed
20838	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
20900	Y	$2,381.67
20902	Y	$4,689.61
20910	Y	$445.49
20912	Y	$2,198.27
20920	Y	$1,464.09
20922	Y	$2,198.27
20924	Y	$2,381.67
20926	Y	$2,198.27
20930	N	packaged
20931	N	packaged
20936	N	packaged
20937	N	packaged
20938	N	packaged
20950	Y	$498.41
20955	Y	80% of billed
20956	Y	80% of billed
20957	Y	80% of billed
20962	Y	80% of billed
20969	Y	80% of billed
20970	Y	80% of billed
20972	Y	$3,615.56
20973	Y	$3,615.56
20974	Y	80% of billed
20975	N	packaged
20979	N	packaged
20982	Y	$2,381.67
20983	Y	$3,236.18
20985	N	packaged
20999	Y	$1,498.42
21010	Y	$3,578.58
21011	Y	$419.34
21012	Y	$1,458.18
21013	Y	$554.36
21014	Y	$1,458.18
21015	Y	$1,458.18
21016	Y	$1,458.18
21025	Y	$3,578.58
21026	Y	$1,666.41
21029	Y	$1,666.41
21030	Y	$616.64
21031	Y	$503.06
21032	Y	$512.32
21034	Y	$3,578.58
21040	Y	$1,666.41
21044	Y	$3,578.58
21045	Y	80% of billed
21046	Y	$3,578.58
21047	Y	$3,578.58
21048	Y	$3,578.58
21049	Y	$3,970.33
21050	Y	$3,578.58
21060	Y	$3,578.58
21070	Y	$3,578.58
21073	Y	$477.60
21076	Y	$713.12
21077	Y	$2,172.65
21079	Y	$1,490.65
21080	Y	$1,676.41
21081	Y	$1,565.85
21082	Y	$1,535.65
21083	Y	$1,506.08
21084	Y	$1,708.54
21085	Y	$713.12
21086	Y	$1,628.21
21087	Y	$1,623.71
21088	Y	$3,578.58
21089	Y	$134.28
21100	Y	$3,578.58
21110	N	$713.12
21116	N	packaged
21120	Y	$3,578.58
21121	Y	$1,666.41
21122	Y	$1,666.41
21123	Y	$1,666.41
21125	Y	$1,666.41
21127	Y	$3,578.58
21137	Y	$1,666.41
21138	Y	$3,578.58

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
21139	Y	$3,578.58
21141	Y	80% of billed
21142	Y	80% of billed
21143	Y	80% of billed
21145	Y	80% of billed
21146	Y	80% of billed
21147	Y	80% of billed
21150	Y	$3,578.58
21151	Y	80% of billed
21154	Y	80% of billed
21155	Y	80% of billed
21159	Y	80% of billed
21160	Y	80% of billed
21172	Y	$3,970.33
21175	Y	$3,970.33
21179	Y	80% of billed
21180	Y	80% of billed
21181	Y	$3,578.58
21182	Y	80% of billed
21183	Y	80% of billed
21184	Y	80% of billed
21188	Y	80% of billed
21193	Y	$3,970.33
21194	Y	80% of billed
21195	Y	$3,970.33
21196	Y	80% of billed
21198	Y	$1,666.41
21199	Y	$3,578.58
21206	Y	$3,578.58
21208	Y	$3,578.58
21209	Y	$3,578.58
21210	Y	$3,578.58
21215	Y	$3,578.58
21230	Y	$3,578.58
21235	Y	$1,666.41
21240	Y	$3,578.58
21242	Y	$3,578.58
21243	Y	$7,190.01
21244	Y	$3,578.58
21245	Y	$3,578.58
21246	Y	$3,578.58
21247	Y	80% of billed
21248	Y	$3,578.58
21249	Y	$3,578.58
21255	Y	80% of billed
21256	Y	$3,970.33
21260	Y	$3,578.58
21261	Y	$3,970.33
21263	Y	$3,970.33
21267	Y	$3,578.58
21268	Y	80% of billed
21270	Y	$3,578.58
21275	Y	$3,578.58
21280	Y	$3,578.58
21282	Y	$1,666.41
21295	Y	$713.12
21296	Y	$1,666.41
21299	Y	$134.28
21310	Y	$134.26
21315	Y	$1,666.41
21320	Y	$1,666.41
21325	Y	$1,666.41
21330	Y	$1,666.41
21335	Y	$1,666.41
21336	Y	$2,381.67
21337	Y	$1,666.41
21338	Y	$3,578.58
21339	Y	$1,666.41
21340	Y	$3,578.58
21343	Y	80% of billed
21344	Y	80% of billed
21345	Y	$713.12
21346	Y	$3,970.33
21347	Y	80% of billed
21348	Y	80% of billed
21355	Y	$3,578.58
21356	Y	$1,666.41
21360	Y	$3,578.58

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
21365	Y	$3,970.33
21366	Y	80% of billed
21385	Y	$3,970.33
21386	Y	$3,970.33
21387	Y	$3,970.33
21390	Y	$3,578.58
21395	Y	$3,970.33
21400	Y	$713.12
21401	Y	$713.12
21406	Y	$3,578.58
21407	Y	$3,578.58
21408	Y	$3,970.33
21421	Y	$3,578.58
21422	Y	80% of billed
21423	Y	80% of billed
21431	Y	80% of billed
21432	Y	80% of billed
21433	Y	80% of billed
21435	Y	80% of billed
21436	Y	80% of billed
21440	Y	$843.74
21445	Y	$3,578.58
21450	Y	$324.93
21451	Y	$1,666.41
21452	Y	$1,666.41
21453	Y	$3,578.58
21454	Y	$3,578.58
21461	Y	$3,578.58
21462	Y	$3,578.58
21465	Y	$3,578.58
21470	Y	$3,970.33
21480	Y	$134.26
21485	Y	$713.12
21490	Y	$3,578.58
21495	Y	$1,666.41
21497	Y	$713.12
21499	Y	$134.28
21501	Y	$1,458.18
21502	Y	$1,498.14
21510	Y	80% of billed
21550	Y	$954.54
21552	Y	$1,458.18
21554	Y	$1,458.18
21555	Y	$1,458.18
21556	Y	$1,458.18
21557	Y	$1,458.18
21558	Y	$1,458.18
21600	Y	$2,381.67
21610	Y	$1,498.14
21615	Y	80% of billed
21616	Y	80% of billed
21620	Y	80% of billed
21627	Y	80% of billed
21630	Y	80% of billed
21632	Y	80% of billed
21685	Y	$1,666.41
21700	Y	$1,498.14
21705	Y	80% of billed
21720	Y	$1,498.14
21725	Y	$236.32
21740	Y	80% of billed
21742	Y	$2,382.09
21743	Y	$2,382.09
21750	Y	80% of billed
21811	Y	$1,498.42
21812	Y	$1,498.42
21813	Y	$1,498.42
21820	Y	$179.15
21825	Y	80% of billed
21899	Y	$134.28
21920	Y	$319.38
21925	Y	$1,458.18
21930	Y	$1,458.18
21931	Y	$1,458.18
21932	Y	$1,458.18
21933	Y	$1,458.18
21935	Y	$1,458.18
21936	Y	$1,458.18

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
22010	Y	80% of billed
22015	Y	80% of billed
22100	Y	$2,382.09
22101	Y	$2,382.09
22102	Y	$2,381.67
22103	N	packaged
22110	Y	80% of billed
22112	Y	80% of billed
22114	Y	80% of billed
22116	Y	80% of billed
22206	Y	80% of billed
22207	Y	80% of billed
22208	Y	80% of billed
22210	Y	80% of billed
22212	Y	80% of billed
22214	Y	80% of billed
22216	Y	80% of billed
22220	Y	80% of billed
22222	Y	80% of billed
22224	Y	80% of billed
22226	Y	80% of billed
22305	Y	$179.15
22310	Y	$246.89
22315	Y	$1,132.99
22318	Y	80% of billed
22319	Y	80% of billed
22325	Y	80% of billed
22326	Y	80% of billed
22327	Y	80% of billed
22328	Y	80% of billed
22505	Y	$1,132.99
22510	Y	$2,381.67
22511	Y	$2,381.67
22512	N	packaged
22513	Y	$4,689.61
22514	Y	$4,689.61
22515	N	packaged
22526	Y	80% of billed
22527	Y	80% of billed
22532	Y	80% of billed
22533	Y	80% of billed
22534	Y	80% of billed
22548	Y	80% of billed
22551	Y	$7,190.01
22552	N	packaged
22554	Y	$7,190.01
22556	Y	80% of billed
22558	Y	80% of billed
22585	Y	80% of billed
22586	Y	80% of billed
22590	Y	80% of billed
22595	Y	80% of billed
22600	Y	80% of billed
22610	Y	80% of billed
22612	Y	$4,689.61
22614	N	packaged
22630	Y	80% of billed
22632	Y	80% of billed
22633	Y	80% of billed
22634	Y	80% of billed
22800	Y	80% of billed
22802	Y	80% of billed
22804	Y	80% of billed
22808	Y	80% of billed
22810	Y	80% of billed
22812	Y	80% of billed
22818	Y	80% of billed
22819	Y	80% of billed
22830	Y	80% of billed
22840	Y	80% of billed
22841	Y	80% of billed
22842	Y	80% of billed
22843	Y	80% of billed
22844	Y	80% of billed
22845	Y	80% of billed
22846	Y	80% of billed
22847	Y	80% of billed
22848	Y	80% of billed
22849	Y	80% of billed
22850	Y	80% of billed
22851	N	packaged
22852	Y	80% of billed
22853	**N**	**packaged**
22854	**N**	**packaged**
22855	Y	80% of billed
22856	Y	$5,373.08
22857	Y	80% of billed
22858	Y	80% of billed
22859	**N**	**packaged**
22861	Y	80% of billed
22862	Y	80% of billed
22864	Y	80% of billed
22865	Y	80% of billed
22867	**Y**	**$7,597.16**
22868	**N**	**packaged**
22869	**Y**	**$7,597.16**
22870	**N**	**packaged**
22899	Y	$1,498.42
22900	Y	$1,458.18
22901	Y	$1,458.18
22902	Y	$1,458.18
22903	Y	$1,458.18
22904	Y	$1,458.18
22905	Y	$1,458.18
22999	Y	$1,498.42
23000	Y	$1,458.18
23020	Y	$2,381.67
23030	Y	$1,458.18
23031	Y	$1,458.18
23035	Y	$1,498.14
23040	Y	$2,381.67
23044	Y	$2,381.67
23065	Y	$232.49
23066	Y	$1,458.18
23071	Y	$1,458.18
23073	Y	$1,458.18
23075	Y	$1,458.18
23076	Y	$1,458.18
23077	Y	$1,458.18
23078	Y	$1,458.18
23100	Y	$1,498.14
23101	Y	$2,381.67
23105	Y	$2,381.67
23106	Y	$2,381.67
23107	Y	$2,381.67
23120	Y	$2,381.67
23125	Y	$2,381.67
23130	Y	$2,381.67
23140	Y	$1,498.14
23145	Y	$2,381.67
23146	Y	$3,615.56
23150	Y	$2,381.67
23155	Y	$2,381.67
23156	Y	$3,615.56
23170	Y	$1,498.14
23172	Y	$2,381.67
23174	Y	$2,381.67
23180	Y	$2,381.67
23182	Y	$1,498.14
23184	Y	$2,381.67
23190	Y	$2,381.67
23195	Y	$3,615.56
23200	Y	80% of billed
23210	Y	80% of billed
23220	Y	80% of billed
23330	Y	$954.54
23333	Y	$1,458.18
23334	Y	$1,458.18
23335	Y	80% of billed
23350	N	packaged
23395	Y	$4,689.61
23397	Y	$2,381.67
23400	Y	$3,615.56
23405	Y	$2,381.67
23406	Y	$2,381.67
23410	Y	$3,615.56
23412	Y	$3,615.56
23415	Y	$2,381.67
23420	Y	$3,615.56
23430	Y	$3,615.56
23440	Y	$2,381.67
23450	Y	$2,381.67
23455	Y	$3,615.56
23460	Y	$2,381.67
23462	Y	$3,615.56
23465	Y	$4,689.61
23466	Y	$3,615.56
23470	Y	$5,373.08
23472	Y	80% of billed
23473	Y	$5,244.65
23474	Y	80% of billed
23480	Y	$2,381.67
23485	Y	$4,689.61
23490	Y	$4,689.61
23491	Y	$4,689.61
23500	Y	$179.15
23505	Y	$1,132.99
23515	Y	$3,615.56
23520	Y	$1,132.99
23525	Y	$179.15
23530	Y	$2,381.67
23532	Y	$3,615.56
23540	Y	$179.15
23545	Y	$179.15
23550	Y	$3,615.56
23552	Y	$4,689.61
23570	Y	$179.15
23575	Y	$1,132.99
23585	Y	$4,689.61
23600	Y	$179.15
23605	Y	$1,498.14
23615	Y	$4,689.61
23616	Y	$7,190.01
23620	Y	$246.89
23625	Y	$1,132.99
23630	Y	$3,615.56
23650	Y	$179.15
23655	Y	$1,132.99
23660	Y	$2,381.67
23665	Y	$1,132.99
23670	Y	$3,615.56
23675	Y	$1,132.99
23680	Y	$4,689.61
23700	Y	$1,132.99
23800	Y	$4,689.61
23802	Y	$4,689.61
23900	Y	80% of billed
23920	Y	80% of billed
23921	Y	$1,464.09
23929	Y	$179.17
23930	Y	$1,458.18
23931	Y	$1,458.18
23935	Y	$1,498.14
24000	Y	$2,381.67
24006	Y	$2,381.67
24065	Y	$320.33
24066	Y	$1,458.18
24071	Y	$1,458.18
24073	Y	$1,458.18
24075	Y	$1,458.18
24076	Y	$1,458.18
24077	Y	$1,458.18
24079	Y	$1,458.18
24100	Y	$1,498.14
24101	Y	$2,381.67
24102	Y	$2,381.67
24105	Y	$1,498.14
24110	Y	$2,381.67
24115	Y	$2,381.67
24116	Y	$2,381.67
24120	Y	$1,498.14
24125	Y	$2,381.67
24126	Y	$2,381.67
24130	Y	$2,381.67

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
24134	Y	$3,615.56
24136	Y	$2,381.67
24138	Y	$2,381.67
24140	Y	$2,381.67
24145	Y	$2,381.67
24147	Y	$2,381.67
24149	Y	$2,381.67
24150	Y	$2,382.09
24152	Y	$2,381.67
24155	Y	$2,381.67
24160	N	$2,381.67
24164	N	$2,381.67
24200	Y	$252.42
24201	Y	$1,458.18
24220	N	packaged
24300	Y	$1,132.99
24301	Y	$2,381.67
24305	Y	$2,381.67
24310	Y	$2,381.67
24320	Y	$2,381.67
24330	Y	$2,381.67
24331	Y	$2,381.67
24332	Y	$1,498.14
24340	Y	$3,615.56
24341	Y	$2,381.67
24342	Y	$2,381.67
24343	Y	$2,381.67
24344	Y	$3,615.56
24345	Y	$2,381.67
24346	Y	$4,689.61
24357	Y	$1,498.14
24358	Y	$2,381.67
24359	Y	$2,381.67
24360	Y	$3,615.56
24361	Y	$7,190.01
24362	Y	$7,190.01
24363	Y	$7,190.01
24365	Y	$4,689.61
24366	Y	$7,190.01
24370	Y	$7,190.01
24371	Y	$7,190.01
24400	Y	$3,615.56
24410	Y	$7,190.01
24420	Y	$2,381.67
24430	Y	$4,689.61
24435	Y	$7,190.01
24470	Y	$2,381.67
24495	Y	$2,381.67
24498	Y	$4,689.61
24500	Y	$246.89
24505	Y	$1,132.99
24515	Y	$4,689.61
24516	Y	$4,689.61
24530	Y	$246.89
24535	Y	$1,132.99
24538	Y	$2,381.67
24545	Y	$7,190.01
24546	Y	$7,190.01
24560	Y	$179.15
24565	Y	$1,132.99
24566	Y	$2,381.67
24575	Y	$4,689.61
24576	Y	$246.89
24577	Y	$1,132.99
24579	Y	$4,689.61
24582	Y	$2,381.67
24586	Y	$4,689.61
24587	Y	$7,190.01
24600	Y	$179.15
24605	Y	$1,132.99
24615	Y	$3,615.56
24620	Y	$1,132.99
24635	Y	$4,689.61
24640	Y	$161.16
24650	Y	$179.15
24655	Y	$1,132.99
24665	Y	$3,615.56
24666	Y	$4,689.61

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
24670	Y	$179.15
24675	Y	$1,132.99
24685	Y	$3,615.56
24800	Y	$3,615.56
24802	Y	$4,689.61
24900	Y	80% of billed
24920	Y	80% of billed
24925	Y	$2,381.67
24930	Y	80% of billed
24931	Y	80% of billed
24935	Y	$4,041.66
24940	Y	80% of billed
24999	Y	$179.17
25000	Y	$1,498.14
25001	Y	$1,498.14
25020	Y	$1,498.14
25023	Y	$2,381.67
25024	Y	$2,381.67
25025	Y	$2,381.67
25028	Y	$1,498.14
25031	Y	$1,498.14
25035	Y	$2,381.67
25040	Y	$2,381.67
25065	Y	$318.07
25066	Y	$1,458.18
25071	Y	$1,458.18
25073	Y	$1,458.18
25075	Y	$1,458.18
25076	Y	$1,458.18
25077	Y	$954.54
25078	Y	$1,458.18
25085	Y	$2,381.67
25100	Y	$2,381.67
25101	Y	$1,498.14
25105	Y	$1,498.14
25107	Y	$2,381.67
25109	Y	$1,498.14
25110	Y	$1,498.14
25111	Y	$1,498.14
25112	Y	$1,498.14
25115	Y	$1,498.14
25116	Y	$1,498.14
25118	Y	$1,498.14
25119	Y	$2,381.67
25120	Y	$2,381.67
25125	Y	$2,381.67
25126	Y	$2,381.67
25130	Y	$2,381.67
25135	Y	$2,381.67
25136	Y	$2,381.67
25145	Y	$2,381.67
25150	Y	$2,381.67
25151	Y	$2,381.67
25170	Y	$2,382.09
25210	Y	$2,381.67
25215	Y	$2,381.67
25230	Y	$2,381.67
25240	Y	$2,381.67
25246	N	packaged
25248	Y	$1,498.14
25250	N	$1,498.14
25251	N	$2,381.67
25259	Y	$1,132.99
25260	Y	$1,498.14
25263	Y	$2,381.67
25265	Y	$2,381.67
25270	Y	$2,381.67
25272	Y	$2,381.67
25274	Y	$2,381.67
25275	Y	$2,381.67
25280	Y	$2,381.67
25290	Y	$1,498.14
25295	Y	$1,498.14
25300	Y	$2,381.67
25301	Y	$2,381.67
25310	Y	$2,381.67
25312	Y	$2,381.67
25315	Y	$2,381.67

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
25316	Y	$3,615.56
25320	Y	$2,381.67
25332	Y	$2,381.67
25335	Y	$2,381.67
25337	Y	$2,381.67
25350	Y	$4,689.61
25355	Y	$2,381.67
25360	Y	$3,615.56
25365	Y	$4,689.61
25370	Y	$2,381.67
25375	Y	$2,381.67
25390	Y	$3,615.56
25391	Y	$4,689.61
25392	Y	$2,381.67
25393	Y	$2,381.67
25394	Y	$2,381.67
25400	Y	$3,615.56
25405	Y	$4,689.61
25415	Y	$3,615.56
25420	Y	$4,689.61
25425	Y	$2,381.67
25426	Y	$2,381.67
25430	Y	$2,381.67
25431	Y	$3,615.56
25440	Y	$3,615.56
25441	Y	$7,190.01
25442	Y	$7,190.01
25443	Y	$3,615.56
25444	Y	$7,190.01
25445	Y	$3,615.56
25446	Y	$7,190.01
25447	Y	$2,381.67
25449	Y	$3,615.56
25450	Y	$2,381.67
25455	Y	$2,381.67
25490	Y	$2,381.67
25491	Y	$4,689.61
25492	Y	$2,381.67
25500	Y	$179.15
25505	Y	$1,132.99
25515	Y	$3,615.56
25520	Y	$1,132.99
25525	Y	$3,615.56
25526	Y	$4,689.61
25530	Y	$179.15
25535	Y	$246.89
25545	Y	$3,615.56
25560	Y	$179.15
25565	Y	$1,132.99
25574	Y	$3,615.56
25575	Y	$4,689.61
25600	Y	$246.89
25605	Y	$1,132.99
25606	Y	$2,381.67
25607	Y	$3,615.56
25608	Y	$3,615.56
25609	Y	$3,615.56
25622	Y	$179.15
25624	Y	$1,132.99
25628	Y	$2,381.67
25630	Y	$179.15
25635	Y	$1,132.99
25645	Y	$2,381.67
25650	Y	$246.89
25651	Y	$2,381.67
25652	Y	$3,615.56
25660	Y	$246.89
25670	Y	$1,498.14
25671	Y	$1,498.14
25675	Y	$246.89
25676	Y	$3,615.56
25680	Y	$246.89
25685	Y	$1,498.14
25690	Y	$1,132.99
25695	Y	$2,381.67
25800	Y	$4,689.61
25805	Y	$4,689.61
25810	Y	$4,689.61

