

COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

Texas Medicaid Fee Schedule Information

COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

This fee schedule is intended to be used by a variety of provider types and provider specialties. Some procedure codes might not apply to every provider type and provider specialty designated to use the fee schedule. For detailed benefits and limitations, providers should refer to the current year's Texas Medicaid Provider Procedures Manual and relevant issues of the Texas Medicaid Bulletin.

Field Descriptions

TOS: One-character type-of-service (TOS) code assigned to each procedure code for system administration.

TOS Desc: Description of the TOS.

Proc Code: The five-digit code for services and items defined in Current Procedure Terminology or the Healthcare Common Procedure Coding System.

Mod 1: 1st Modifier, if required for pricing determination.

Mod 2: 2nd Modifier, if required for pricing determination.

Client Age

Frm: The "from age" is the beginning of an age range, if it is required for determining pricing. Some procedure codes have more than one pricing row. If the first row has a 0-999 age range, and the second row has a 21-999 age range, then the client age range for the first row (0-999) is actually 0-20 years of age. If the first row has a 0-999 age range and the second row has a 0-20 age range, then the client age range for the first row (0-999) is actually 21-999 years of age. Refer to the Texas Medicaid Provider Procedures Manual (TMPPM) for the exact age limitations.

Thru: The "through age" is the end of an age range, if it is required for determining pricing. Some procedure codes have more than one pricing row. If the first row has a 0-999 age range, and the second row has a 21-999 age range, then the client age range for the first row (0-999) is actually 0-20 years of age. If the first row has a 0-999 age range and the second row has a 0-20 age range, then the client age range for the first row (0-999) is actually 21-999 years of age. Refer to the TMPPM for exact age limitations.

Client Age Units: Medicaid rates are based on the client's age in days, months or years.

Non-facility/Facility Non-Facility pricing is for services that are rendered in places of service other than an inpatient hospital or an outpatient hospital. Facility pricing is for services that are rendered in an inpatient hospital (place of service [POS] 3), or an outpatient hospital or ambulatory surgical center (POS 5).

Total RVUs/Base Units: The current relative value units (RVUs) for the procedure code, if the fee is a resource-based fee (RBF). The payable amount for RBFs is calculated by multiplying the total RVUs by the applicable conversion factor. For Anesthesia services only, this column shows the base units instead; and payment is based on the sum of the base units plus actual face-to-face time units multiplied by the applicable conversion factor.

Conversion Factor: The Texas Medicaid conversion factor that is applicable for determining the amount payable when the rate is calculated by base units for anesthesia services or RVUs for other services.

Medicaid Fee: The Medicaid allowed amount.

Fee Effect Date: The effective date of service for which the fee is payable.

Adjust %: A percentage reduction has been applied to the allowed fee for this service. This column shows the percent by which the fee was adjusted. Additional information about rate changes is available on the TMHP website at www.tmhp.com/pages/topics/rates.aspx.

Adjusted Fee for Report Date: A percentage reduction has been applied to the allowed fee for this service. This column does not show reductions that may have been applied using other criteria that include but are not limited to place of service, client type program, or provider specialty. Additional information about rate changes **Date:** is available on the TMHP website at www.tmhp.com.

Note Codes: Note code indicator. Providers should review each note code to identify specific payment explanation or limitation. See Note Codes worksheet for applicable payment explanation or limitation.

Last Pricing Review Date: Medicaid rates are reviewed every two years or as necessary. This column shows the date on which the most recent review was conducted.

Date:

Change Ind: Indicator denoting that the Fee Schedule row has been added/updated since the last run. 'C' for change; blank for no changes.

TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility							Facility							Last Pricing Review Date	Change Ind			
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes 1 2 3	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes 1 2 3					
1	MEDICAL SERVICES	92507	U5		0	20	Years									0.00	\$0.0000	\$107.78	9/1/2017	0.00	\$107.78				9/1/2019	
1	MEDICAL SERVICES	92507	U5		21	999	Years									0.00	\$0.0000	\$107.78	9/1/2017	0.00	\$107.78				9/1/2019	
1	MEDICAL SERVICES	92507	UB		0	20	Years									0.00	\$0.0000	\$86.22	9/1/2019	0.00	\$86.22				9/1/2019	
1	MEDICAL SERVICES	92507	UB		21	999	Years									0.00	\$0.0000	\$86.22	9/1/2019	0.00	\$86.22				9/1/2019	
1	MEDICAL SERVICES	92508	U5		0	20	Years									0.00	\$0.0000	\$45.53	9/1/2017	0.00	\$45.53				9/1/2019	
1	MEDICAL SERVICES	92508	U5		21	999	Years									0.00	\$0.0000	\$45.53	9/1/2017	0.00	\$45.53				9/1/2019	
1	MEDICAL SERVICES	92508	UB		0	20	Years									0.00	\$0.0000	\$36.42	9/1/2019	0.00	\$36.42				9/1/2019	
1	MEDICAL SERVICES	92508	UB		21	999	Years									0.00	\$0.0000	\$36.42	9/1/2019	0.00	\$36.42				9/1/2019	

