

SCHEDULE OF FEES

Effective 01/01/05, Last Reviewed 5/18/2007

Evaluations/Tests:

97001	Initial Evaluation	\$90.00
97002	Re-evaluation/Discharge Evaluation	\$50.00
97750	Functional Capacity Evaluation, each 15 minutes	\$35.00
95831	Manual Muscle Strength Testing, excluding hand	\$35.00
95832	Manual Muscle Strength Testing, hand	\$30.00
95851	Range of Motion Measurements, exclude hand	\$25.00
95852	Range of Motion Measurements, hand	\$20.00

Procedures/Modalities:

97113	Aquatic Therapy, each 15 minutes	\$38.00
97014/G0283	Electrical Stimulation (unattended)	\$20.00
97032	Electrical Stimulation (manual), each 15 minutes	\$20.00
97116	Gait Training, each 15 minutes	\$30.00
97033	Iontophoresis, each 15 minutes	\$30.00
97140	Manual Therapy (Traction, Joint Mobs., Stretching), each 15 minutes	\$35.00
97124	Massage, each 15 minutes	\$30.00
97018	Paraffin Bath	\$15.00
97022	Fluidotherapy	\$20.00
97112	Re-Education (Posture, Balance, Taping), each 15 minutes	\$35.00
97535	Self Care/Home Management/ADL Training, each 15 minutes	\$35.00
97530	Therapeutic Activities (Direct 1 on 1), each 15 minutes	\$35.00
97110	Therapeutic Exercise, each 15 minutes	\$35.00
97012	Traction, Mechanical	\$25.00
97035	Ultrasound, each 15 minutes	\$20.00
97537	Work Environment Analysis/Training, each 15 minutes	\$35.00

Equipment:

E1399	Lumbar Cushion	\$25.00
E1399	McKenzie Lumbar Roll	\$15.00
E1399	McKenzie Super Roll	\$20.00
E1399	Therapy Band, per 4 ft section	\$ 5.00