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
25820	Y	$3,615.56
25825	Y	$3,615.56
25830	Y	$3,615.56
25900	Y	80% of billed
25905	Y	80% of billed
25907	Y	$1,498.14
25909	Y	$2,382.09
25915	Y	80% of billed
25920	Y	80% of billed
25922	Y	$1,498.14
25924	Y	80% of billed
25927	Y	80% of billed
25929	Y	$1,464.09
25931	Y	$1,498.14
25999	Y	$179.17
26010	Y	$236.32
26011	Y	$954.54
26020	Y	$1,498.14
26025	Y	$1,498.14
26030	Y	$1,498.14
26034	Y	$1,498.14
26035	Y	$1,498.14
26037	Y	$1,498.14
26040	Y	$1,498.14
26045	Y	$1,498.14
26055	Y	$1,498.14
26060	Y	$1,498.14
26070	Y	$1,498.14
26075	Y	$1,498.14
26080	Y	$1,498.14
26100	Y	$2,381.67
26105	Y	$1,498.14
26110	Y	$1,498.14
26111	Y	$1,458.18
26113	Y	$1,458.18
26115	Y	$1,458.18
26116	Y	$1,458.18
26117	Y	$1,458.18
26118	Y	$1,458.18
26121	Y	$1,498.14
26123	Y	$2,381.67
26125	N	packaged
26130	Y	$1,498.14
26135	Y	$1,498.14
26140	Y	$1,498.14
26145	Y	$1,498.14
26160	Y	$1,498.14
26170	Y	$1,498.14
26180	Y	$1,498.14
26185	Y	$1,498.14
26200	Y	$1,498.14
26205	Y	$2,381.67
26210	Y	$1,498.14
26215	Y	$2,381.67
26230	Y	$1,498.14
26235	Y	$1,498.14
26236	Y	$1,498.14
26250	Y	$1,498.14
26260	Y	$2,381.67
26262	Y	$1,498.14
26320	N	$1,458.18
26340	Y	$1,132.99
26341	Y	$117.86
26350	Y	$2,381.67
26352	Y	$2,381.67
26356	Y	$2,381.67
26357	Y	$2,381.67
26358	Y	$2,381.67
26370	Y	$2,381.67
26372	Y	$2,381.67
26373	Y	$2,381.67
26390	Y	$3,615.56
26392	Y	$3,615.56
26410	Y	$1,498.14
26412	Y	$2,381.67
26415	Y	$1,498.14
26416	Y	$2,381.67
26418	Y	$1,498.14

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
26420	Y	$2,381.67
26426	Y	$2,381.67
26428	Y	$2,381.67
26432	Y	$1,498.14
26433	Y	$1,498.14
26434	Y	$2,381.67
26437	Y	$1,498.14
26440	Y	$1,498.14
26442	Y	$1,498.14
26445	Y	$1,498.14
26449	Y	$1,498.14
26450	Y	$2,381.67
26455	Y	$1,498.14
26460	Y	$1,498.14
26471	Y	$2,381.67
26474	Y	$1,498.14
26476	Y	$1,498.14
26477	Y	$2,381.67
26478	Y	$1,498.14
26479	Y	$1,498.14
26480	Y	$1,498.14
26483	Y	$2,381.67
26485	Y	$1,498.14
26489	Y	$2,381.67
26490	Y	$2,381.67
26492	Y	$2,381.67
26494	Y	$2,381.67
26496	Y	$2,381.67
26497	Y	$2,381.67
26498	Y	$2,381.67
26499	Y	$2,381.67
26500	Y	$2,381.67
26502	Y	$2,381.67
26508	Y	$1,498.14
26510	Y	$1,498.14
26516	Y	$1,498.14
26517	Y	$2,381.67
26518	Y	$2,381.67
26520	Y	$1,498.14
26525	Y	$1,498.14
26530	Y	$2,381.67
26531	Y	$3,615.56
26535	Y	$2,381.67
26536	Y	$3,615.56
26540	Y	$2,381.67
26541	Y	$2,381.67
26542	Y	$2,381.67
26545	Y	$2,381.67
26546	Y	$2,381.67
26548	Y	$2,381.67
26550	Y	$2,381.67
26551	Y	80% of billed
26553	Y	80% of billed
26554	Y	80% of billed
26555	Y	$2,381.67
26556	Y	80% of billed
26560	Y	$1,498.14
26561	Y	$2,381.67
26562	Y	$2,381.67
26565	Y	$2,381.67
26567	Y	$2,381.67
26568	Y	$2,381.67
26580	Y	$1,498.14
26587	Y	$2,381.67
26590	Y	$1,498.14
26591	Y	$2,381.67
26593	Y	$2,381.67
26596	Y	$2,381.67
26600	Y	$179.15
26605	Y	$246.89
26607	Y	$1,132.99
26608	Y	$1,498.14
26615	Y	$2,381.67
26641	Y	$246.89
26645	Y	$1,132.99
26650	Y	$1,498.14
26665	Y	$2,381.67
26670	Y	$246.89

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
26675	Y	$1,132.99
26676	Y	$1,498.14
26685	Y	$2,381.67
26686	Y	$2,381.67
26700	Y	$246.89
26705	Y	$1,132.99
26706	Y	$1,132.99
26715	Y	$2,381.67
26720	Y	$179.15
26725	Y	$246.89
26727	Y	$1,498.14
26735	Y	$2,381.67
26740	Y	$246.89
26742	Y	$1,132.99
26746	Y	$2,381.67
26750	Y	$179.15
26755	Y	$246.89
26756	Y	$1,498.14
26765	Y	$1,498.14
26770	Y	$179.15
26775	N	$216.36
26776	Y	$1,498.14
26785	Y	$2,381.67
26820	Y	$2,381.67
26841	Y	$2,381.67
26842	Y	$3,615.56
26843	Y	$3,615.56
26844	Y	$3,615.56
26850	Y	$2,381.67
26852	Y	$2,381.67
26860	Y	$2,381.67
26861	N	packaged
26862	Y	$2,381.67
26863	N	packaged
26910	Y	$2,381.67
26951	Y	$1,498.14
26952	Y	$1,498.14
26989	Y	$179.17
26990	Y	$2,381.67
26991	Y	$2,381.67
26992	Y	80% of billed
27000	Y	$1,498.14
27001	Y	$2,381.67
27003	Y	$2,381.67
27005	Y	80% of billed
27006	Y	$2,382.09
27025	Y	80% of billed
27027	Y	$2,382.09
27030	Y	80% of billed
27033	Y	$2,381.67
27035	Y	$1,498.14
27036	Y	80% of billed
27040	Y	$954.54
27041	Y	$954.54
27043	Y	$1,458.18
27045	Y	$1,458.18
27047	Y	$1,458.18
27048	Y	$1,458.18
27049	Y	$1,458.18
27050	Y	$1,498.14
27052	Y	$1,498.14
27054	Y	80% of billed
27057	Y	$1,498.42
27059	Y	$1,458.18
27060	Y	$1,498.14
27062	Y	$2,381.67
27065	Y	$2,381.67
27066	Y	$2,381.67
27067	Y	$2,381.67
27070	Y	80% of billed
27071	Y	80% of billed
27075	Y	80% of billed
27076	Y	80% of billed
27077	Y	80% of billed
27078	Y	80% of billed
27080	Y	$2,381.67
27086	Y	$1,458.18
27087	Y	$2,381.67

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
27090	Y	80% of billed
27091	Y	80% of billed
27093	N	packaged
27095	N	packaged
27096	Y	80% of billed
27097	Y	$2,381.67
27098	Y	$1,498.14
27100	Y	$3,615.56
27105	Y	$2,381.67
27110	Y	$2,381.67
27111	Y	$2,381.67
27120	Y	80% of billed
27122	Y	80% of billed
27125	Y	80% of billed
27130	Y	80% of billed
27132	Y	80% of billed
27134	Y	80% of billed
27137	Y	80% of billed
27138	Y	80% of billed
27140	Y	80% of billed
27146	Y	80% of billed
27147	Y	80% of billed
27151	Y	80% of billed
27156	Y	80% of billed
27158	Y	80% of billed
27161	Y	80% of billed
27165	Y	80% of billed
27170	Y	80% of billed
27175	Y	80% of billed
27176	Y	80% of billed
27177	Y	80% of billed
27178	Y	80% of billed
27179	Y	$5,244.65
27181	Y	80% of billed
27185	Y	80% of billed
27187	Y	80% of billed
27193	Y	$246.89
27194	Y	$246.89
27197	**Y**	**$279.97**
27198	**Y**	**$279.97**
27200	Y	$179.15
27202	Y	$2,381.67
27215	Y	80% of billed
27216	Y	80% of billed
27217	Y	80% of billed
27218	Y	80% of billed
27220	Y	$246.89
27222	Y	80% of billed
27226	Y	80% of billed
27227	Y	80% of billed
27228	Y	80% of billed
27230	Y	$179.15
27232	Y	80% of billed
27235	Y	$4,041.66
27236	Y	80% of billed
27238	Y	$1,132.99
27240	Y	80% of billed
27244	Y	80% of billed
27245	Y	80% of billed
27246	Y	$246.89
27248	Y	80% of billed
27250	Y	$179.15
27252	Y	$1,132.99
27253	Y	80% of billed
27254	Y	80% of billed
27256	Y	$179.15
27257	Y	$1,132.99
27258	Y	80% of billed
27259	Y	80% of billed
27265	Y	$246.89
27266	Y	$1,132.99
27267	Y	$1,132.99
27268	Y	80% of billed
27269	Y	80% of billed
27275	Y	$1,132.99
27279	Y	$7,190.01
27280	Y	80% of billed
27282	Y	80% of billed
27284	Y	80% of billed
27286	Y	80% of billed
27290	Y	80% of billed
27295	Y	80% of billed
27299	Y	$179.17
27301	Y	$1,458.18
27303	Y	80% of billed
27305	Y	$2,381.67
27306	Y	$1,498.14
27307	Y	$2,381.67
27310	Y	$2,381.67
27323	Y	$1,458.18
27324	Y	$1,458.18
27325	Y	$1,445.78
27326	Y	$1,445.78
27327	Y	$1,458.18
27328	Y	$1,458.18
27329	Y	$1,458.18
27330	Y	$2,381.67
27331	Y	$2,381.67
27332	Y	$2,381.67
27333	Y	$2,381.67
27334	Y	$2,381.67
27335	Y	$3,615.56
27337	Y	$1,458.18
27339	Y	$1,458.18
27340	Y	$2,381.67
27345	Y	$2,381.67
27347	Y	$2,381.67
27350	Y	$2,381.67
27355	Y	$2,381.67
27356	Y	$7,190.01
27357	Y	$3,615.56
27358	N	packaged
27360	Y	$2,381.67
27364	Y	$1,458.18
27365	Y	80% of billed
27370	N	packaged
27372	Y	$1,458.18
27380	Y	$2,381.67
27381	Y	$3,615.56
27385	Y	$2,381.67
27386	Y	$3,615.56
27390	Y	$2,381.67
27391	Y	$2,381.67
27392	Y	$2,381.67
27393	Y	$2,381.67
27394	Y	$2,381.67
27395	Y	$2,381.67
27396	Y	$2,381.67
27397	Y	$2,381.67
27400	Y	$2,381.67
27403	Y	$1,498.14
27405	Y	$2,381.67
27407	Y	$3,615.56
27409	Y	$2,381.67
27412	Y	$4,041.66
27415	Y	$4,689.61
27416	Y	$3,615.56
27418	Y	$3,615.56
27420	Y	$3,615.56
27422	Y	$2,381.67
27424	Y	$2,381.67
27425	Y	$2,381.67
27427	Y	$3,615.56
27428	Y	$4,689.61
27429	Y	$4,689.61
27430	Y	$2,381.67
27435	Y	$2,381.67
27437	Y	$4,689.61
27438	Y	$7,190.01
27440	Y	$7,190.01
27441	Y	$7,190.01
27442	Y	$7,190.01
27443	Y	$4,689.61
27445	Y	80% of billed
27446	Y	$7,190.01
27447	Y	80% of billed
27448	Y	80% of billed
27450	Y	80% of billed
27454	Y	80% of billed
27455	Y	80% of billed
27457	Y	80% of billed
27465	Y	80% of billed
27466	Y	80% of billed
27468	Y	80% of billed
27470	Y	80% of billed
27472	Y	80% of billed
27475	Y	$2,381.67
27477	Y	$2,382.09
27479	Y	$2,381.67
27485	Y	$2,382.09
27486	Y	80% of billed
27487	Y	80% of billed
27488	Y	80% of billed
27495	Y	80% of billed
27496	Y	$2,381.67
27497	Y	$1,498.14
27498	Y	$1,498.14
27499	Y	$2,381.67
27500	Y	$246.89
27501	Y	$246.89
27502	Y	$1,132.99
27503	Y	$1,132.99
27506	Y	80% of billed
27507	Y	80% of billed
27508	Y	$246.89
27509	Y	$3,615.56
27510	Y	$1,132.99
27511	Y	80% of billed
27513	Y	80% of billed
27514	Y	80% of billed
27516	Y	$179.15
27517	Y	$1,132.99
27519	Y	80% of billed
27520	Y	$179.15
27524	Y	$2,381.67
27530	Y	$179.15
27532	Y	$1,132.99
27535	Y	80% of billed
27536	Y	80% of billed
27538	Y	$246.89
27540	Y	80% of billed
27550	Y	$246.89
27552	Y	$1,132.99
27556	Y	80% of billed
27557	Y	80% of billed
27558	Y	80% of billed
27560	Y	$179.15
27562	Y	$246.89
27566	Y	$2,381.67
27570	Y	$1,132.99
27580	Y	80% of billed
27590	Y	80% of billed
27591	Y	80% of billed
27592	Y	80% of billed
27594	Y	$2,381.67
27596	Y	80% of billed
27598	Y	80% of billed
27599	Y	$179.17
27600	Y	$2,381.67
27601	Y	$2,381.67
27602	Y	$1,498.14
27603	Y	$1,458.18
27604	Y	$2,381.67
27605	Y	$1,498.14
27606	Y	$2,381.67
27607	Y	$2,381.67
27610	Y	$2,381.67
27612	Y	$2,381.67
27613	Y	$304.44
27614	Y	$1,458.18
27615	Y	$1,458.18
27616	Y	$1,458.18
27618	Y	$1,458.18
27619	Y	$1,458.18

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
27620	Y	$2,381.67
27625	Y	$2,381.67
27626	Y	$2,381.67
27630	Y	$1,498.14
27632	Y	$1,458.18
27634	Y	$1,458.18
27635	Y	$2,381.67
27637	Y	$3,615.56
27638	Y	$3,615.56
27640	Y	$2,381.67
27641	Y	$2,381.67
27645	Y	80% of billed
27646	Y	80% of billed
27647	Y	$1,498.14
27648	N	packaged
27650	Y	$2,381.67
27652	Y	$3,615.56
27654	Y	$3,615.56
27656	Y	$2,381.67
27658	Y	$2,381.67
27659	Y	$2,381.67
27664	Y	$2,381.67
27665	Y	$3,615.56
27675	Y	$2,381.67
27676	Y	$2,381.67
27680	Y	$2,381.67
27681	Y	$2,381.67
27685	Y	$2,381.67
27686	Y	$2,381.67
27687	Y	$2,381.67
27690	Y	$2,381.67
27691	Y	$2,381.67
27692	N	packaged
27695	Y	$2,381.67
27696	Y	$2,381.67
27698	Y	$2,381.67
27700	Y	$3,615.56
27702	Y	80% of billed
27703	Y	80% of billed
27704	N	$2,381.67
27705	Y	$2,381.67
27707	Y	$2,381.67
27709	Y	$4,689.61
27712	Y	80% of billed
27715	Y	80% of billed
27720	Y	$3,615.56
27722	Y	$5,244.65
27724	Y	80% of billed
27725	Y	80% of billed
27726	Y	$3,615.56
27727	Y	80% of billed
27730	Y	$2,381.67
27732	Y	$2,381.67
27734	Y	$2,381.67
27740	Y	$2,381.67
27742	Y	$2,381.67
27745	Y	$4,689.61
27750	Y	$246.89
27752	Y	$1,132.99
27756	Y	$3,615.56
27758	Y	$4,689.61
27759	Y	$4,689.61
27760	Y	$179.15
27762	Y	$1,132.99
27766	Y	$2,381.67
27767	Y	$246.89
27768	Y	$1,132.99
27769	Y	$3,615.56
27780	Y	$179.15
27781	Y	$1,132.99
27784	Y	$3,615.56
27786	Y	$246.89
27788	Y	$246.89
27792	Y	$3,615.56
27808	Y	$179.15
27810	Y	$1,132.99
27814	Y	$3,615.56
27816	Y	$246.89

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
27818	Y	$1,132.99
27822	Y	$3,615.56
27823	Y	$4,689.61
27824	Y	$246.89
27825	Y	$1,132.99
27826	Y	$3,615.56
27827	Y	$4,689.61
27828	Y	$4,689.61
27829	Y	$2,381.67
27830	Y	$179.15
27831	Y	$1,132.99
27832	Y	$3,615.56
27840	Y	$179.15
27842	Y	$1,132.99
27846	Y	$2,381.67
27848	Y	$2,381.67
27860	Y	$1,132.99
27870	Y	$7,190.01
27871	Y	$4,689.61
27880	Y	80% of billed
27881	Y	80% of billed
27882	Y	80% of billed
27884	Y	$2,381.67
27886	Y	80% of billed
27888	Y	80% of billed
27889	Y	$2,381.67
27892	Y	$2,381.67
27893	Y	$2,381.67
27894	Y	$1,498.14
27899	Y	$179.17
28001	Y	$323.27
28002	Y	$1,498.14
28003	Y	$1,498.14
28005	Y	$2,381.67
28008	Y	$1,498.14
28010	Y	$226.21
28011	Y	$1,498.14
28020	Y	$2,381.67
28022	Y	$2,381.67
28024	Y	$1,498.14
28035	Y	$1,445.78
28039	Y	$1,458.18
28041	Y	$1,458.18
28043	Y	$1,458.18
28045	Y	$1,458.18
28046	Y	$1,458.18
28047	Y	$1,458.18
28050	Y	$1,498.14
28052	Y	$1,498.14
28054	Y	$1,498.14
28055	Y	$1,445.78
28060	Y	$1,498.14
28062	Y	$2,381.67
28070	Y	$1,498.14
28072	Y	$1,498.14
28080	Y	$1,498.14
28086	Y	$2,381.67
28088	Y	$1,498.14
28090	Y	$1,498.14
28092	Y	$1,498.14
28100	Y	$2,381.67
28102	Y	$3,615.56
28103	Y	$3,615.56
28104	Y	$1,498.14
28106	Y	$2,381.67
28107	Y	$3,615.56
28108	Y	$1,498.14
28110	Y	$1,498.14
28111	Y	$1,498.14
28112	Y	$1,498.14
28113	Y	$1,498.14
28114	Y	$2,381.67
28116	Y	$1,498.14
28118	Y	$2,381.67
28119	Y	$2,381.67
28120	Y	$2,381.67
28122	Y	$1,498.14
28124	Y	$552.64

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
28126	Y	$1,498.14
28130	Y	$2,381.67
28140	Y	$1,498.14
28150	Y	$1,498.14
28153	Y	$1,498.14
28160	Y	$1,498.14
28171	Y	$1,498.14
28173	Y	$1,498.14
28175	Y	$1,498.14
28190	Y	$339.49
28192	Y	$1,458.18
28193	Y	$1,458.18
28200	Y	$2,381.67
28202	Y	$3,615.56
28208	Y	$2,381.67
28210	Y	$3,615.56
28220	Y	$519.67
28222	Y	$1,498.14
28225	Y	$1,498.14
28226	Y	$1,498.14
28230	Y	$508.46
28232	Y	$480.09
28234	Y	$1,498.14
28238	Y	$2,381.67
28240	Y	$1,498.14
28250	Y	$2,381.67
28260	Y	$1,498.14
28261	Y	$2,381.67
28262	Y	$3,615.56
28264	Y	$1,498.14
28270	Y	$1,498.14
28272	Y	$474.15
28280	Y	$1,498.14
28285	Y	$1,498.14
28286	Y	$1,498.14
28288	Y	$1,498.14
28289	Y	$2,381.67
28290	Y	$2,381.67
28291	**Y**	**$5,443.81**
28292	Y	$2,381.67
28293	Y	$3,615.56
28294	Y	$2,381.67
28295	**Y**	**$3,085.99**
28296	Y	$2,381.67
28297	Y	$4,689.61
28298	Y	$2,381.67
28299	Y	$2,381.67
28300	Y	$3,615.56
28302	Y	$2,381.67
28304	Y	$3,615.56
28305	Y	$3,615.56
28306	Y	$2,381.67
28307	Y	$2,381.67
28308	Y	$2,381.67
28309	Y	$3,615.56
28310	Y	$2,381.67
28312	Y	$2,381.67
28313	Y	$1,498.14
28315	Y	$1,498.14
28320	Y	$4,689.61
28322	Y	$3,615.56
28340	Y	$1,498.14
28341	Y	$1,498.14
28344	Y	$2,381.67
28345	Y	$1,498.14
28360	Y	$4,041.66
28400	Y	$246.89
28405	Y	$246.89
28406	Y	$2,381.67
28415	Y	$4,689.61
28420	Y	$7,190.01
28430	Y	$179.15
28435	Y	$1,132.99
28436	Y	$2,381.67
28445	Y	$3,615.56
28446	Y	$3,615.56
28450	Y	$246.89
28455	Y	$309.78

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
28456	Y	$4,689.61
28465	Y	$3,615.56
28470	Y	$179.15
28475	Y	$179.15
28476	Y	$2,381.67
28485	Y	$2,381.67
28490	Y	$179.15
28495	Y	$179.15
28496	Y	$2,381.67
28505	Y	$2,381.67
28510	Y	$148.49
28515	Y	$193.13
28525	Y	$2,381.67
28530	Y	$139.83
28531	Y	$2,381.67
28540	Y	$179.15
28545	Y	$2,381.67
28546	Y	$1,498.14
28555	Y	$4,689.61
28570	Y	$179.15
28575	Y	$1,132.99
28576	Y	$1,498.14
28585	Y	$2,381.67
28600	Y	$246.89
28605	Y	$179.15
28606	Y	$2,381.67
28615	Y	$3,615.56
28630	Y	$168.48
28635	Y	$1,132.99
28636	Y	$2,381.67
28645	Y	$2,381.67
28660	Y	$125.17
28665	N	$216.36
28666	Y	$2,381.67
28675	Y	$1,498.14
28705	Y	$7,190.01
28715	Y	$7,190.01
28725	Y	$4,689.61
28730	Y	$4,689.61
28735	Y	$7,190.01
28737	Y	$4,689.61
28740	Y	$4,689.61
28750	Y	$3,615.56
28755	Y	$2,381.67
28760	Y	$3,615.56
28800	Y	80% of billed
28805	Y	$2,382.09
28810	Y	$1,498.14
28820	Y	$1,498.14
28825	Y	$1,498.14
28890	Y	$366.66
28899	Y	$179.17
29000	N	$216.36
29010	N	$216.36
29015	N	$216.36
29035	N	$216.36
29040	N	$216.36
29044	N	$124.10
29046	N	$216.36
29049	N	$91.34
29055	N	$216.36
29058	N	$132.00
29065	N	$116.69
29075	N	$106.67
29085	N	$116.02
29086	N	$103.33
29105	N	$101.34
29125	N	packaged
29126	N	packaged
29130	N	packaged
29131	N	packaged
29200	N	$28.67
29240	N	packaged
29260	N	packaged
29280	N	packaged
29305	N	$216.36
29325	N	$216.36
29345	N	$150.67

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
29355	N	$148.69
29358	N	$193.36
29365	N	$142.01
29405	N	$95.33
29425	N	$90.02
29435	N	$130.69
29440	N	$42.68
29445	N	$125.34
29450	N	$122.67
29505	N	$105.99
29515	N	$82.00
29520	N	packaged
29530	N	packaged
29540	N	$21.33
29550	N	packaged
29580	N	$58.66
29581	N	$99.33
29582	N	$108.68
29583	N	$64.67
29584	N	$108.67
29700	N	$75.35
29705	N	$68.69
29710	N	$126.68
29720	N	$108.67
29730	N	$65.99
29740	N	$100.68
29750	N	$76.67
29799	Y	$124.12
29800	Y	$2,381.67
29804	Y	$2,381.67
29805	Y	$2,381.67
29806	Y	$3,615.56
29807	Y	$3,615.56
29819	Y	$2,381.67
29820	Y	$2,381.67
29821	Y	$2,381.67
29822	Y	$2,381.67
29823	Y	$2,381.67
29824	Y	$2,381.67
29825	Y	$2,381.67
29826	N	packaged
29827	Y	$3,615.56
29828	Y	$3,615.56
29830	Y	$1,498.14
29834	Y	$2,381.67
29835	Y	$2,381.67
29836	Y	$2,381.67
29837	Y	$2,381.67
29838	Y	$2,381.67
29840	Y	$2,381.67
29843	Y	$2,381.67
29844	Y	$2,381.67
29845	Y	$2,381.67
29846	Y	$2,381.67
29847	Y	$2,381.67
29848	Y	$1,498.14
29850	Y	$1,498.14
29851	Y	$1,498.14
29855	Y	$4,689.61
29856	Y	$4,689.61
29860	Y	$2,381.67
29861	Y	$2,381.67
29862	Y	$3,615.56
29863	Y	$2,381.67
29866	Y	$3,615.56
29867	Y	$5,244.65
29868	Y	$4,041.66
29870	Y	$2,381.67
29871	Y	$2,381.67
29873	Y	$2,381.67
29874	Y	$2,381.67
29875	Y	$2,381.67
29876	Y	$2,381.67
29877	Y	$2,381.67
29879	Y	$2,381.67
29880	Y	$2,381.67
29881	Y	$2,381.67
29882	Y	$2,381.67

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
29883	Y	$2,381.67
29884	Y	$2,381.67
29885	Y	$3,615.56
29886	Y	$2,381.67
29887	Y	$2,381.67
29888	Y	$4,689.61
29889	Y	$7,190.01
29891	Y	$2,381.67
29892	Y	$2,381.67
29893	Y	$1,498.14
29894	Y	$2,381.67
29895	Y	$2,381.67
29897	Y	$2,381.67
29898	Y	$2,381.67
29899	Y	$4,689.61
29900	Y	$2,381.67
29901	Y	$2,381.67
29902	Y	$1,498.14
29904	Y	$2,381.67
29905	Y	$2,381.67
29906	Y	$1,498.14
29907	Y	$4,689.61
29914	Y	$3,615.56
29915	Y	$4,689.61
29916	Y	$4,689.61
29999	Y	$1,498.42
30000	Y	$134.26
30020	Y	$324.93
30100	Y	$196.74
30110	Y	$310.67
30115	Y	$1,666.41
30117	Y	$1,666.41
30118	Y	$1,666.41
30120	Y	$1,666.41
30124	Y	$1,666.41
30125	Y	$3,578.58
30130	Y	$1,666.41
30140	Y	$1,666.41
30150	Y	$3,578.58
30160	Y	$3,578.58
30200	Y	$156.99
30210	Y	$198.72
30220	Y	$713.12
30300	N	packaged
30310	Y	$1,666.41
30320	Y	$713.12
30400	Y	$1,666.41
30410	Y	$3,578.58
30420	Y	$3,578.58
30430	Y	$1,666.41
30435	Y	$3,578.58
30450	Y	$3,578.58
30460	Y	$3,578.58
30462	Y	$3,578.58
30465	Y	$3,578.58
30520	Y	$1,666.41
30540	Y	$3,578.58
30545	Y	$3,578.58
30560	Y	$324.93
30580	Y	$3,578.58
30600	Y	$3,578.58
30620	Y	$3,578.58
30630	Y	$1,666.41
30801	Y	$713.12
30802	Y	$1,666.41
30901	N	packaged
30903	Y	$134.26
30905	Y	$134.26
30906	Y	$134.26
30915	Y	$1,813.94
30920	Y	$1,813.94
30930	Y	$1,666.41
30999	Y	$134.28
31000	Y	$258.73
31002	Y	$713.12
31020	Y	$1,666.41
31030	Y	$3,578.58
31032	Y	$3,578.58

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
31040	Y	$1,666.41
31050	Y	$3,578.58
31051	Y	$3,578.58
31070	Y	$3,578.58
31075	Y	$3,578.58
31080	Y	$3,578.58
31081	Y	$3,578.58
31084	Y	$3,578.58
31085	Y	$3,578.58
31086	Y	$3,578.58
31087	Y	$3,578.58
31090	Y	$3,578.58
31200	Y	$3,578.58
31201	Y	$1,666.41
31205	Y	$1,666.41
31225	Y	80% of billed
31230	Y	80% of billed
31231	Y	$147.08
31233	Y	$390.41
31235	Y	$1,077.14
31237	Y	$1,077.14
31238	Y	$1,077.14
31239	Y	$2,001.08
31240	Y	$1,077.14
31254	Y	$2,543.10
31255	Y	$2,543.10
31256	Y	$2,001.08
31267	Y	$2,543.10
31276	Y	$2,543.10
31287	Y	$2,543.10
31288	Y	$2,543.10
31290	Y	80% of billed
31291	Y	80% of billed
31292	Y	$2,543.55
31293	Y	$2,543.55
31294	Y	$2,543.55
31295	Y	$2,543.10
31296	Y	$2,543.10
31297	Y	$2,543.10
31299	Y	$134.28
31300	Y	$1,666.41
31320	Y	$3,578.58
31360	Y	80% of billed
31365	Y	80% of billed
31367	Y	80% of billed
31368	Y	80% of billed
31370	Y	80% of billed
31375	Y	80% of billed
31380	Y	80% of billed
31382	Y	80% of billed
31390	Y	80% of billed
31395	Y	80% of billed
31400	Y	$3,578.58
31420	Y	$3,578.58
31500	Y	$134.26
31502	Y	$134.26
31505	Y	$112.69
31510	Y	$2,001.08
31511	Y	$147.08
31512	Y	$2,001.08
31513	Y	$1,077.14
31515	Y	$390.41
31520	Y	$390.41
31525	Y	$1,077.14
31526	Y	$1,077.14
31527	Y	$2,001.08
31528	Y	$2,001.08
31529	Y	$2,001.08
31530	Y	$1,077.14
31531	Y	$2,001.08
31535	Y	$2,001.08
31536	Y	$2,001.08
31540	Y	$2,001.08
31541	Y	$2,001.08
31545	Y	$2,001.08
31546	Y	$2,543.10
31551	**Y**	**$3,789.95**
31552	**Y**	**$3,789.95**
31553	**Y**	**$3,789.95**
31554	**Y**	**$3,789.95**
31560	Y	$2,543.10
31561	Y	$2,001.08
31570	Y	$2,001.08
31571	Y	$2,001.08
31572	**Y**	**$2,963.81**
31573	**Y**	**$1,551.90**
31574	**Y**	**$1,551.90**
31575	Y	$134.68
31576	Y	$1,077.14
31577	Y	$390.41
31578	Y	$2,001.08
31579	Y	$230.66
31580	Y	$3,578.58
31582	Y	$3,578.58
31584	Y	80% of billed
31587	Y	80% of billed
31588	Y	$3,578.58
31590	Y	$3,578.58
31591	**Y**	**$3,789.95**
31592	**Y**	**$3,789.95**
31595	Y	$3,578.58
31599	Y	$134.28
31600	Y	$1,666.69
31601	Y	$1,666.69
31603	Y	$713.12
31605	Y	$713.12
31610	Y	$3,970.33
31611	Y	$1,666.41
31612	Y	$3,578.58
31613	Y	$1,666.41
31614	Y	$3,578.58
31615	Y	$713.12
31622	Y	$1,077.14
31623	Y	$1,077.14
31624	Y	$1,077.14
31625	Y	$1,077.14
31626	Y	$2,543.10
31627	N	packaged
31628	Y	$2,001.08
31629	Y	$2,001.08
31630	Y	$2,001.08
31631	Y	$2,543.10
31632	N	packaged
31633	N	packaged
31634	Y	$2,543.10
31635	Y	$1,077.14
31636	Y	$2,543.10
31637	N	packaged
31638	Y	$2,543.10
31640	Y	$2,001.08
31641	Y	$2,001.08
31643	Y	$1,077.14
31645	Y	$1,077.14
31646	Y	$390.41
31647	Y	$2,543.10
31648	Y	$2,001.08
31649	N	$1,077.14
31651	N	packaged
31652	Y	$2,001.08
31653	Y	$2,001.08
31654	N	packaged
31660	Y	$2,543.55
31661	Y	$2,543.55
31717	Y	$390.41
31720	N	packaged
31725	Y	80% of billed
31730	Y	$1,077.14
31750	Y	$3,578.58
31755	Y	$3,578.58
31760	Y	80% of billed
31766	Y	80% of billed
31770	Y	80% of billed
31775	Y	80% of billed
31780	Y	80% of billed
31781	Y	80% of billed
31785	Y	$1,666.69
31786	Y	80% of billed
31800	Y	80% of billed
31805	Y	80% of billed
31820	Y	$1,666.41
31825	Y	$1,666.41
31830	Y	$1,666.41
31899	Y	$147.10
32035	Y	80% of billed
32036	Y	80% of billed
32096	Y	80% of billed
32097	Y	80% of billed
32098	Y	80% of billed
32100	Y	80% of billed
32110	Y	80% of billed
32120	Y	80% of billed
32124	Y	80% of billed
32140	Y	80% of billed
32141	Y	80% of billed
32150	Y	80% of billed
32151	Y	80% of billed
32160	Y	80% of billed
32200	Y	80% of billed
32215	Y	80% of billed
32220	Y	80% of billed
32225	Y	80% of billed
32310	Y	80% of billed
32320	Y	80% of billed
32400	Y	$954.54
32405	Y	$954.54
32440	Y	80% of billed
32442	Y	80% of billed
32445	Y	80% of billed
32480	Y	80% of billed
32482	Y	80% of billed
32484	Y	80% of billed
32486	Y	80% of billed
32488	Y	80% of billed
32491	Y	80% of billed
32501	Y	80% of billed
32503	Y	80% of billed
32504	Y	80% of billed
32505	Y	80% of billed
32506	Y	80% of billed
32507	Y	80% of billed
32540	Y	80% of billed
32550	Y	$1,615.87
32551	Y	$475.79
32552	N	$475.70
32553	N	$1,062.53
32554	Y	$475.70
32555	Y	$475.70
32556	Y	$971.07
32557	Y	$475.70
32560	Y	$475.79
32561	Y	$475.79
32562	Y	$475.79
32601	Y	$3,263.15
32604	Y	$3,263.15
32606	Y	$3,263.15
32607	Y	$3,263.15
32608	Y	$3,263.15
32609	Y	$3,263.15
32650	Y	80% of billed
32651	Y	80% of billed
32652	Y	80% of billed
32653	Y	80% of billed
32654	Y	80% of billed
32655	Y	80% of billed
32656	Y	80% of billed
32658	Y	80% of billed
32659	Y	80% of billed
32661	Y	80% of billed
32662	Y	80% of billed
32663	Y	80% of billed
32664	Y	80% of billed
32665	Y	80% of billed
32666	Y	80% of billed
32667	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
32668	Y	80% of billed
32669	Y	80% of billed
32670	Y	80% of billed
32671	Y	80% of billed
32672	Y	80% of billed
32673	Y	80% of billed
32674	Y	80% of billed
32701	Y	80% of billed
32800	Y	80% of billed
32810	Y	80% of billed
32815	Y	80% of billed
32820	Y	80% of billed
32850	Y	80% of billed
32851	Y	80% of billed
32852	Y	80% of billed
32853	Y	80% of billed
32854	Y	80% of billed
32855	Y	80% of billed
32856	Y	80% of billed
32900	Y	80% of billed
32905	Y	80% of billed
32906	Y	80% of billed
32940	Y	80% of billed
32960	Y	$475.70
32997	Y	80% of billed
32998	Y	$3,236.18
32999	Y	$475.79
33010	Y	$475.70
33011	Y	$475.70
33015	Y	80% of billed
33020	Y	80% of billed
33025	Y	80% of billed
33030	Y	80% of billed
33031	Y	80% of billed
33050	Y	80% of billed
33120	Y	80% of billed
33130	Y	80% of billed
33140	Y	80% of billed
33141	Y	80% of billed
33202	Y	80% of billed
33203	Y	80% of billed
33206	Y	$4,787.19
33207	Y	$4,787.19
33208	Y	$4,787.19
33210	Y	$3,192.64
33211	Y	$3,192.64
33212	Y	$3,192.64
33213	Y	$4,787.19
33214	Y	$4,787.19
33215	Y	$768.53
33216	Y	$3,192.64
33217	Y	$3,192.64
33218	Y	$1,936.23
33220	Y	$1,936.23
33221	Y	$7,114.93
33222	Y	$1,464.09
33223	Y	$1,464.09
33224	Y	$4,787.19
33225	N	packaged
33226	Y	$1,813.94
33227	Y	$3,192.64
33228	Y	$4,787.19
33229	Y	$7,114.93
33230	Y	$8,248.00
33231	Y	$10,261.06
33233	N	$3,192.64
33234	N	$1,936.23
33235	N	$1,936.23
33236	Y	80% of billed
33237	Y	80% of billed
33238	Y	80% of billed
33240	Y	$8,248.00
33241	N	$1,936.23
33243	Y	80% of billed
33244	Y	$1,936.57
33249	N	$10,261.06
33250	Y	80% of billed
33251	Y	80% of billed
33254	Y	80% of billed
33255	Y	80% of billed
33256	Y	80% of billed
33257	Y	80% of billed
33258	Y	80% of billed
33259	Y	80% of billed
33261	Y	80% of billed
33262	Y	$8,248.00
33263	Y	$8,248.00
33264	Y	$10,261.06
33265	Y	80% of billed
33266	Y	80% of billed
33270	Y	$10,261.06
33271	Y	$3,192.64
33272	Y	$1,936.57
33273	Y	$1,936.23
33282	N	$3,192.64
33284	N	$954.54
33300	Y	80% of billed
33305	Y	80% of billed
33310	Y	80% of billed
33315	Y	80% of billed
33320	Y	80% of billed
33321	Y	80% of billed
33322	Y	80% of billed
33330	Y	80% of billed
33335	Y	80% of billed
33340	**Y**	**80% of billed**
33361	Y	80% of billed
33362	Y	80% of billed
33363	Y	80% of billed
33364	Y	80% of billed
33365	Y	80% of billed
33366	Y	80% of billed
33367	Y	80% of billed
33368	Y	80% of billed
33369	Y	80% of billed
33390	**Y**	**80% of billed**
33391	**Y**	**80% of billed**
33400	Y	80% of billed
33401	Y	80% of billed
33403	Y	80% of billed
33404	Y	80% of billed
33405	Y	80% of billed
33406	Y	80% of billed
33410	Y	80% of billed
33411	Y	80% of billed
33412	Y	80% of billed
33413	Y	80% of billed
33414	Y	80% of billed
33415	Y	80% of billed
33416	Y	80% of billed
33417	Y	80% of billed
33418	Y	80% of billed
33419	N	packaged
33420	Y	80% of billed
33422	Y	80% of billed
33425	Y	80% of billed
33426	Y	80% of billed
33427	Y	80% of billed
33430	Y	80% of billed
33460	Y	80% of billed
33463	Y	80% of billed
33464	Y	80% of billed
33465	Y	80% of billed
33468	Y	80% of billed
33470	Y	80% of billed
33471	Y	80% of billed
33474	Y	80% of billed
33475	Y	80% of billed
33476	Y	80% of billed
33477	Y	80% of billed
33478	Y	80% of billed
33496	Y	80% of billed
33500	Y	80% of billed
33501	Y	80% of billed
33502	Y	80% of billed
33503	Y	80% of billed
33504	Y	80% of billed
33505	Y	80% of billed
33506	Y	80% of billed
33507	Y	80% of billed
33508	N	packaged
33510	Y	80% of billed
33511	Y	80% of billed
33512	Y	80% of billed
33513	Y	80% of billed
33514	Y	80% of billed
33516	Y	80% of billed
33517	Y	80% of billed
33518	Y	80% of billed
33519	Y	80% of billed
33521	Y	80% of billed
33522	Y	80% of billed
33523	Y	80% of billed
33530	Y	80% of billed
33533	Y	80% of billed
33534	Y	80% of billed
33535	Y	80% of billed
33536	Y	80% of billed
33542	Y	80% of billed
33545	Y	80% of billed
33548	Y	80% of billed
33572	Y	80% of billed
33600	Y	80% of billed
33602	Y	80% of billed
33606	Y	80% of billed
33608	Y	80% of billed
33610	Y	80% of billed
33611	Y	80% of billed
33612	Y	80% of billed
33615	Y	80% of billed
33617	Y	80% of billed
33619	Y	80% of billed
33620	Y	80% of billed
33621	Y	80% of billed
33622	Y	80% of billed
33641	Y	80% of billed
33645	Y	80% of billed
33647	Y	80% of billed
33660	Y	80% of billed
33665	Y	80% of billed
33670	Y	80% of billed
33675	Y	80% of billed
33676	Y	80% of billed
33677	Y	80% of billed
33681	Y	80% of billed
33684	Y	80% of billed
33688	Y	80% of billed
33690	Y	80% of billed
33692	Y	80% of billed
33694	Y	80% of billed
33697	Y	80% of billed
33702	Y	80% of billed
33710	Y	80% of billed
33720	Y	80% of billed
33722	Y	80% of billed
33724	Y	80% of billed
33726	Y	80% of billed
33730	Y	80% of billed
33732	Y	80% of billed
33735	Y	80% of billed
33736	Y	80% of billed
33737	Y	80% of billed
33750	Y	80% of billed
33755	Y	80% of billed
33762	Y	80% of billed
33764	Y	80% of billed
33766	Y	80% of billed
33767	Y	80% of billed
33768	Y	80% of billed
33770	Y	80% of billed
33771	Y	80% of billed
33774	Y	80% of billed
33775	Y	80% of billed
33776	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
33777	Y	80% of billed
33778	Y	80% of billed
33779	Y	80% of billed
33780	Y	80% of billed
33781	Y	80% of billed
33782	Y	80% of billed
33783	Y	80% of billed
33786	Y	80% of billed
33788	Y	80% of billed
33800	Y	80% of billed
33802	Y	80% of billed
33803	Y	80% of billed
33813	Y	80% of billed
33814	Y	80% of billed
33820	Y	80% of billed
33822	Y	80% of billed
33824	Y	80% of billed
33840	Y	80% of billed
33845	Y	80% of billed
33851	Y	80% of billed
33852	Y	80% of billed
33853	Y	80% of billed
33860	Y	80% of billed
33863	Y	80% of billed
33864	Y	80% of billed
33870	Y	80% of billed
33875	Y	80% of billed
33877	Y	80% of billed
33880	Y	80% of billed
33881	Y	80% of billed
33883	Y	80% of billed
33884	Y	80% of billed
33886	Y	80% of billed
33889	Y	80% of billed
33891	Y	80% of billed
33910	Y	80% of billed
33915	Y	80% of billed
33916	Y	80% of billed
33917	Y	80% of billed
33920	Y	80% of billed
33922	Y	80% of billed
33924	Y	80% of billed
33925	Y	80% of billed
33926	Y	80% of billed
33930	Y	80% of billed
33933	Y	80% of billed
33935	Y	80% of billed
33940	Y	80% of billed
33944	Y	80% of billed
33945	Y	80% of billed
33946	Y	80% of billed
33947	Y	80% of billed
33948	Y	80% of billed
33949	Y	80% of billed
33951	Y	80% of billed
33952	Y	80% of billed
33953	Y	80% of billed
33954	Y	80% of billed
33955	Y	80% of billed
33956	Y	80% of billed
33957	Y	80% of billed
33958	Y	80% of billed
33959	Y	80% of billed
33962	Y	80% of billed
33963	Y	80% of billed
33964	Y	80% of billed
33965	Y	80% of billed
33966	Y	80% of billed
33967	Y	80% of billed
33968	Y	80% of billed
33969	Y	80% of billed
33970	Y	80% of billed
33971	Y	80% of billed
33973	Y	80% of billed
33974	Y	80% of billed
33975	Y	80% of billed
33976	Y	80% of billed
33977	Y	80% of billed

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
33978	Y	80% of billed
33979	Y	80% of billed
33980	Y	80% of billed
33981	Y	80% of billed
33982	Y	80% of billed
33983	Y	80% of billed
33984	Y	80% of billed
33985	Y	80% of billed
33986	Y	80% of billed
33987	Y	80% of billed
33988	Y	80% of billed
33989	Y	80% of billed
33990	Y	80% of billed
33991	Y	80% of billed
33992	Y	80% of billed
33993	Y	80% of billed
33999	Y	$475.79
34001	Y	80% of billed
34051	Y	80% of billed
34101	Y	$3,276.47
34111	Y	$3,276.47
34151	Y	80% of billed
34201	Y	$3,276.47
34203	Y	$3,276.47
34401	Y	80% of billed
34421	Y	$1,814.25
34451	Y	80% of billed
34471	Y	$1,814.25
34490	Y	$1,813.94
34501	Y	$3,276.47
34502	Y	80% of billed
34510	Y	$3,276.47
34520	Y	$3,276.47
34530	Y	$1,814.25
34800	Y	80% of billed
34802	Y	80% of billed
34803	Y	80% of billed
34804	Y	80% of billed
34805	Y	80% of billed
34806	Y	80% of billed
34808	Y	80% of billed
34812	Y	80% of billed
34813	Y	80% of billed
34820	Y	80% of billed
34825	Y	80% of billed
34826	Y	80% of billed
34830	Y	80% of billed
34831	Y	80% of billed
34832	Y	80% of billed
34833	Y	80% of billed
34834	Y	80% of billed
34839	Y	80% of billed
34841	Y	80% of billed
34842	Y	80% of billed
34843	Y	80% of billed
34844	Y	80% of billed
34845	Y	80% of billed
34846	Y	80% of billed
34847	Y	80% of billed
34848	Y	80% of billed
34900	Y	80% of billed
35001	Y	80% of billed
35002	Y	80% of billed
35005	Y	80% of billed
35011	Y	$1,814.25
35013	Y	80% of billed
35021	Y	80% of billed
35022	Y	80% of billed
35045	Y	$1,814.25
35081	Y	80% of billed
35082	Y	80% of billed
35091	Y	80% of billed
35092	Y	80% of billed
35102	Y	80% of billed
35103	Y	80% of billed
35111	Y	80% of billed
35112	Y	80% of billed
35121	Y	80% of billed

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
35122	Y	80% of billed
35131	Y	80% of billed
35132	Y	80% of billed
35141	Y	80% of billed
35142	Y	80% of billed
35151	Y	80% of billed
35152	Y	80% of billed
35180	Y	$1,814.25
35182	Y	80% of billed
35184	Y	$3,276.47
35188	Y	$1,813.94
35189	Y	80% of billed
35190	Y	$1,814.25
35201	Y	$1,814.25
35206	Y	$1,814.25
35207	Y	$1,813.94
35211	Y	80% of billed
35216	Y	80% of billed
35221	Y	80% of billed
35226	Y	$498.49
35231	Y	$1,814.25
35236	Y	$3,276.47
35241	Y	80% of billed
35246	Y	80% of billed
35251	Y	80% of billed
35256	Y	$3,276.47
35261	Y	$1,814.25
35266	Y	$3,276.47
35271	Y	80% of billed
35276	Y	80% of billed
35281	Y	80% of billed
35286	Y	$3,276.47
35301	Y	80% of billed
35302	Y	80% of billed
35303	Y	80% of billed
35304	Y	80% of billed
35305	Y	80% of billed
35306	Y	80% of billed
35311	Y	80% of billed
35321	Y	$3,276.47
35331	Y	80% of billed
35341	Y	80% of billed
35351	Y	80% of billed
35355	Y	80% of billed
35361	Y	80% of billed
35363	Y	80% of billed
35371	Y	80% of billed
35372	Y	80% of billed
35390	Y	80% of billed
35400	Y	80% of billed
35450	Y	80% of billed
35452	Y	80% of billed
35458	Y	$3,622.61
35460	Y	$3,226.62
35471	Y	$3,622.61
35472	Y	$3,622.61
35475	Y	$1,854.77
35476	Y	$1,755.24
35500	N	packaged
35501	Y	80% of billed
35506	Y	80% of billed
35508	Y	80% of billed
35509	Y	80% of billed
35510	Y	80% of billed
35511	Y	80% of billed
35512	Y	80% of billed
35515	Y	80% of billed
35516	Y	80% of billed
35518	Y	80% of billed
35521	Y	80% of billed
35522	Y	80% of billed
35523	Y	80% of billed
35525	Y	80% of billed
35526	Y	80% of billed
35531	Y	80% of billed
35533	Y	80% of billed
35535	Y	80% of billed
35536	Y	80% of billed

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
35537	Y	80% of billed
35538	Y	80% of billed
35539	Y	80% of billed
35540	Y	80% of billed
35556	Y	80% of billed
35558	Y	80% of billed
35560	Y	80% of billed
35563	Y	80% of billed
35565	Y	80% of billed
35566	Y	80% of billed
35570	Y	80% of billed
35571	Y	80% of billed
35572	N	packaged
35583	Y	80% of billed
35585	Y	80% of billed
35587	Y	80% of billed
35600	Y	80% of billed
35601	Y	80% of billed
35606	Y	80% of billed
35612	Y	80% of billed
35616	Y	80% of billed
35621	Y	80% of billed
35623	Y	80% of billed
35626	Y	80% of billed
35631	Y	80% of billed
35632	Y	80% of billed
35633	Y	80% of billed
35634	Y	80% of billed
35636	Y	80% of billed
35637	Y	80% of billed
35638	Y	80% of billed
35642	Y	80% of billed
35645	Y	80% of billed
35646	Y	80% of billed
35647	Y	80% of billed
35650	Y	80% of billed
35654	Y	80% of billed
35656	Y	80% of billed
35661	Y	80% of billed
35663	Y	80% of billed
35665	Y	80% of billed
35666	Y	80% of billed
35671	Y	80% of billed
35681	Y	80% of billed
35682	Y	80% of billed
35683	Y	80% of billed
35685	N	packaged
35686	N	packaged
35691	Y	80% of billed
35693	Y	80% of billed
35694	Y	80% of billed
35695	Y	80% of billed
35697	Y	80% of billed
35700	Y	80% of billed
35701	Y	80% of billed
35721	Y	80% of billed
35741	Y	80% of billed
35761	Y	$1,813.94
35800	Y	80% of billed
35820	Y	80% of billed
35840	Y	80% of billed
35860	Y	$1,814.25
35870	Y	80% of billed
35875	Y	$3,275.90
35876	Y	$3,275.90
35879	Y	$3,276.47
35881	Y	$3,276.47
35883	Y	$3,276.47
35884	Y	$3,276.47
35901	Y	80% of billed
35903	Y	$1,814.25
35905	Y	80% of billed
35907	Y	80% of billed
36000	N	packaged
36002	N	$433.82
36005	N	packaged
36010	N	packaged
36011	N	packaged

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
36012	N	packaged
36013	N	packaged
36014	N	packaged
36015	N	packaged
36100	N	packaged
36120	N	packaged
36140	N	packaged
36147	Y	$768.53
36148	N	packaged
36160	N	packaged
36200	N	packaged
36215	N	packaged
36216	N	packaged
36217	N	packaged
36218	N	packaged
36221	N	packaged
36222	N	packaged
36223	N	packaged
36224	N	packaged
36225	N	packaged
36226	N	packaged
36227	N	packaged
36228	N	packaged
36245	N	packaged
36246	N	packaged
36247	N	packaged
36248	N	packaged
36251	N	packaged
36252	N	packaged
36253	N	packaged
36254	N	packaged
36260	Y	$1,813.94
36261	Y	$1,936.23
36262	N	$1,936.23
36299	N	packaged
36400	N	packaged
36405	N	packaged
36406	N	packaged
36410	N	packaged
36415	N	packaged
36416	N	packaged
36420	N	packaged
36425	N	packaged
36430	N	$63.99
36440	N	$363.30
36450	N	$363.30
36455	N	$363.30
36456	**Y**	**$368.73**
36460	Y	$363.35
36468	N	packaged
36470	Y	$197.33
36471	Y	$202.01
36473	**Y**	**$1,925.33**
36474	**N**	**packaged**
36475	Y	$1,813.94
36476	N	packaged
36478	Y	$1,813.94
36479	N	packaged
36481	N	packaged
36500	N	packaged
36510	N	packaged
36511	N	$1,090.42
36512	N	$1,090.42
36513	N	$1,090.42
36514	N	$1,090.42
36515	N	$3,138.13
36516	N	$3,138.13
36522	N	$3,138.13
36555	Y	$768.53
36556	Y	$768.53
36557	Y	$1,813.94
36558	Y	$1,813.94
36560	Y	$1,813.94
36561	Y	$1,813.94
36563	Y	$3,275.90
36565	Y	$1,813.94
36566	Y	$3,275.90
36568	Y	$768.53

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
36569	Y	$768.53
36570	Y	$1,813.94
36571	Y	$1,813.94
36575	Y	$475.70
36576	Y	$768.53
36578	Y	$1,813.94
36580	Y	$768.53
36581	Y	$1,813.94
36582	Y	$1,813.94
36583	Y	$3,275.90
36584	Y	$768.53
36585	Y	$1,813.94
36589	N	$475.70
36590	N	$768.53
36591	N	packaged
36592	N	packaged
36593	Y	$56.38
36595	Y	$654.07
36596	Y	$768.53
36597	Y	$768.53
36598	Y	$152.73
36600	N	packaged
36620	N	packaged
36625	N	packaged
36640	Y	$1,813.94
36660	Y	80% of billed
36680	N	packaged
36800	Y	$1,813.94
36810	Y	$3,275.90
36815	Y	$1,813.94
36818	Y	$1,813.94
36819	Y	$3,275.90
36820	Y	$1,813.94
36821	Y	$1,813.94
36823	Y	80% of billed
36825	Y	$3,275.90
36830	Y	$3,275.90
36831	Y	$1,813.94
36832	Y	$3,275.90
36833	Y	$3,275.90
36835	Y	$1,813.94
36838	Y	$3,276.47
36860	Y	$768.53
36861	Y	$3,275.90
36870	Y	$3,226.62
36901	**Y**	**$646.60**
36902	**Y**	**$4,229.05**
36903	**Y**	**$6,564.62**
36904	**Y**	**$4,229.05**
36905	**Y**	**$6,564.62**
36906	**Y**	**$8,469.28**
36907	**N**	**packaged**
36908	**N**	**packaged**
36909	**N**	**packaged**
37140	Y	80% of billed
37145	Y	80% of billed
37160	Y	80% of billed
37180	Y	80% of billed
37181	Y	80% of billed
37182	Y	80% of billed
37183	Y	$3,622.61
37184	Y	$3,275.90
37185	N	packaged
37186	N	packaged
37187	Y	$3,275.90
37188	Y	$1,813.94
37191	Y	$3,276.47
37192	Y	$1,814.25
37193	Y	$1,814.25
37195	Y	$204.47
37197	Y	$1,813.94
37200	Y	$3,275.90
37211	Y	$3,275.90
37212	Y	$768.53
37213	Y	$1,814.25
37214	Y	$1,814.25
37215	Y	80% of billed
37216	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
37217	Y	80% of billed
37218	Y	80% of billed
37220	Y	$3,226.62
37221	Y	$6,613.85
37222	N	packaged
37223	N	packaged
37224	Y	$3,226.62
37225	Y	$6,613.85
37226	Y	$6,613.85
37227	Y	$9,297.21
37228	Y	$6,613.85
37229	Y	$9,297.21
37230	Y	$9,297.21
37231	Y	$9,297.21
37232	N	packaged
37233	N	packaged
37234	N	packaged
37235	N	packaged
37236	Y	$6,613.85
37237	N	packaged
37238	Y	$6,613.85
37239	N	packaged
37241	Y	$6,613.85
37242	Y	$6,613.85
37243	Y	$6,613.85
37244	Y	$5,898.57
37246	**Y**	**$4,229.05**
37247	**N**	**packaged**
37248	**Y**	**$4,229.05**
37249	**N**	**packaged**
37252	N	packaged
37253	N	packaged
37500	Y	$3,275.90
37501	Y	$768.66
37565	Y	$1,814.25
37600	Y	$1,814.25
37605	Y	$1,814.25
37606	Y	$1,814.25
37607	Y	$1,813.94
37609	Y	$1,458.18
37615	Y	$3,276.47
37616	Y	80% of billed
37617	Y	80% of billed
37618	Y	80% of billed
37619	Y	$3,276.47
37650	Y	$1,813.94
37660	Y	80% of billed
37700	Y	$1,813.94
37718	Y	$1,813.94
37722	Y	$1,813.94
37735	Y	$1,813.94
37760	Y	$1,813.94
37761	Y	$1,813.94
37765	Y	$493.79
37766	Y	$556.86
37780	Y	$1,813.94
37785	Y	$1,813.94
37788	Y	80% of billed
37790	Y	$2,172.08
37799	Y	$768.66
38100	Y	80% of billed
38101	Y	80% of billed
38102	Y	80% of billed
38115	Y	80% of billed
38120	Y	$6,410.84
38129	Y	$3,999.42
38200	N	packaged
38204	N	packaged
38205	Y	80% of billed
38206	N	$1,090.42
38207	Y	$363.35
38208	Y	$363.35
38209	Y	$363.35
38210	Y	$1,090.61
38211	Y	$1,090.61
38212	Y	$1,090.61
38213	Y	$1,090.61
38214	Y	$1,090.61

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
38215	Y	$1,090.61
38220	Y	$224.60
38221	Y	$217.30
38230	N	$3,138.13
38232	N	$3,138.13
38240	Y	$3,138.68
38241	N	$3,138.13
38242	N	$1,090.42
38243	N	$1,090.42
38300	Y	$1,458.18
38305	Y	$1,458.18
38308	Y	$2,267.91
38380	Y	80% of billed
38381	Y	80% of billed
38382	Y	80% of billed
38500	Y	$2,267.91
38505	Y	$954.54
38510	Y	$2,267.91
38520	Y	$2,267.91
38525	Y	$2,267.91
38530	Y	$2,267.91
38542	Y	$3,594.09
38550	Y	$2,267.91
38555	Y	$3,710.51
38562	Y	80% of billed
38564	Y	80% of billed
38570	Y	$3,594.09
38571	Y	$5,475.95
38572	Y	$5,475.95
38589	Y	$3,999.42
38700	Y	$3,710.51
38720	Y	$3,711.16
38724	Y	80% of billed
38740	Y	$3,594.09
38745	Y	$3,594.09
38746	Y	80% of billed
38747	Y	80% of billed
38760	Y	$2,267.91
38765	Y	80% of billed
38770	Y	80% of billed
38780	Y	80% of billed
38790	N	packaged
38792	N	packaged
38794	N	packaged
38900	N	packaged
38999	Y	$363.35
39000	Y	80% of billed
39010	Y	80% of billed
39200	Y	80% of billed
39220	Y	80% of billed
39401	Y	$3,263.15
39402	Y	$3,263.15
39499	Y	80% of billed
39501	Y	80% of billed
39503	Y	80% of billed
39540	Y	80% of billed
39541	Y	80% of billed
39545	Y	80% of billed
39560	Y	80% of billed
39561	Y	80% of billed
39599	Y	80% of billed
40490	Y	$152.99
40500	Y	$1,666.41
40510	Y	$1,666.41
40520	Y	$1,666.41
40525	Y	$1,666.41
40527	Y	$3,578.58
40530	Y	$1,666.41
40650	Y	$713.12
40652	Y	$713.12
40654	Y	$713.12
40700	Y	$3,578.58
40701	Y	$3,578.58
40702	Y	$3,578.58
40720	Y	$3,578.58
40761	Y	$3,578.58
40799	Y	$134.28
40800	Y	$236.32

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
40801	Y	$713.12
40804	N	packaged
40805	Y	$512.69
40806	Y	$194.88
40808	Y	$286.01
40810	Y	$295.78
40812	Y	$377.62
40814	Y	$1,666.41
40816	Y	$1,666.41
40818	Y	$324.93
40819	Y	$1,666.41
40820	Y	$411.95
40830	Y	$324.93
40831	Y	$713.12
40840	Y	$1,666.41
40842	Y	$3,578.58
40843	Y	$1,666.41
40844	Y	$3,578.58
40845	Y	$3,578.58
40899	Y	$134.28
41000	Y	$211.98
41005	Y	$324.93
41006	Y	$713.12
41007	Y	$713.12
41008	Y	$1,666.41
41009	Y	$324.93
41010	Y	$713.12
41015	Y	$324.93
41016	Y	$1,666.41
41017	Y	$1,666.41
41018	Y	$713.12
41019	Y	$1,666.41
41100	Y	$216.60
41105	Y	$217.87
41108	Y	$198.63
41110	Y	$291.15
41112	Y	$1,666.41
41113	Y	$1,666.41
41114	Y	$1,666.41
41115	Y	$342.46
41116	Y	$1,666.41
41120	Y	$3,578.58
41130	Y	80% of billed
41135	Y	80% of billed
41140	Y	80% of billed
41145	Y	80% of billed
41150	Y	80% of billed
41153	Y	80% of billed
41155	Y	80% of billed
41250	N	packaged
41251	Y	$324.93
41252	Y	$713.12
41500	Y	$1,666.41
41510	Y	$1,666.41
41512	Y	$3,578.58
41520	Y	$3,578.58
41530	Y	$1,666.41
41599	Y	$134.28
41800	N	packaged
41805	Y	$397.43
41806	Y	$473.61
41820	Y	$1,666.41
41821	Y	$713.12
41822	Y	$384.19
41823	Y	$525.80
41825	Y	$303.04
41826	Y	$427.81
41827	Y	$3,578.58
41828	Y	$357.17
41830	Y	$499.10
41850	Y	$1,666.41
41870	Y	$3,578.58
41872	Y	$469.89
41874	Y	$485.91
41899	Y	$134.28
42000	Y	$324.93
42100	Y	$187.45
42104	Y	$288.51

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
42106	Y	$366.40
42107	Y	$3,578.58
42120	Y	$1,666.41
42140	Y	$1,666.41
42145	Y	$3,578.58
42160	Y	$307.00
42180	Y	$324.93
42182	Y	$1,666.41
42200	Y	$3,578.58
42205	Y	$3,578.58
42210	Y	$3,578.58
42215	Y	$3,578.58
42220	Y	$3,578.58
42225	Y	$3,578.58
42226	Y	$3,578.58
42227	Y	$3,578.58
42235	Y	$3,578.58
42260	Y	$1,666.41
42280	Y	$198.86
42281	Y	$1,666.41
42299	Y	$134.28
42300	Y	$713.12
42305	Y	$1,666.41
42310	Y	$324.93
42320	Y	$324.93
42330	Y	$275.97
42335	Y	$463.45
42340	Y	$1,666.41
42400	Y	$142.17
42405	Y	$1,666.41
42408	Y	$1,666.41
42409	Y	$1,666.41
42410	Y	$3,578.58
42415	Y	$3,578.58
42420	Y	$3,578.58
42425	Y	$3,578.58
42426	Y	80% of billed
42440	Y	$3,578.58
42450	Y	$3,578.58
42500	Y	$1,666.41
42505	Y	$3,578.58
42507	Y	$3,578.58
42509	Y	$3,578.58
42510	Y	$3,578.58
42550	N	packaged
42600	Y	$1,666.41
42650	Y	$102.66
42660	Y	$149.65
42665	Y	$3,578.58
42699	Y	$134.28
42700	Y	$324.93
42720	Y	$1,666.41
42725	Y	$3,578.58
42800	Y	$196.07
42804	Y	$1,666.41
42806	Y	$1,666.41
42808	Y	$1,666.41
42809	N	packaged
42810	Y	$1,666.41
42815	Y	$3,578.58
42820	Y	$1,666.41
42821	Y	$1,666.41
42825	Y	$3,578.58
42826	Y	$1,666.41
42830	Y	$3,578.58
42831	Y	$1,666.41
42835	Y	$1,666.41
42836	Y	$1,666.41
42842	Y	$3,970.33
42844	Y	$3,970.33
42845	Y	80% of billed
42860	Y	$3,578.58
42870	Y	$1,666.41
42890	Y	$3,578.58
42892	Y	$3,578.58
42894	Y	80% of billed
42900	Y	$713.12
42950	Y	$3,578.58

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
42953	Y	80% of billed
42955	Y	$713.12
42960	Y	$134.26
42961	Y	80% of billed
42962	Y	$1,666.41
42970	Y	$134.26
42971	Y	80% of billed
42972	Y	$1,666.41
42999	Y	$134.28
43020	Y	$713.24
43030	Y	$3,578.58
43045	Y	80% of billed
43100	Y	80% of billed
43101	Y	80% of billed
43107	Y	80% of billed
43108	Y	80% of billed
43112	Y	80% of billed
43113	Y	80% of billed
43116	Y	80% of billed
43117	Y	80% of billed
43118	Y	80% of billed
43121	Y	80% of billed
43122	Y	80% of billed
43123	Y	80% of billed
43124	Y	80% of billed
43130	Y	$3,578.58
43135	Y	80% of billed
43180	Y	$1,666.41
43191	Y	$772.85
43192	Y	$1,042.49
43193	Y	$1,042.49
43194	Y	$1,042.49
43195	Y	$1,042.49
43196	Y	$1,042.49
43197	Y	$243.76
43198	Y	$259.71
43200	Y	$772.85
43201	Y	$1,042.49
43202	Y	$772.85
43204	Y	$772.85
43205	Y	$1,042.49
43206	Y	$1,042.49
43210	Y	$2,202.33
43211	Y	$1,042.49
43212	Y	$2,202.33
43213	Y	$1,042.49
43214	Y	$1,042.49
43215	Y	$1,042.49
43216	Y	$1,749.60
43217	Y	$1,042.49
43220	Y	$1,042.49
43226	Y	$1,042.49
43227	Y	$1,042.49
43229	Y	$1,749.60
43231	Y	$1,042.49
43232	Y	$1,042.49
43233	Y	$1,042.49
43235	Y	$772.85
43236	Y	$772.85
43237	Y	$1,042.49
43238	Y	$1,042.49
43239	Y	$772.85
43240	Y	$1,749.60
43241	Y	$772.85
43242	Y	$1,042.49
43243	Y	$772.85
43244	Y	$1,042.49
43245	Y	$1,042.49
43246	Y	$1,042.49
43247	Y	$772.85
43248	Y	$772.85
43249	Y	$1,042.49
43250	Y	$1,042.49
43251	Y	$1,042.49
43252	Y	$1,042.49
43253	Y	$1,042.49
43254	Y	$1,042.49
43255	Y	$1,042.49

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
43257	Y	$1,749.60
43259	Y	$1,042.49
43260	Y	$1,749.60
43261	Y	$1,749.60
43262	Y	$1,749.60
43263	Y	$1,749.60
43264	Y	$1,749.60
43265	Y	$1,749.60
43266	Y	$2,202.33
43270	Y	$1,042.49
43273	N	packaged
43274	Y	$2,202.33
43275	Y	$1,749.60
43276	Y	$2,202.33
43277	Y	$1,749.60
43278	Y	$1,749.60
43279	Y	80% of billed
43280	Y	$6,410.84
43281	Y	$6,410.84
43282	Y	80% of billed
43283	Y	80% of billed
43284	**Y**	**$8,364.05**
43285	**N**	**$5,200.14**
43289	Y	$3,999.42
43300	Y	80% of billed
43305	Y	80% of billed
43310	Y	80% of billed
43312	Y	80% of billed
43313	Y	80% of billed
43314	Y	80% of billed
43320	Y	80% of billed
43325	Y	80% of billed
43327	Y	80% of billed
43328	Y	80% of billed
43330	Y	80% of billed
43331	Y	80% of billed
43332	Y	80% of billed
43333	Y	80% of billed
43334	Y	80% of billed
43335	Y	80% of billed
43336	Y	80% of billed
43337	Y	80% of billed
43338	Y	80% of billed
43340	Y	80% of billed
43341	Y	80% of billed
43351	Y	80% of billed
43352	Y	80% of billed
43360	Y	80% of billed
43361	Y	80% of billed
43400	Y	80% of billed
43401	Y	80% of billed
43405	Y	80% of billed
43410	Y	80% of billed
43415	Y	80% of billed
43420	Y	$1,666.69
43425	Y	80% of billed
43450	Y	$772.85
43453	Y	$1,042.49
43460	Y	80% of billed
43496	Y	80% of billed
43499	Y	$772.97
43500	Y	80% of billed
43501	Y	80% of billed
43502	Y	80% of billed
43510	Y	$772.97
43520	Y	80% of billed
43605	Y	80% of billed
43610	Y	80% of billed
43611	Y	80% of billed
43620	Y	80% of billed
43621	Y	80% of billed
43622	Y	80% of billed
43631	Y	80% of billed
43632	Y	80% of billed
43633	Y	80% of billed
43634	Y	80% of billed
43635	Y	80% of billed
43640	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
43641	Y	80% of billed
43644	Y	80% of billed
43645	Y	80% of billed
43647	Y	$2,437.62
43648	Y	$3,999.42
43651	Y	$3,999.42
43652	Y	$3,999.42
43653	Y	$3,594.09
43659	Y	$3,999.42
43752	N	$198.67
43753	N	packaged
43754	N	packaged
43755	N	$135.00
43756	N	$104.81
43757	Y	$772.85
43760	Y	$204.44
43761	Y	$772.85
43770	Y	$6,410.84
43771	Y	80% of billed
43772	Y	80% of billed
43773	Y	80% of billed
43774	Y	80% of billed
43775	Y	80% of billed
43800	Y	80% of billed
43810	Y	80% of billed
43820	Y	80% of billed
43825	Y	80% of billed
43830	Y	$1,749.91
43831	Y	$772.97
43832	Y	80% of billed
43840	Y	80% of billed
43842	Y	80% of billed
43843	Y	80% of billed
43845	Y	80% of billed
43846	Y	80% of billed
43847	Y	80% of billed
43848	Y	80% of billed
43850	Y	80% of billed
43855	Y	80% of billed
43860	Y	80% of billed
43865	Y	80% of billed
43870	Y	$1,749.60
43880	Y	80% of billed
43881	Y	80% of billed
43882	Y	80% of billed
43886	Y	$2,198.27
43887	N	$2,198.27
43888	Y	$2,198.27
43999	Y	$772.97
44005	Y	80% of billed
44010	Y	80% of billed
44015	Y	80% of billed
44020	Y	80% of billed
44021	Y	80% of billed
44025	Y	80% of billed
44050	Y	80% of billed
44055	Y	80% of billed
44100	Y	$1,042.49
44110	Y	80% of billed
44111	Y	80% of billed
44120	Y	80% of billed
44121	Y	80% of billed
44125	Y	80% of billed
44126	Y	80% of billed
44127	Y	80% of billed
44128	Y	80% of billed
44130	Y	80% of billed
44132	Y	80% of billed
44133	Y	80% of billed
44135	Y	80% of billed
44136	Y	80% of billed
44137	Y	80% of billed
44139	Y	80% of billed
44140	Y	80% of billed
44141	Y	80% of billed
44143	Y	80% of billed
44144	Y	80% of billed
44145	Y	80% of billed
44146	Y	80% of billed
44147	Y	80% of billed
44150	Y	80% of billed
44151	Y	80% of billed
44155	Y	80% of billed
44156	Y	80% of billed
44157	Y	80% of billed
44158	Y	80% of billed
44160	Y	80% of billed
44180	Y	$3,999.42
44186	Y	$3,999.42
44187	Y	80% of billed
44188	Y	80% of billed
44202	Y	80% of billed
44203	Y	80% of billed
44204	Y	80% of billed
44205	Y	80% of billed
44206	Y	80% of billed
44207	Y	80% of billed
44208	Y	80% of billed
44210	Y	80% of billed
44211	Y	80% of billed
44212	Y	80% of billed
44213	Y	80% of billed
44227	Y	80% of billed
44238	Y	$3,999.42
44300	Y	80% of billed
44310	Y	80% of billed
44312	Y	$2,198.27
44314	Y	80% of billed
44316	Y	80% of billed
44320	Y	80% of billed
44322	Y	80% of billed
44340	Y	$2,198.27
44345	Y	80% of billed
44346	Y	80% of billed
44360	Y	$772.85
44361	Y	$1,042.49
44363	Y	$1,042.49
44364	Y	$1,042.49
44365	Y	$1,042.49
44366	Y	$1,042.49
44369	Y	$1,042.49
44370	Y	$2,202.33
44372	Y	$1,042.49
44373	Y	$1,042.49
44376	Y	$1,042.49
44377	Y	$1,042.49
44378	Y	$1,042.49
44379	Y	$2,202.33
44380	Y	$772.85
44381	Y	$772.85
44382	Y	$772.85
44384	Y	$2,202.33
44385	Y	$782.23
44386	Y	$782.23
44388	Y	$782.23
44389	Y	$782.23
44390	Y	$782.23
44391	Y	$782.23
44392	Y	$782.23
44394	Y	$782.23
44401	Y	$782.23
44402	Y	$2,202.33
44403	Y	$782.23
44404	Y	$782.23
44405	Y	$782.23
44406	Y	$782.23
44407	Y	$782.23
44408	Y	$782.23
44500	Y	$475.70
44602	Y	80% of billed
44603	Y	80% of billed
44604	Y	80% of billed
44605	Y	80% of billed
44615	Y	80% of billed
44620	Y	80% of billed
44625	Y	80% of billed
44626	Y	80% of billed
44640	Y	80% of billed
44650	Y	80% of billed
44660	Y	80% of billed
44661	Y	80% of billed
44680	Y	80% of billed
44700	Y	80% of billed
44701	N	packaged
44705	Y	80% of billed
44715	Y	80% of billed
44720	Y	80% of billed
44721	Y	80% of billed
44799	Y	$2,404.74
44800	Y	80% of billed
44820	Y	80% of billed
44850	Y	80% of billed
44899	Y	80% of billed
44900	Y	80% of billed
44950	Y	$2,404.74
44955	N	packaged
44960	Y	80% of billed
44970	Y	$3,999.42
44979	Y	$3,999.42
45000	Y	$1,723.09
45005	Y	$1,723.09
45020	Y	$1,723.09
45100	Y	$1,723.09
45108	Y	$2,394.96
45110	Y	80% of billed
45111	Y	80% of billed
45112	Y	80% of billed
45113	Y	80% of billed
45114	Y	80% of billed
45116	Y	80% of billed
45119	Y	80% of billed
45120	Y	80% of billed
45121	Y	80% of billed
45123	Y	80% of billed
45126	Y	80% of billed
45130	Y	80% of billed
45135	Y	80% of billed
45136	Y	80% of billed
45150	Y	$1,723.09
45160	Y	$1,723.09
45171	Y	$2,394.96
45172	Y	$2,394.96
45190	Y	$1,723.09
45300	Y	$171.75
45303	Y	$782.23
45305	Y	$1,723.09
45307	Y	$1,723.09
45308	Y	$1,723.09
45309	Y	$1,723.09
45315	Y	$1,723.09
45317	Y	$782.23
45320	Y	$2,394.96
45321	Y	$1,723.09
45327	Y	$2,202.33
45330	Y	$252.29
45331	Y	$511.72
45332	Y	$782.23
45333	Y	$511.72
45334	Y	$782.23
45335	Y	$511.72
45337	Y	$782.23
45338	Y	$782.23
45340	Y	$782.23
45341	Y	$782.23
45342	Y	$1,723.09
45346	Y	$782.23
45347	Y	$2,202.33
45349	Y	$782.23
45350	Y	$782.23
45378	Y	$782.23
45379	Y	$782.23
45380	Y	$782.23
45381	Y	$782.23
45382	Y	$782.23

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
45384	Y	$782.23
45385	Y	$782.23
45386	Y	$782.23
45388	Y	$782.23
45389	Y	$2,202.33
45390	Y	$782.23
45391	Y	$782.23
45392	Y	$1,723.09
45393	Y	$782.23
45395	Y	80% of billed
45397	Y	80% of billed
45398	Y	$782.23
45399	Y	$782.37
45400	Y	80% of billed
45402	Y	80% of billed
45499	Y	$3,999.42
45500	Y	$1,723.09
45505	Y	$2,394.96
45520	N	packaged
45540	Y	80% of billed
45541	Y	$2,394.96
45550	Y	80% of billed
45560	Y	$2,394.96
45562	Y	80% of billed
45563	Y	80% of billed
45800	Y	80% of billed
45805	Y	80% of billed
45820	Y	80% of billed
45825	Y	80% of billed
45900	Y	$511.72
45905	Y	$1,723.09
45910	Y	$1,723.09
45915	Y	$1,723.09
45990	Y	$1,723.09
45999	Y	$511.82
46020	Y	$1,723.09
46030	Y	$782.23
46040	Y	$1,723.09
46045	Y	$1,723.09
46050	Y	$511.72
46060	Y	$1,723.09
46070	Y	$1,723.09
46080	Y	$1,723.09
46083	Y	$211.94
46200	Y	$1,723.09
46220	Y	$1,723.09
46221	Y	$328.18
46230	Y	$1,723.09
46250	Y	$1,723.09
46255	Y	$1,723.09
46257	Y	$1,723.09
46258	Y	$2,394.96
46260	Y	$2,394.96
46261	Y	$2,394.96
46262	Y	$2,394.96
46270	Y	$1,723.09
46275	Y	$1,723.09
46280	Y	$1,723.09
46285	Y	$1,723.09
46288	Y	$2,394.96
46320	Y	$219.23
46500	Y	$259.60
46505	Y	$1,723.09
46600	N	packaged
46601	N	packaged
46604	Y	$1,090.18
46606	Y	$334.16
46607	Y	$782.23
46608	Y	$782.23
46610	Y	$1,723.09
46611	Y	$782.23
46612	Y	$1,723.09
46614	Y	$166.41
46615	Y	$1,723.09
46700	Y	$1,723.09
46705	Y	80% of billed
46706	Y	$2,394.96
46707	Y	$2,394.96

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
46710	Y	80% of billed
46712	Y	80% of billed
46715	Y	80% of billed
46716	Y	80% of billed
46730	Y	80% of billed
46735	Y	80% of billed
46740	Y	80% of billed
46742	Y	80% of billed
46744	Y	80% of billed
46746	Y	80% of billed
46748	Y	80% of billed
46750	Y	$2,394.96
46751	Y	80% of billed
46753	Y	$2,394.96
46754	Y	$1,723.09
46760	Y	$2,394.96
46761	Y	$2,394.96
46762	Y	$2,202.33
46900	Y	$234.75
46910	Y	$336.95
46916	Y	$234.75
46917	Y	$1,723.09
46922	Y	$1,723.09
46924	Y	$1,723.09
46930	Y	$268.28
46940	Y	$252.44
46942	Y	$251.62
46945	Y	$411.89
46946	Y	$1,723.09
46947	Y	$2,394.96
46999	Y	$511.82
47000	Y	$954.54
47001	N	packaged
47010	Y	80% of billed
47015	Y	80% of billed
47100	Y	80% of billed
47120	Y	80% of billed
47122	Y	80% of billed
47125	Y	80% of billed
47130	Y	80% of billed
47133	Y	80% of billed
47135	Y	80% of billed
47140	Y	80% of billed
47141	Y	80% of billed
47142	Y	80% of billed
47143	Y	80% of billed
47144	Y	80% of billed
47145	Y	80% of billed
47146	Y	80% of billed
47147	Y	80% of billed
47300	Y	80% of billed
47350	Y	80% of billed
47360	Y	80% of billed
47361	Y	80% of billed
47362	Y	80% of billed
47370	Y	$6,410.84
47371	Y	$6,410.84
47379	Y	$3,999.42
47380	Y	80% of billed
47381	Y	80% of billed
47382	Y	$3,236.18
47383	Y	$3,236.18
47399	Y	$236.35
47400	Y	80% of billed
47420	Y	80% of billed
47425	Y	80% of billed
47460	Y	80% of billed
47480	Y	80% of billed
47490	Y	$1,616.15
47531	N	packaged
47532	N	packaged
47533	Y	$1,615.87
47534	Y	$1,615.87
47535	Y	$1,615.87
47536	Y	$1,615.87
47537	N	$475.70
47538	Y	$3,236.18
47539	Y	$3,236.18

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
47540	Y	$3,236.18
47541	Y	$1,615.87
47542	N	packaged
47543	N	packaged
47544	N	packaged
47550	Y	80% of billed
47552	Y	$1,615.87
47553	Y	$3,236.18
47554	Y	$3,236.18
47555	Y	$1,615.87
47556	Y	$3,236.18
47562	Y	$3,594.09
47563	Y	$3,594.09
47564	Y	$3,594.09
47570	Y	80% of billed
47579	Y	$3,999.42
47600	Y	80% of billed
47605	Y	80% of billed
47610	Y	80% of billed
47612	Y	80% of billed
47620	Y	80% of billed
47700	Y	80% of billed
47701	Y	80% of billed
47711	Y	80% of billed
47712	Y	80% of billed
47715	Y	80% of billed
47720	Y	80% of billed
47721	Y	80% of billed
47740	Y	80% of billed
47741	Y	80% of billed
47760	Y	80% of billed
47765	Y	80% of billed
47780	Y	80% of billed
47785	Y	80% of billed
47800	Y	80% of billed
47801	Y	80% of billed
47802	Y	80% of billed
47900	Y	80% of billed
47999	Y	$1,616.15
48000	Y	80% of billed
48001	Y	80% of billed
48020	Y	80% of billed
48100	Y	80% of billed
48102	Y	$954.54
48105	Y	80% of billed
48120	Y	80% of billed
48140	Y	80% of billed
48145	Y	80% of billed
48146	Y	80% of billed
48148	Y	80% of billed
48150	Y	80% of billed
48152	Y	80% of billed
48153	Y	80% of billed
48154	Y	80% of billed
48155	Y	80% of billed
48160	Y	80% of billed
48400	Y	80% of billed
48500	Y	80% of billed
48510	Y	80% of billed
48520	Y	80% of billed
48540	Y	80% of billed
48545	Y	80% of billed
48547	Y	80% of billed
48548	Y	80% of billed
48550	Y	80% of billed
48551	Y	80% of billed
48552	Y	80% of billed
48554	Y	80% of billed
48556	Y	80% of billed
48999	Y	$236.35
49000	Y	80% of billed
49002	Y	80% of billed
49010	Y	80% of billed
49020	Y	80% of billed
49040	Y	80% of billed
49060	Y	80% of billed
49062	Y	80% of billed
49082	Y	$475.70

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
49083	Y	$475.70
49084	Y	$475.70
49180	Y	$954.54
49185	Y	$954.71
49203	Y	80% of billed
49204	Y	80% of billed
49205	Y	80% of billed
49215	Y	80% of billed
49220	Y	80% of billed
49250	Y	$2,404.32
49255	Y	80% of billed
49320	Y	$3,594.09
49321	Y	$3,594.09
49322	Y	$3,594.09
49323	Y	$3,999.42
49324	Y	$3,594.09
49325	Y	$3,594.09
49326	N	packaged
49327	N	packaged
49329	Y	$3,999.42
49400	N	packaged
49402	Y	$2,404.32
49405	Y	$954.71
49406	Y	$1,458.18
49407	Y	$954.54
49411	N	$755.68
49412	Y	80% of billed
49418	Y	$1,615.87
49419	Y	$1,813.94
49421	Y	$2,404.32
49422	N	$1,813.94
49423	Y	$971.07
49424	N	packaged
49425	Y	80% of billed
49426	Y	$2,404.32
49427	N	packaged
49428	Y	80% of billed
49429	N	$1,813.94
49435	N	packaged
49436	Y	$971.07
49440	Y	$1,042.49
49441	Y	$1,042.49
49442	Y	$1,723.09
49446	Y	$1,042.49
49450	Y	$475.70
49451	Y	$475.70
49452	Y	$475.70
49460	Y	$475.70
49465	N	$104.81
49491	Y	$2,404.74
49492	Y	$2,404.74
49495	Y	$2,404.32
49496	Y	$2,404.32
49500	Y	$2,404.32
49501	Y	$2,404.32
49505	Y	$2,404.32
49507	Y	$2,404.32
49520	Y	$2,404.32
49521	Y	$2,404.32
49525	Y	$2,404.32
49540	Y	$2,404.32
49550	Y	$2,404.32
49553	Y	$2,404.32
49555	Y	$2,404.32
49557	Y	$2,404.32
49560	Y	$2,404.32
49561	Y	$2,404.32
49565	Y	$2,404.32
49566	Y	$2,404.32
49568	N	packaged
49570	Y	$2,404.32
49572	Y	$2,404.32
49580	Y	$2,404.32
49582	Y	$2,404.32
49585	Y	$2,404.32
49587	Y	$2,404.32
49590	Y	$2,404.32
49600	Y	$2,404.32
49605	Y	80% of billed
49606	Y	80% of billed
49610	Y	80% of billed
49611	Y	80% of billed
49650	Y	$3,594.09
49651	Y	$3,594.09
49652	Y	$3,594.09
49653	Y	$3,594.09
49654	Y	$5,475.95
49655	Y	$5,475.95
49656	Y	$5,475.95
49657	Y	$5,475.95
49659	Y	$3,999.42
49900	Y	80% of billed
49904	Y	80% of billed
49905	Y	80% of billed
49906	Y	80% of billed
49999	Y	$2,404.74
50010	Y	80% of billed
50020	Y	$1,534.78
50040	Y	80% of billed
50045	Y	80% of billed
50060	Y	80% of billed
50065	Y	80% of billed
50070	Y	80% of billed
50075	Y	80% of billed
50080	Y	$6,805.76
50081	Y	$6,805.76
50100	Y	80% of billed
50120	Y	80% of billed
50125	Y	80% of billed
50130	Y	80% of billed
50135	Y	80% of billed
50200	Y	$1,458.18
50205	Y	80% of billed
50220	Y	80% of billed
50225	Y	80% of billed
50230	Y	80% of billed
50234	Y	80% of billed
50236	Y	80% of billed
50240	Y	80% of billed
50250	Y	80% of billed
50280	Y	80% of billed
50290	Y	80% of billed
50300	Y	80% of billed
50320	Y	80% of billed
50323	Y	80% of billed
50325	Y	80% of billed
50327	Y	80% of billed
50328	Y	80% of billed
50329	Y	80% of billed
50340	Y	80% of billed
50360	Y	80% of billed
50365	Y	80% of billed
50370	Y	80% of billed
50380	Y	80% of billed
50382	Y	$1,534.52
50384	N	$1,534.52
50385	Y	$1,534.52
50386	N	$1,141.27
50387	Y	$971.07
50389	N	$543.75
50390	Y	$954.54
50391	Y	$86.08
50395	Y	$2,172.08
50396	Y	$543.75
50400	Y	80% of billed
50405	Y	80% of billed
50430	N	packaged
50431	N	packaged
50432	Y	$1,534.52
50433	Y	$1,534.52
50434	Y	$543.75
50435	Y	$543.75
50500	Y	80% of billed
50520	Y	80% of billed
50525	Y	80% of billed
50526	Y	80% of billed
50540	Y	80% of billed
50541	Y	$3,999.42
50542	Y	$6,410.84
50543	Y	$6,410.84
50544	Y	$6,410.84
50545	Y	80% of billed
50546	Y	80% of billed
50547	Y	80% of billed
50548	Y	80% of billed
50549	Y	$3,999.42
50551	Y	$2,172.08
50553	Y	$3,133.02
50555	Y	$2,172.08
50557	Y	$6,805.76
50561	Y	$3,133.02
50562	Y	$2,172.08
50570	Y	$1,534.52
50572	Y	$543.75
50574	Y	$543.75
50575	Y	$3,133.02
50576	Y	$1,534.52
50580	Y	$1,534.52
50590	Y	$3,133.02
50592	Y	$3,236.18
50593	Y	$3,236.18
50600	Y	80% of billed
50605	Y	80% of billed
50606	N	packaged
50610	Y	80% of billed
50620	Y	80% of billed
50630	Y	80% of billed
50650	Y	80% of billed
50660	Y	80% of billed
50684	N	packaged
50686	N	$135.00
50688	Y	$971.07
50690	N	packaged
50693	Y	$2,172.08
50694	Y	$2,172.08
50695	Y	$2,172.08
50700	Y	80% of billed
50705	N	packaged
50706	N	packaged
50715	Y	80% of billed
50722	Y	80% of billed
50725	Y	80% of billed
50727	Y	$2,172.08
50728	Y	80% of billed
50740	Y	80% of billed
50750	Y	80% of billed
50760	Y	80% of billed
50770	Y	80% of billed
50780	Y	80% of billed
50782	Y	80% of billed
50783	Y	80% of billed
50785	Y	80% of billed
50800	Y	80% of billed
50810	Y	80% of billed
50815	Y	80% of billed
50820	Y	80% of billed
50825	Y	80% of billed
50830	Y	80% of billed
50840	Y	80% of billed
50845	Y	80% of billed
50860	Y	80% of billed
50900	Y	80% of billed
50920	Y	80% of billed
50930	Y	80% of billed
50940	Y	80% of billed
50945	Y	$3,999.42
50947	Y	$3,594.09
50948	Y	$5,475.95
50949	Y	$3,999.42
50951	Y	$1,534.52
50953	Y	$2,172.08
50955	Y	$2,172.08
50957	Y	$3,133.02
50961	Y	$1,534.52

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
50970	Y	$543.75
50972	Y	$543.75
50974	Y	$3,133.02
50976	Y	$3,133.02
50980	Y	$2,172.08
51020	Y	$2,172.08
51030	Y	$2,172.08
51040	Y	$1,534.52
51045	Y	$1,534.52
51050	Y	$3,133.02
51060	Y	$2,172.45
51065	Y	$3,133.02
51080	Y	$954.54
51100	Y	$57.77
51101	N	$159.33
51102	Y	$1,534.52
51500	Y	$2,404.32
51520	Y	$2,172.08
51525	Y	80% of billed
51530	Y	80% of billed
51535	Y	$2,172.08
51550	Y	80% of billed
51555	Y	80% of billed
51565	Y	80% of billed
51570	Y	80% of billed
51575	Y	80% of billed
51580	Y	80% of billed
51585	Y	80% of billed
51590	Y	80% of billed
51595	Y	80% of billed
51596	Y	80% of billed
51597	Y	80% of billed
51600	N	packaged
51605	N	packaged
51610	N	packaged
51700	Y	$90.67
51701	N	packaged
51702	N	packaged
51703	N	$135.00
51705	Y	$103.82
51710	Y	$475.70
51715	Y	$2,172.08
51720	Y	$93.95
51725	Y	$203.04
51726	Y	$543.75
51727	Y	$380.55
51728	Y	$389.19
51729	Y	$395.82
51736	N	packaged
51741	N	packaged
51784	N	$135.00
51785	Y	$211.94
51792	N	packaged
51797	N	packaged
51798	N	packaged
51800	Y	80% of billed
51820	Y	80% of billed
51840	Y	80% of billed
51841	Y	80% of billed
51845	Y	$3,125.56
51860	Y	$3,409.22
51865	Y	80% of billed
51880	Y	$1,534.52
51900	Y	80% of billed
51920	Y	80% of billed
51925	Y	80% of billed
51940	Y	80% of billed
51960	Y	80% of billed
51980	Y	80% of billed
51990	Y	$3,999.42
51992	Y	$3,594.09
51999	Y	$3,999.42
52000	Y	$543.75
52001	Y	$1,534.52
52005	Y	$1,534.52
52007	Y	$2,172.08
52010	Y	$543.75
52204	Y	$1,534.52

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
52214	Y	$1,534.52
52224	Y	$1,534.52
52234	Y	$2,172.08
52235	Y	$2,172.08
52240	Y	$2,172.08
52250	Y	$2,172.08
52260	Y	$1,534.52
52265	Y	$461.34
52270	Y	$1,534.52
52275	Y	$1,534.52
52276	Y	$1,534.52
52277	Y	$2,172.08
52281	Y	$1,534.52
52282	Y	$2,172.08
52283	Y	$1,534.52
52285	Y	$1,534.52
52287	Y	$1,534.52
52290	Y	$1,534.52
52300	Y	$1,534.52
52301	Y	$2,172.08
52305	Y	$3,133.02
52310	Y	$1,534.52
52315	Y	$1,534.52
52317	Y	$2,172.08
52318	Y	$3,133.02
52320	Y	$2,172.08
52325	Y	$2,172.08
52327	Y	$2,172.08
52330	Y	$2,172.08
52332	Y	$2,172.08
52334	Y	$2,172.08
52341	Y	$2,172.08
52342	Y	$2,172.08
52343	Y	$1,534.52
52344	Y	$2,172.08
52345	Y	$2,172.08
52346	Y	$3,133.02
52351	Y	$2,172.08
52352	Y	$2,172.08
52353	Y	$3,133.02
52354	Y	$2,172.08
52355	Y	$3,133.02
52356	Y	$3,133.02
52400	Y	$2,172.08
52402	Y	$2,172.08
52441	Y	80% of billed
52442	Y	80% of billed
52450	Y	$2,172.08
52500	Y	$2,172.08
52601	Y	$3,133.02
52630	Y	$3,133.02
52640	Y	$2,172.08
52647	Y	$3,133.02
52648	Y	$3,133.02
52649	Y	$3,133.02
52700	Y	$2,172.08
53000	Y	$2,172.08
53010	Y	$3,133.02
53020	Y	$1,534.52
53025	Y	$1,534.52
53040	Y	$2,172.08
53060	Y	$146.82
53080	Y	$1,534.52
53085	Y	$1,534.52
53200	Y	$2,172.08
53210	Y	$3,133.02
53215	Y	$3,133.02
53220	Y	$2,172.08
53230	Y	$2,172.08
53235	Y	$3,133.02
53240	Y	$3,133.02
53250	Y	$1,534.52
53260	Y	$1,534.52
53265	Y	$1,534.52
53270	Y	$2,172.08
53275	Y	$2,172.08
53400	Y	$3,133.02
53405	Y	$3,133.02

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
53410	Y	$3,133.02
53415	Y	80% of billed
53420	Y	$3,133.02
53425	Y	$3,133.02
53430	Y	$2,172.08
53431	Y	$3,133.02
53440	N	$6,805.76
53442	Y	$3,133.02
53444	N	$6,805.76
53445	N	$6,706.47
53446	N	$3,133.02
53447	N	$6,706.47
53448	Y	80% of billed
53449	Y	$3,133.02
53450	Y	$2,172.08
53460	Y	$2,172.08
53500	Y	$2,172.45
53502	Y	$2,172.08
53505	Y	$3,133.02
53510	Y	$3,133.02
53515	Y	$3,133.02
53520	Y	$3,133.02
53600	Y	$67.02
53601	N	packaged
53605	Y	$1,534.52
53620	Y	$99.62
53621	Y	$105.12
53660	N	$80.65
53661	N	packaged
53665	Y	$1,534.52
53850	Y	$1,534.52
53852	Y	$2,693.25
53855	Y	$543.75
53860	Y	$1,534.52
53899	Y	$211.96
54000	Y	$1,534.52
54001	Y	$1,534.52
54015	Y	$954.54
54050	N	packaged
54055	Y	$130.27
54056	N	packaged
54057	Y	$1,464.09
54060	Y	$1,464.09
54065	Y	$1,464.09
54100	Y	$954.54
54105	Y	$1,458.18
54110	Y	$2,172.08
54111	Y	$3,133.02
54112	Y	$6,805.76
54115	Y	$1,458.18
54120	Y	$2,172.08
54125	Y	80% of billed
54130	Y	80% of billed
54135	Y	80% of billed
54150	Y	$1,534.52
54160	Y	$1,534.52
54161	Y	$1,534.52
54162	Y	$1,534.52
54163	Y	$1,534.52
54164	Y	$1,534.52
54200	Y	$118.93
54205	Y	$3,133.02
54220	Y	$211.94
54230	N	packaged
54231	Y	$112.23
54235	Y	$82.15
54240	N	$64.66
54250	Y	$19.06
54300	Y	$2,172.08
54304	Y	$2,172.08
54308	Y	$3,133.02
54312	Y	$2,172.08
54316	Y	$3,133.02
54318	Y	$2,172.08
54322	Y	$2,172.08
54324	Y	$2,172.08
54326	Y	$3,133.02
54328	Y	$2,172.08

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
54332	Y	$2,172.45
54336	Y	$2,172.45
54340	Y	$2,172.08
54344	Y	$3,133.02
54348	Y	$2,172.08
54352	Y	$3,133.02
54360	Y	$2,172.08
54380	Y	$2,172.08
54385	Y	$2,172.08
54390	Y	80% of billed
54400	N	$6,805.76
54401	N	$6,706.47
54405	N	$6,706.47
54406	N	$2,172.08
54408	Y	$3,133.02
54410	N	$6,706.47
54411	Y	$4,464.21
54415	N	$2,172.08
54416	N	$6,706.47
54417	Y	$4,464.21
54420	Y	$1,534.52
54430	Y	80% of billed
54435	Y	$1,534.52
54437	Y	$1,534.52
54438	Y	80% of billed
54440	Y	$2,172.08
54450	Y	$211.94
54500	Y	$1,458.18
54505	Y	$2,172.08
54512	Y	$2,172.08
54520	Y	$2,172.08
54522	Y	$2,172.08
54530	Y	$2,404.32
54535	Y	$2,172.45
54550	Y	$2,404.32
54560	Y	$1,534.52
54600	Y	$2,172.08
54620	Y	$1,534.52
54640	Y	$2,404.32
54650	Y	$2,404.74
54660	Y	$3,133.02
54670	Y	$1,534.52
54680	Y	$1,534.52
54690	Y	$3,594.09
54692	Y	$3,594.09
54699	Y	$3,999.42
54700	Y	$1,534.52
54800	Y	$1,458.18
54830	Y	$2,172.08
54840	Y	$2,172.08
54860	Y	$2,172.08
54861	Y	$2,172.08
54865	Y	$2,172.08
54900	Y	$1,534.52
54901	Y	$2,172.08
55000	Y	$114.92
55040	Y	$2,404.32
55041	Y	$2,404.32
55060	Y	$2,172.08
55100	Y	$954.54
55110	Y	$2,172.08
55120	Y	$1,534.52
55150	Y	$2,172.08
55175	Y	$2,172.08
55180	Y	$3,133.02
55200	Y	$1,534.52
55250	Y	$1,534.52
55300	N	packaged
55400	Y	$2,172.08
55450	Y	$344.53
55500	Y	$2,172.08
55520	Y	$2,172.08
55530	Y	$2,172.08
55535	Y	$2,404.32
55540	Y	$2,404.32
55550	Y	$3,594.09
55559	Y	$3,999.42
55600	Y	$1,534.52

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
55605	Y	80% of billed
55650	Y	80% of billed
55680	Y	$1,534.52
55700	Y	$1,534.52
55705	Y	$2,172.08
55706	Y	$2,172.08
55720	Y	$1,534.52
55725	Y	$2,172.08
55801	Y	80% of billed
55810	Y	80% of billed
55812	Y	80% of billed
55815	Y	80% of billed
55821	Y	80% of billed
55831	Y	80% of billed
55840	Y	80% of billed
55842	Y	80% of billed
55845	Y	80% of billed
55860	Y	$2,172.08
55862	Y	80% of billed
55865	Y	80% of billed
55866	Y	80% of billed
55870	Y	$142.52
55873	Y	$6,805.76
55875	N	$2,172.08
55876	N	$129.26
55899	Y	$211.96
55920	Y	$2,404.32
55970	Y	$1,919.27
55980	Y	$2,172.45
56405	Y	$94.64
56420	Y	$121.28
56440	Y	$1,918.93
56441	Y	$1,918.93
56442	Y	$1,918.93
56501	Y	$128.25
56515	Y	$2,198.27
56605	Y	$72.62
56606	N	packaged
56620	Y	$1,918.93
56625	Y	$1,918.93
56630	Y	80% of billed
56631	Y	80% of billed
56632	Y	80% of billed
56633	Y	80% of billed
56634	Y	80% of billed
56637	Y	80% of billed
56640	Y	80% of billed
56700	Y	$1,918.93
56740	Y	$1,918.93
56800	Y	$1,918.93
56805	Y	$1,918.93
56810	Y	$1,918.93
56820	Y	$96.63
56821	Y	$123.28
57000	Y	$1,918.93
57010	Y	$1,918.93
57020	Y	$1,918.93
57022	Y	$1,458.18
57023	Y	$1,458.18
57061	Y	$115.59
57065	Y	$1,918.93
57100	Y	$76.58
57105	Y	$1,918.93
57106	Y	$1,919.27
57107	Y	$1,919.27
57109	Y	$1,919.27
57110	Y	80% of billed
57111	Y	80% of billed
57112	Y	80% of billed
57120	Y	$2,763.40
57130	Y	$1,918.93
57135	Y	$1,918.93
57150	N	packaged
57155	Y	$1,918.93
57156	Y	$260.99
57160	Y	$77.97
57170	Y	$46.65
57180	Y	$146.24

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
57200	Y	$1,918.93
57210	Y	$1,918.93
57220	Y	$2,763.40
57230	Y	$1,918.93
57240	Y	$2,763.40
57250	Y	$2,763.40
57260	Y	$2,763.40
57265	Y	$2,763.40
57267	N	packaged
57268	Y	$1,918.93
57270	Y	80% of billed
57280	Y	80% of billed
57282	Y	$4,525.39
57283	Y	$4,525.39
57284	Y	$3,125.56
57285	Y	$4,525.39
57287	N	$1,918.93
57288	Y	$2,763.40
57289	Y	$3,515.70
57291	Y	$1,918.93
57292	Y	$3,125.56
57295	Y	$1,918.93
57296	Y	80% of billed
57300	Y	$1,918.93
57305	Y	80% of billed
57307	Y	80% of billed
57308	Y	80% of billed
57310	Y	$3,515.70
57311	Y	80% of billed
57320	Y	$2,763.40
57330	Y	$4,525.39
57335	Y	$1,919.27
57400	Y	$1,918.93
57410	Y	$1,918.93
57415	Y	$1,918.93
57420	Y	$99.28
57421	Y	$129.85
57423	Y	$6,410.84
57425	Y	$6,410.84
57426	Y	$3,515.70
57452	Y	$92.63
57454	Y	$114.60
57455	Y	$120.61
57456	Y	$115.27
57460	Y	$318.36
57461	Y	$342.79
57500	Y	$151.16
57505	Y	$102.55
57510	Y	$104.36
57511	Y	$127.95
57513	Y	$1,918.93
57520	Y	$1,918.93
57522	Y	$1,918.93
57530	Y	$1,918.93
57531	Y	80% of billed
57540	Y	80% of billed
57545	Y	80% of billed
57550	Y	$1,918.93
57555	Y	$3,125.56
57556	Y	$2,763.40
57558	Y	$1,918.93
57700	Y	$1,918.93
57720	Y	$1,918.93
57800	Y	$55.47
58100	Y	$91.30
58110	N	packaged
58120	Y	$1,918.93
58140	Y	80% of billed
58145	Y	$1,918.93
58146	Y	80% of billed
58150	Y	80% of billed
58152	Y	80% of billed
58180	Y	80% of billed
58200	Y	80% of billed
58210	Y	80% of billed
58240	Y	80% of billed
58260	Y	$2,763.40
58262	Y	$2,763.40

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
58263	Y	$3,125.56
58267	Y	80% of billed
58270	Y	$3,125.56
58275	Y	80% of billed
58280	Y	80% of billed
58285	Y	80% of billed
58290	Y	$4,525.39
58291	Y	$3,125.56
58292	Y	$4,525.39
58293	Y	80% of billed
58294	Y	$3,125.56
58300	Y	80% of billed
58301	N	$83.95
58321	Y	$76.63
58322	Y	$79.30
58323	Y	$11.99
58340	N	packaged
58345	Y	$1,918.93
58346	Y	$1,918.93
58350	Y	$2,763.40
58353	Y	$2,763.40
58356	Y	$2,511.46
58400	Y	80% of billed
58410	Y	80% of billed
58520	Y	80% of billed
58540	Y	80% of billed
58541	Y	$3,594.09
58542	Y	$5,475.95
58543	Y	$5,475.95
58544	Y	$5,475.95
58545	Y	$3,594.09
58546	Y	$5,475.95
58548	Y	80% of billed
58550	Y	$3,594.09
58552	Y	$5,475.95
58553	Y	$5,475.95
58554	Y	$5,475.95
58555	Y	$1,918.93
58558	Y	$1,918.93
58559	Y	$2,763.40
58560	Y	$2,763.40
58561	Y	$2,763.40
58562	Y	$1,918.93
58563	Y	$2,763.40
58565	Y	$2,763.40
58570	Y	$5,475.95
58571	Y	$5,475.95
58572	Y	$6,410.84
58573	Y	$5,475.95
58578	Y	$3,999.42
58579	Y	$146.28
58600	Y	$1,918.93
58605	Y	80% of billed
58611	Y	80% of billed
58615	Y	$1,918.93
58660	Y	$3,594.09
58661	Y	$3,594.09
58662	Y	$3,594.09
58670	Y	$3,594.09
58671	Y	$3,594.09
58672	Y	$3,594.09
58673	Y	$3,594.09
58674	**Y**	**$7,931.70**
58679	Y	$3,999.42
58700	Y	80% of billed
58720	Y	80% of billed
58740	Y	80% of billed
58750	Y	80% of billed
58752	Y	80% of billed
58760	Y	80% of billed
58770	Y	$1,919.27
58800	Y	$1,918.93
58805	Y	$1,918.93
58820	Y	$1,918.93
58822	Y	80% of billed
58825	Y	80% of billed
58900	Y	$1,918.93
58920	Y	$4,525.39

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
58925	Y	$3,125.56
58940	Y	80% of billed
58943	Y	80% of billed
58950	Y	80% of billed
58951	Y	80% of billed
58952	Y	80% of billed
58953	Y	80% of billed
58954	Y	80% of billed
58956	Y	80% of billed
58957	Y	80% of billed
58958	Y	80% of billed
58960	Y	80% of billed
58970	Y	$662.06
58974	Y	$260.99
58976	Y	$260.99
58999	Y	$146.28
59000	Y	$131.20
59001	Y	$260.99
59012	Y	$260.99
59015	Y	$114.54
59020	Y	$63.31
59025	Y	$33.99
59030	Y	$261.03
59050	Y	80% of billed
59051	Y	80% of billed
59070	Y	$260.99
59072	Y	$260.99
59074	Y	$260.99
59076	Y	$260.99
59100	Y	$1,918.93
59120	Y	80% of billed
59121	Y	80% of billed
59130	Y	80% of billed
59135	Y	80% of billed
59136	Y	80% of billed
59140	Y	80% of billed
59150	Y	$3,594.09
59151	Y	$3,594.09
59160	Y	$1,918.93
59200	Y	$71.30
59300	Y	$167.11
59320	Y	$1,918.93
59325	Y	80% of billed
59350	Y	80% of billed
59400	Y	80% of billed
59409	Y	$1,919.27
59410	Y	80% of billed
59412	Y	$1,918.93
59414	Y	$1,918.93
59425	Y	80% of billed
59426	Y	80% of billed
59430	Y	80% of billed
59510	Y	80% of billed
59514	Y	80% of billed
59515	Y	80% of billed
59525	Y	80% of billed
59610	Y	80% of billed
59612	Y	$1,919.27
59614	Y	80% of billed
59618	Y	80% of billed
59620	Y	80% of billed
59622	Y	80% of billed
59812	Y	$1,918.93
59820	Y	$1,918.93
59821	Y	$1,918.93
59830	Y	80% of billed
59840	Y	$1,918.93
59841	Y	$1,918.93
59850	Y	80% of billed
59851	Y	80% of billed
59852	Y	80% of billed
59855	Y	80% of billed
59856	Y	80% of billed
59857	Y	80% of billed
59866	Y	$260.99
59870	Y	$1,918.93
59871	N	$1,918.93
59897	Y	$146.28

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
59898	Y	$3,999.42
59899	Y	$146.28
60000	Y	$713.12
60100	Y	$100.30
60200	Y	$3,594.09
60210	Y	$3,594.09
60212	Y	$3,594.09
60220	Y	$3,594.09
60225	Y	$3,594.09
60240	Y	$3,594.09
60252	Y	$3,970.33
60254	Y	80% of billed
60260	Y	$3,970.33
60270	Y	80% of billed
60271	Y	$3,970.33
60280	Y	$3,594.09
60281	Y	$3,594.09
60300	Y	$152.12
60500	Y	$3,578.58
60502	Y	$3,970.33
60505	Y	80% of billed
60512	N	packaged
60520	Y	$3,970.33
60521	Y	80% of billed
60522	Y	80% of billed
60540	Y	80% of billed
60545	Y	80% of billed
60600	Y	80% of billed
60605	Y	80% of billed
60650	Y	80% of billed
60659	Y	$3,999.42
60699	Y	$3,999.42
61000	Y	$608.57
61001	Y	$608.57
61020	Y	$608.57
61026	Y	$232.81
61050	Y	$608.57
61055	Y	$608.57
61070	Y	$475.70
61105	Y	80% of billed
61107	Y	80% of billed
61108	Y	80% of billed
61120	Y	80% of billed
61140	Y	80% of billed
61150	Y	80% of billed
61151	Y	80% of billed
61154	Y	80% of billed
61156	Y	80% of billed
61210	Y	80% of billed
61215	Y	$2,803.59
61250	Y	80% of billed
61253	Y	80% of billed
61304	Y	80% of billed
61305	Y	80% of billed
61312	Y	80% of billed
61313	Y	80% of billed
61314	Y	80% of billed
61315	Y	80% of billed
61316	Y	80% of billed
61320	Y	80% of billed
61321	Y	80% of billed
61322	Y	80% of billed
61323	Y	80% of billed
61330	Y	$3,578.58
61332	Y	80% of billed
61333	Y	80% of billed
61340	Y	80% of billed
61343	Y	80% of billed
61345	Y	80% of billed
61450	Y	80% of billed
61458	Y	80% of billed
61460	Y	80% of billed
61480	Y	80% of billed
61500	Y	80% of billed
61501	Y	80% of billed
61510	Y	80% of billed
61512	Y	80% of billed
61514	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
61516	Y	80% of billed
61517	Y	80% of billed
61518	Y	80% of billed
61519	Y	80% of billed
61520	Y	80% of billed
61521	Y	80% of billed
61522	Y	80% of billed
61524	Y	80% of billed
61526	Y	80% of billed
61530	Y	80% of billed
61531	Y	80% of billed
61533	Y	80% of billed
61534	Y	80% of billed
61535	Y	80% of billed
61536	Y	80% of billed
61537	Y	80% of billed
61538	Y	80% of billed
61539	Y	80% of billed
61540	Y	80% of billed
61541	Y	80% of billed
61543	Y	80% of billed
61544	Y	80% of billed
61545	Y	80% of billed
61546	Y	80% of billed
61548	Y	80% of billed
61550	Y	80% of billed
61552	Y	80% of billed
61556	Y	80% of billed
61557	Y	80% of billed
61558	Y	80% of billed
61559	Y	80% of billed
61563	Y	80% of billed
61564	Y	80% of billed
61566	Y	80% of billed
61567	Y	80% of billed
61570	Y	80% of billed
61571	Y	80% of billed
61575	Y	80% of billed
61576	Y	80% of billed
61580	Y	80% of billed
61581	Y	80% of billed
61582	Y	80% of billed
61583	Y	80% of billed
61584	Y	80% of billed
61585	Y	80% of billed
61586	Y	80% of billed
61590	Y	80% of billed
61591	Y	80% of billed
61592	Y	80% of billed
61595	Y	80% of billed
61596	Y	80% of billed
61597	Y	80% of billed
61598	Y	80% of billed
61600	Y	80% of billed
61601	Y	80% of billed
61605	Y	80% of billed
61606	Y	80% of billed
61607	Y	80% of billed
61608	Y	80% of billed
61610	Y	80% of billed
61611	Y	80% of billed
61612	Y	80% of billed
61613	Y	80% of billed
61615	Y	80% of billed
61616	Y	80% of billed
61618	Y	80% of billed
61619	Y	80% of billed
61623	Y	$5,898.57
61624	Y	80% of billed
61626	Y	$5,898.57
61630	Y	80% of billed
61635	Y	80% of billed
61640	Y	80% of billed
61641	Y	80% of billed
61642	Y	80% of billed
61645	Y	80% of billed
61650	Y	80% of billed
61651	Y	80% of billed

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
61680	Y	80% of billed
61682	Y	80% of billed
61684	Y	80% of billed
61686	Y	80% of billed
61690	Y	80% of billed
61692	Y	80% of billed
61697	Y	80% of billed
61698	Y	80% of billed
61700	Y	80% of billed
61702	Y	80% of billed
61703	Y	80% of billed
61705	Y	80% of billed
61708	Y	80% of billed
61710	Y	80% of billed
61711	Y	80% of billed
61720	Y	$2,804.09
61735	Y	80% of billed
61750	Y	80% of billed
61751	Y	80% of billed
61760	Y	80% of billed
61770	Y	$2,803.59
61781	N	packaged
61782	N	packaged
61783	N	packaged
61790	Y	$1,445.78
61791	Y	$1,445.78
61796	Y	80% of billed
61797	Y	80% of billed
61798	Y	80% of billed
61799	Y	80% of billed
61800	Y	80% of billed
61850	Y	80% of billed
61860	Y	80% of billed
61863	Y	80% of billed
61864	Y	80% of billed
61867	Y	80% of billed
61868	Y	80% of billed
61870	Y	80% of billed
61880	N	$2,213.97
61885	N	$4,057.00
61886	N	$6,291.43
61888	N	$3,319.23
62000	Y	$3,970.33
62005	Y	80% of billed
62010	Y	80% of billed
62100	Y	80% of billed
62115	Y	80% of billed
62117	Y	80% of billed
62120	Y	80% of billed
62121	Y	80% of billed
62140	Y	80% of billed
62141	Y	80% of billed
62142	Y	80% of billed
62143	Y	80% of billed
62145	Y	80% of billed
62146	Y	80% of billed
62147	Y	80% of billed
62148	Y	80% of billed
62160	N	packaged
62161	Y	80% of billed
62162	Y	80% of billed
62163	Y	80% of billed
62164	Y	80% of billed
62165	Y	80% of billed
62180	Y	80% of billed
62190	Y	80% of billed
62192	Y	80% of billed
62194	Y	$1,445.78
62200	Y	80% of billed
62201	Y	80% of billed
62220	Y	80% of billed
62223	Y	80% of billed
62225	Y	$971.07
62230	Y	$2,803.59
62252	N	$72.65
62256	Y	80% of billed
62258	Y	80% of billed
62263	Y	$853.95

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
62264	Y	$853.95
62267	Y	$954.54
62268	Y	$608.57
62269	Y	$954.54
62270	Y	$608.57
62272	Y	$608.57
62273	Y	$608.57
62280	Y	$853.95
62281	Y	$853.95
62282	Y	$853.95
62284	N	packaged
62287	Y	$2,803.59
62290	N	packaged
62291	N	packaged
62292	Y	$1,445.78
62294	Y	$608.57
62302	N	packaged
62303	N	packaged
62304	N	packaged
62305	N	packaged
62310	Y	$608.57
62311	Y	$608.57
62318	Y	$853.95
62319	Y	$853.95
62320	**Y**	**$527.38**
62321	**Y**	**$527.38**
62322	**Y**	**$527.38**
62323	**Y**	**$527.38**
62324	**Y**	**$663.88**
62325	**Y**	**$663.88**
62326	**Y**	**$663.88**
62327	**Y**	**$663.88**
62350	Y	$2,803.59
62351	Y	$5,244.65
62355	N	$1,445.78
62360	Y	$5,449.98
62361	Y	$5,449.98
62362	Y	$5,449.98
62365	N	$2,803.59
62367	N	$43.32
62368	N	$59.33
62369	N	$180.64
62370	N	$177.31
62380	**Y**	**$5,443.81**
63001	Y	$3,615.56
63003	Y	$3,615.56
63005	Y	$3,615.56
63011	Y	$4,041.66
63012	Y	$4,041.66
63015	Y	$4,041.66
63016	Y	$4,041.66
63017	Y	$4,041.66
63020	Y	$3,615.56
63030	Y	$3,615.56
63035	N	packaged
63040	Y	$4,041.66
63042	Y	$3,615.56
63043	N	packaged
63044	N	packaged
63045	Y	$3,615.56
63046	Y	$3,615.56
63047	Y	$3,615.56
63048	N	packaged
63050	Y	80% of billed
63051	Y	80% of billed
63055	Y	$3,615.56
63056	Y	$3,615.56
63057	N	packaged
63064	Y	$4,041.66
63066	N	packaged
63075	Y	$4,041.66
63076	N	packaged
63077	Y	80% of billed
63078	Y	80% of billed
63081	Y	80% of billed
63082	Y	80% of billed
63085	Y	80% of billed
63086	Y	80% of billed

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
63087	Y	80% of billed
63088	Y	80% of billed
63090	Y	80% of billed
63091	Y	80% of billed
63101	Y	80% of billed
63102	Y	80% of billed
63103	Y	80% of billed
63170	Y	80% of billed
63172	Y	80% of billed
63173	Y	80% of billed
63180	Y	80% of billed
63182	Y	80% of billed
63185	Y	80% of billed
63190	Y	80% of billed
63191	Y	80% of billed
63194	Y	80% of billed
63195	Y	80% of billed
63196	Y	80% of billed
63197	Y	80% of billed
63198	Y	80% of billed
63199	Y	80% of billed
63200	Y	80% of billed
63250	Y	80% of billed
63251	Y	80% of billed
63252	Y	80% of billed
63265	Y	80% of billed
63266	Y	80% of billed
63267	Y	80% of billed
63268	Y	80% of billed
63270	Y	80% of billed
63271	Y	80% of billed
63272	Y	80% of billed
63273	Y	80% of billed
63275	Y	80% of billed
63276	Y	80% of billed
63277	Y	80% of billed
63278	Y	80% of billed
63280	Y	80% of billed
63281	Y	80% of billed
63282	Y	80% of billed
63283	Y	80% of billed
63285	Y	80% of billed
63286	Y	80% of billed
63287	Y	80% of billed
63290	Y	80% of billed
63295	Y	80% of billed
63300	Y	80% of billed
63301	Y	80% of billed
63302	Y	80% of billed
63303	Y	80% of billed
63304	Y	80% of billed
63305	Y	80% of billed
63306	Y	80% of billed
63307	Y	80% of billed
63308	Y	80% of billed
63600	Y	$1,445.78
63610	Y	$1,445.78
63615	Y	$1,445.78
63620	Y	80% of billed
63621	Y	80% of billed
63650	N	$3,319.23
63655	N	$4,057.00
63661	N	$1,445.78
63662	N	$2,213.97
63663	N	$3,319.23
63664	N	$3,319.23
63685	N	$6,291.43
63688	N	$2,213.97
63700	Y	80% of billed
63702	Y	80% of billed
63704	Y	80% of billed
63706	Y	80% of billed
63707	Y	80% of billed
63709	Y	80% of billed
63710	Y	80% of billed
63740	Y	80% of billed
63741	Y	$2,804.09
63744	Y	$2,803.59

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
63746	N	$1,445.78
64400	Y	$153.98
64402	N	packaged
64405	Y	$117.31
64408	Y	$97.31
64410	Y	$608.57
64413	Y	$135.90
64415	Y	$853.95
64416	Y	$853.95
64417	Y	$608.57
64418	Y	$180.53
64420	Y	$608.57
64421	Y	$608.57
64425	Y	$125.23
64430	Y	$608.57
64435	Y	$150.55
64445	Y	$152.56
64446	Y	$853.95
64447	Y	$127.24
64448	Y	$853.95
64449	Y	$853.95
64450	Y	$97.31
64455	Y	$36.65
64461	Y	$155.22
64462	N	packaged
64463	Y	$182.54
64479	Y	$608.57
64480	N	packaged
64483	Y	$608.57
64484	N	packaged
64486	N	packaged
64487	N	packaged
64488	N	packaged
64489	N	packaged
64490	Y	$853.95
64491	N	packaged
64492	N	packaged
64493	Y	$853.95
64494	N	packaged
64495	N	packaged
64505	Y	$98.63
64508	Y	$34.67
64510	Y	$608.57
64517	Y	$853.95
64520	Y	$608.57
64530	Y	$853.95
64550	Y	80% of billed
64553	N	$3,319.23
64555	N	$3,319.23
64561	N	$3,319.23
64565	N	$3,319.23
64566	Y	$195.28
64568	N	$6,291.43
64569	N	$3,319.23
64570	N	$2,803.59
64575	N	$3,319.23
64580	N	$4,057.00
64581	N	$3,319.23
64585	N	$2,213.97
64590	N	$4,057.00
64595	N	$2,213.97
64600	Y	$853.95
64605	Y	$1,445.78
64610	Y	$1,445.78
64611	Y	$127.98
64612	Y	$136.63
64615	Y	$110.64
64616	Y	$105.32
64617	Y	$207.18
64620	Y	$853.95
64630	Y	$853.95
64632	Y	$74.65
64633	Y	$1,445.78
64634	N	packaged
64635	Y	$1,445.78
64636	N	packaged
64640	Y	$164.35
64642	Y	$133.91

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
64643	N	packaged
64644	Y	$160.56
64645	N	packaged
64646	Y	$137.97
64647	Y	$163.21
64650	Y	$91.97
64653	Y	$108.65
64680	Y	$853.95
64681	Y	$853.95
64702	Y	$1,445.78
64704	Y	$1,445.78
64708	Y	$1,445.78
64712	Y	$1,445.78
64713	Y	$1,445.78
64714	Y	$1,445.78
64716	Y	$1,445.78
64718	Y	$1,445.78
64719	Y	$1,445.78
64721	Y	$1,445.78
64722	Y	$1,445.78
64726	Y	$1,445.78
64727	N	packaged
64732	Y	$1,445.78
64734	Y	$1,445.78
64736	Y	$1,445.78
64738	Y	$1,445.78
64740	Y	$1,445.78
64742	Y	$1,445.78
64744	Y	$1,445.78
64746	Y	$1,445.78
64755	Y	80% of billed
64760	Y	80% of billed
64763	Y	$1,445.78
64766	Y	$2,803.59
64771	Y	$1,445.78
64772	Y	$1,445.78
64774	Y	$1,445.78
64776	Y	$1,445.78
64778	N	packaged
64782	Y	$1,445.78
64783	N	packaged
64784	Y	$1,445.78
64786	Y	$2,803.59
64787	N	packaged
64788	Y	$1,445.78
64790	Y	$1,445.78
64792	Y	$2,803.59
64795	Y	$1,445.78
64802	Y	$1,445.78
64804	Y	$1,446.03
64809	Y	80% of billed
64818	Y	80% of billed
64820	Y	$1,445.78
64821	Y	$2,381.67
64822	Y	$2,381.67
64823	Y	$1,498.14
64831	Y	$2,803.59
64832	N	packaged
64834	Y	$2,803.59
64835	Y	$2,803.59
64836	Y	$2,803.59
64837	N	packaged
64840	Y	$2,803.59
64856	Y	$2,803.59
64857	Y	$2,803.59
64858	Y	$2,803.59
64859	N	packaged
64861	Y	$2,803.59
64862	Y	$2,803.59
64864	Y	$2,803.59
64865	Y	$2,803.59
64866	Y	80% of billed
64868	Y	80% of billed
64872	N	packaged
64874	N	packaged
64876	N	packaged
64885	Y	$2,803.59
64886	Y	$2,803.59

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
64890	Y	$2,803.59
64891	Y	$2,803.59
64892	Y	$2,803.59
64893	Y	$2,803.59
64895	Y	$2,803.59
64896	Y	$2,803.59
64897	Y	$2,803.59
64898	Y	$2,803.59
64901	N	packaged
64902	N	packaged
64905	Y	$2,803.59
64907	Y	$2,803.59
64910	Y	$2,803.59
64911	Y	$2,804.09
64999	Y	$232.86
65091	Y	$2,410.06
65093	Y	$2,410.06
65101	Y	$2,410.06
65103	Y	$2,410.06
65105	Y	$2,410.06
65110	Y	$2,410.06
65112	Y	$2,410.06
65114	Y	$2,410.06
65125	Y	$1,413.29
65130	Y	$2,410.06
65135	Y	$2,410.06
65140	Y	$2,410.06
65150	Y	$2,410.06
65155	Y	$2,410.06
65175	Y	$2,410.06
65205	N	packaged
65210	N	packaged
65220	N	packaged
65222	N	packaged
65235	Y	$1,563.30
65260	Y	$1,563.30
65265	Y	$1,563.30
65270	Y	$1,413.29
65272	Y	$1,413.29
65273	Y	80% of billed
65275	Y	$2,410.06
65280	Y	$2,925.29
65285	Y	$2,925.29
65286	Y	$736.01
65290	Y	$2,410.06
65400	Y	$710.87
65410	Y	$1,413.29
65420	Y	$1,413.29
65426	Y	$1,413.29
65430	N	packaged
65435	Y	$83.01
65436	Y	$376.05
65450	Y	$270.47
65600	Y	$430.96
65710	Y	$2,925.29
65730	Y	$2,925.29
65750	Y	$2,925.29
65755	Y	$2,925.29
65756	Y	$2,925.29
65757	N	packaged
65760	Y	80% of billed
65765	Y	80% of billed
65767	Y	80% of billed
65770	Y	$2,522.45
65771	Y	80% of billed
65772	Y	$710.87
65775	Y	$1,413.29
65778	N	packaged
65779	N	packaged
65780	Y	$2,410.06
65781	Y	$2,925.29
65782	Y	$2,410.06
65785	Y	$2,925.29
65800	Y	$1,563.30
65810	Y	$1,563.30
65815	Y	$1,563.30
65820	Y	$2,925.29
65850	Y	$1,563.30

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
65855	Y	$325.18
65860	Y	$326.50
65865	Y	$1,563.30
65870	Y	$1,563.30
65875	Y	$1,563.30
65880	Y	$1,563.30
65900	Y	$1,563.30
65920	Y	$1,563.30
65930	Y	$1,563.30
66020	Y	$1,563.30
66030	Y	$1,563.30
66130	Y	$1,413.29
66150	Y	$2,925.29
66155	Y	$1,563.30
66160	Y	$1,563.30
66170	Y	$1,563.30
66172	Y	$1,563.30
66174	Y	$1,563.30
66175	Y	$2,925.29
66179	Y	$2,925.29
66180	Y	$2,925.29
66183	Y	$2,925.29
66184	Y	$1,563.30
66185	Y	$1,563.30
66220	Y	$1,563.30
66225	Y	$1,563.30
66250	Y	$1,413.29
66500	Y	$1,563.30
66505	Y	$1,563.30
66600	Y	$1,563.30
66605	Y	$1,563.30
66625	Y	$1,563.30
66630	Y	$1,563.30
66635	Y	$1,563.30
66680	Y	$1,563.30
66682	Y	$1,563.30
66700	Y	$1,563.30
66710	Y	$1,413.29
66711	Y	$1,563.30
66720	Y	$1,413.29
66740	Y	$1,413.29
66761	Y	$344.49
66762	Y	$458.09
66770	Y	$458.09
66820	Y	$1,563.30
66821	Y	$458.09
66825	Y	$1,563.30
66830	Y	$1,563.30
66840	Y	$1,563.30
66850	Y	$1,563.30
66852	Y	$2,925.29
66920	Y	$1,563.30
66930	Y	$2,925.29
66940	Y	$1,563.30
66982	Y	$1,563.30
66983	Y	$1,563.30
66984	Y	$1,563.30
66985	Y	$1,563.30
66986	Y	$1,563.30
66990	N	packaged
66999	Y	$1,563.58
67005	Y	$1,563.30
67010	Y	$1,563.30
67015	Y	$1,563.30
67025	Y	$1,563.30
67027	Y	$2,522.45
67028	N	$89.32
67030	Y	$1,563.30
67031	Y	$458.09
67036	Y	$1,563.30
67039	Y	$2,925.29
67040	Y	$2,925.29
67041	Y	$1,563.30
67042	Y	$2,925.29
67043	Y	$2,925.29
67101	Y	$732.55
67105	Y	$458.09
67107	Y	$2,925.29

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
67108	Y	$2,925.29
67110	Y	$725.10
67113	Y	$2,925.29
67115	Y	$1,563.30
67120	Y	$1,563.30
67121	Y	$1,563.30
67141	Y	$270.47
67145	Y	$458.09
67208	Y	$270.47
67210	Y	$458.09
67218	Y	$2,410.06
67220	Y	$458.09
67221	Y	$295.20
67225	N	packaged
67227	Y	$2,410.06
67228	Y	$330.50
67229	Y	$458.09
67250	Y	$1,413.29
67255	Y	$1,563.30
67299	Y	$1,563.58
67311	Y	$1,413.29
67312	Y	$2,410.06
67314	Y	$1,413.29
67316	Y	$1,413.29
67318	Y	$1,413.29
67320	N	packaged
67331	N	packaged
67332	N	packaged
67334	N	packaged
67335	N	packaged
67340	N	packaged
67343	Y	$1,413.29
67345	Y	$230.32
67346	Y	$2,410.06
67399	Y	$270.51
67400	Y	$2,410.06
67405	Y	$1,413.29
67412	Y	$1,413.29
67413	Y	$1,413.29
67414	Y	$2,410.06
67415	Y	$1,413.29
67420	Y	$2,410.06
67430	Y	$2,410.06
67440	Y	$2,410.06
67445	Y	$2,410.06
67450	Y	$2,410.06
67500	Y	$270.47
67505	Y	$77.66
67515	Y	$82.98
67550	Y	$2,410.06
67560	Y	$2,410.06
67570	Y	$2,410.06
67599	Y	$270.51
67700	Y	$270.47
67710	Y	$337.91
67715	Y	$1,413.29
67800	Y	$138.06
67801	Y	$166.01
67805	Y	$217.04
67808	Y	$1,413.29
67810	Y	$234.97
67820	N	packaged
67825	Y	$139.37
67830	Y	$710.87
67835	Y	$1,413.29
67840	Y	$361.44
67850	Y	$270.60
67875	Y	$710.87
67880	Y	$1,413.29
67882	Y	$1,413.29
67900	Y	$1,413.29
67901	Y	$1,413.29
67902	Y	$2,410.06
67903	Y	$1,413.29
67904	Y	$1,413.29
67906	Y	$2,410.06
67908	Y	$1,413.29
67909	Y	$1,413.29

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
67911	Y	$1,413.29
67912	Y	$1,413.29
67914	Y	$1,413.29
67915	Y	$394.15
67916	Y	$1,413.29
67917	Y	$1,413.29
67921	Y	$1,413.29
67922	Y	$388.97
67923	Y	$1,413.29
67924	Y	$1,413.29
67930	Y	$410.93
67935	Y	$1,413.29
67938	Y	$270.47
67950	Y	$1,413.29
67961	Y	$1,413.29
67966	Y	$1,413.29
67971	Y	$1,413.29
67973	Y	$1,413.29
67974	Y	$2,410.06
67975	Y	$1,413.29
67999	Y	$270.51
68020	Y	$121.57
68040	Y	$57.73
68100	Y	$216.46
68110	Y	$285.59
68115	Y	$1,413.29
68130	Y	$1,413.29
68135	Y	$155.72
68200	N	packaged
68320	Y	$1,413.29
68325	Y	$2,410.06
68326	Y	$2,410.06
68328	Y	$1,413.29
68330	Y	$1,563.30
68335	Y	$2,410.06
68340	Y	$1,413.29
68360	Y	$2,410.06
68362	Y	$1,413.29
68371	Y	$1,413.29
68399	Y	$270.51
68400	Y	$401.97
68420	Y	$423.85
68440	Y	$121.45
68500	Y	$2,410.06
68505	Y	$2,410.06
68510	Y	$1,413.29
68520	Y	$2,410.06
68525	Y	$1,413.29
68530	Y	$270.47
68540	Y	$1,413.29
68550	Y	$2,410.06
68700	Y	$1,413.29
68705	Y	$270.47
68720	Y	$2,410.06
68745	Y	$2,410.06
68750	Y	$2,410.06
68760	Y	$250.89
68761	Y	$176.54
68770	Y	$1,413.29
68801	N	packaged
68810	Y	$270.47
68811	Y	$1,413.29
68815	Y	$1,413.29
68816	Y	$1,413.29
68840	Y	$148.02
68850	N	packaged
68899	Y	$270.51
69000	Y	$236.32
69005	Y	$244.37
69020	Y	$236.32
69090	Y	80% of billed
69100	Y	$129.03
69105	Y	$202.02
69110	Y	$1,458.18
69120	Y	$1,666.41
69140	Y	$3,578.58
69145	Y	$1,458.18
69150	Y	$1,666.41

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
69155	Y	80% of billed
69200	N	packaged
69205	Y	$954.54
69209	N	packaged
69210	N	packaged
69220	N	packaged
69222	Y	$308.02
69300	Y	$1,666.41
69310	Y	$3,578.58
69320	Y	$3,578.58
69399	Y	$134.28
69420	Y	$260.74
69421	Y	$1,666.41
69424	N	$177.59
69433	Y	$267.38
69436	Y	$1,666.41
69440	Y	$3,578.58
69450	Y	$3,578.58
69501	Y	$3,578.58
69502	Y	$3,578.58
69505	Y	$3,578.58
69511	Y	$3,578.58
69530	Y	$3,578.58
69535	Y	80% of billed
69540	Y	$301.71
69550	Y	$3,578.58
69552	Y	$3,578.58
69554	Y	80% of billed
69601	Y	$3,578.58
69602	Y	$3,578.58
69603	Y	$3,578.58
69604	Y	$3,578.58
69605	Y	$3,578.58
69610	Y	$392.82
69620	Y	$1,666.41
69631	Y	$3,578.58
69632	Y	$3,578.58
69633	Y	$3,578.58
69635	Y	$3,578.58
69636	Y	$3,578.58
69637	Y	$3,578.58
69641	Y	$3,578.58
69642	Y	$3,578.58
69643	Y	$3,578.58
69644	Y	$3,578.58
69645	Y	$3,578.58
69646	Y	$3,578.58
69650	Y	$3,578.58
69660	Y	$3,578.58
69661	Y	$3,578.58
69662	Y	$3,578.58
69666	Y	$1,666.41
69667	Y	$1,666.41
69670	Y	$3,578.58
69676	Y	$1,666.41
69700	Y	$713.12
69710	Y	80% of billed
69711	N	$3,578.58
69714	Y	$7,190.01
69715	Y	$7,190.01
69717	Y	$3,615.56
69718	Y	$4,689.61
69720	Y	$3,578.58
69725	Y	$3,970.33
69740	Y	$3,578.58
69745	Y	$3,578.58
69799	Y	$134.28
69801	Y	$217.26
69805	Y	$3,578.58
69806	Y	$3,578.58
69820	Y	$3,578.58
69840	Y	$3,578.58
69905	Y	$3,578.58
69910	Y	$3,578.58
69915	Y	$3,578.58
69930	Y	$9,175.69
69949	Y	$134.28
69950	Y	80% of billed

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
69955	Y	$3,970.33
69960	Y	$3,970.33
69970	Y	$3,970.33
69979	Y	$134.28
69990	N	packaged
93590	**Y**	**$8,469.28**
93591	**Y**	**$8,469.28**
0100T	Y	$2,959.42
0101T	Y	$1,498.14
0102T	Y	$2,381.67
0171T	Y	$7,190.01
0190T	**N**	**packaged**
0191T	Y	$2,925.29
0200T	Y	$2,381.67
0201T	Y	$2,381.67
0205T	**N**	**packaged**
0206T	**N**	**packaged**
0213T	Y	$853.95
0214T	**N**	**packaged**
0215T	**N**	**packaged**
0216T	Y	$853.95
0217T	**N**	**packaged**
0218T	**N**	**packaged**
0228T	Y	$608.57
0229T	**N**	**packaged**
0230T	Y	$853.95
0231T	**N**	**packaged**
0232T	**N**	**packaged**
0238T	Y	$9,297.21
0249T	Y	$2,394.96
0253T	Y	$2,925.29
0263T	N	$3,138.13
0264T	N	$3,138.13
0265T	N	$3,138.13
0269T	N	$2,803.59
0270T	N	$2,213.97
0271T	N	$2,213.97
0274T	Y	$3,615.56
0275T	Y	$3,615.56
0278T	**N**	**packaged**
0282T	N	$3,319.23
0283T	N	$6,291.43
0284T	N	$2,213.97
0288T	Y	$2,394.96
0290T	**N**	**packaged**
0299T	Y	$234.75
0300T	**N**	**packaged**
0301T	Y	$2,267.91
0302T	Y	$4,787.19
0303T	Y	$3,192.64
0304T	Y	$3,192.64
0307T	N	$1,936.23
0308T	Y	$6,090.26
0313T	Y	$2,213.97
0314T	N	$2,213.97
0315T	N	$2,213.97
0316T	N	$6,291.43
0330T	**N**	**packaged**
0335T	Y	$2,381.67
0336T	Y	$5,475.95
0338T	N	$3,226.62
0339T	N	$3,226.62
0340T	Y	$3,236.18
0341T	**N**	**packaged**
0342T	N	$3,138.13
0346T	**N**	**packaged**
0347T	**N**	**packaged**
0348T	**N**	**packaged**
0349T	**N**	**packaged**
0350T	**N**	**packaged**
0351T	**N**	**packaged**
0353T	**N**	**packaged**
0356T	**N**	**packaged**
0357T	**N**	**packaged**
0376T	**N**	**packaged**
0377T	Y	$2,394.96
0379T	**N**	**packaged**
0380T	**N**	**packaged**

Ambulatory Surgery Center Fee Schedule Amounts for Surgical Procedures

Note: Listing of a payment amount does not guarantee payment. *See* OAR 436-009-0023

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Effective January 1, 2017

Link to Medical Fee and Payment Rules

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
0387T	Y	$9,297.21
0388T	Y	$1,813.94
0390T	**N**	**packaged**
0392T	Y	$5,475.95
0393T	N	$3,594.09
0396T	**N**	**packaged**
0397T	**N**	**packaged**
0399T	**N**	**packaged**
0400T	**N**	**packaged**
0401T	**N**	**packaged**
0402T	Y	$710.87
0406T	**N**	**packaged**
0407T	**N**	**packaged**
0408T	Y	$8,248.00
0409T	Y	$8,248.00
0410T	Y	$3,192.64
0411T	Y	$3,192.64
0412T	N	$1,936.23
0413T	N	$1,936.23
0414T	Y	$8,248.00
0415T	Y	$768.53
0416T	Y	$1,464.09
0419T	Y	$445.49
0420T	Y	$445.49
0424T	**Y**	**$3,993.79**
0425T	**Y**	**$2,499.39**
0426T	**Y**	**$2,705.72**
0427T	**Y**	**$2,705.72**
0428T	**N**	**$2,332.08**
0429T	**N**	**$2,332.08**
0430T	**N**	**$2,332.08**
0431T	**Y**	**$2,705.72**
0432T	**Y**	**$2,332.08**
0433T	**Y**	**$2,332.08**
0434T	**N**	**$113.59**
0437T	**N**	**packaged**
0438T	**Y**	**$2,068.29**
0439T	**N**	**packaged**
0440T	**Y**	**$2,888.67**
0441T	**Y**	**$2,888.67**
0442T	**Y**	**$2,888.67**
0443T	**N**	**packaged**
0444T	**N**	**packaged**
0445T	**N**	**packaged**
0446T	**Y**	**$635.23**
0447T	**N**	**$159.27**
0448T	**Y**	**$470.81**
0449T	**Y**	**$4,072.78**
0450T	**N**	**packaged**
0465T	**Y**	**$290.60**
0466T	**N**	**packaged**
0467T	**N**	**packaged**
0468T	**N**	**packaged**
5060F	N	packaged
C5271	Y	$445.49
C5272	N	packaged
C5273	Y	$2,198.27
C5274	N	packaged
C5275	Y	$445.49
C5276	N	packaged
C5277	Y	$1,464.09
C5278	N	packaged
C9725	Y	$511.72
C9726	N	packaged
C9727	Y	$713.12
C9728	N	$1,062.53
C9739	Y	$3,133.02
C9740	Y	$8,271.97
C9742	Y	$1,077.14
C9743	Y	$2,172.08
C9800	Y	$1,464.09
G0104	N	$252.29
G0105	Y	$782.23
G0121	Y	$782.23
G0186	Y	$458.09
G0260	Y	$608.57
G0276	Y	$3,615.56
G0365	N	$159.82

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)
G0429	**Y**	**$100.64**
G0458	N	$3,523.62

HCPCS Code	Subject To Multiple Procedure Discounting	Maximum Payment (Implantable Devices Are Paid Seperately)