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COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility							Facility							Last Pricing Review Date	Change Ind				
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %			Adjusted Fee for Report Date	Note Codes		
														1	2	3									1	2	3
1	MEDICAL SERVICES	92521			0	20	Years									0.00	\$0.0000	\$101.12	9/1/2017	0.00	\$101.12				9/1/2019		
1	MEDICAL SERVICES	92521			21	999	Years									0.00	\$0.0000	\$101.12	9/1/2017	0.00	\$101.12				9/1/2019		
1	MEDICAL SERVICES	92522			0	20	Years									0.00	\$0.0000	\$127.36	9/1/2017	0.00	\$127.36				9/1/2019		
1	MEDICAL SERVICES	92522			21	999	Years									0.00	\$0.0000	\$127.36	9/1/2017	0.00	\$127.36				9/1/2019		
1	MEDICAL SERVICES	92523			0	20	Years									0.00	\$0.0000	\$169.81	9/1/2017	0.00	\$169.81				9/1/2019		
1	MEDICAL SERVICES	92523			21	999	Years									0.00	\$0.0000	\$169.81	9/1/2017	0.00	\$169.81				9/1/2019		
1	MEDICAL SERVICES	92524			0	20	Years									0.00	\$0.0000	\$86.82	9/1/2017	0.00	\$86.82				9/1/2019		
1	MEDICAL SERVICES	92524			21	999	Years									0.00	\$0.0000	\$86.82	9/1/2017	0.00	\$86.82				9/1/2019		
1	MEDICAL SERVICES	92526	U5		0	20	Years									0.00	\$0.0000	\$129.34	9/1/2017	0.00	\$129.34				9/1/2019		
1	MEDICAL SERVICES	92526	U5		21	999	Years									0.00	\$0.0000	\$129.34	9/1/2017	0.00	\$129.34				9/1/2019		
1	MEDICAL SERVICES	92526	UB		0	20	Years									0.00	\$0.0000	\$103.47	9/1/2019	0.00	\$103.47				9/1/2019		
1	MEDICAL SERVICES	92526	UB		21	999	Years									0.00	\$0.0000	\$103.47	9/1/2019	0.00	\$103.47				9/1/2019		
1	MEDICAL SERVICES	92601			0	6	Years									3.56	\$27.2760	\$97.10	6/1/2003	0.00	\$97.10				3/1/2022		
1	MEDICAL SERVICES	92602			0	6	Years									2.50	\$27.2760	\$68.19	6/1/2003	0.00	\$68.19				3/1/2022		
1	MEDICAL SERVICES	92603			7	999	Years									2.40	\$27.2760	\$65.46	6/1/2003	0.00	\$65.46				3/1/2022		
1	MEDICAL SERVICES	92604			7	999	Years									1.64	\$27.2760	\$44.73	6/1/2003	0.00	\$44.73				3/1/2022		
1	MEDICAL SERVICES	92610			0	20	Years									0.00	\$0.0000	\$205.12	9/1/2017	0.00	\$205.12				9/1/2019		
1	MEDICAL SERVICES	92610			21	999	Years									0.00	\$0.0000	\$205.12	9/1/2017	0.00	\$205.12				9/1/2019		
1	MEDICAL SERVICES	97012	U5		0	20	Years									0.00	\$0.0000	\$16.51	9/1/2017	0.00	\$16.51				9/1/2019		
1	MEDICAL SERVICES	97012	U5		21	999	Years									0.00	\$0.0000	\$16.51	9/1/2017	0.00	\$16.51				9/1/2019		
1	MEDICAL SERVICES	97012	UB		0	20	Years									0.00	\$0.0000	\$13.21	9/1/2019	0.00	\$13.21				9/1/2019		
1	MEDICAL SERVICES	97012	UB		21	999	Years									0.00	\$0.0000	\$13.21	9/1/2019	0.00	\$13.21				9/1/2019		
1	MEDICAL SERVICES	97014	U5		0	20	Years									0.00	\$0.0000	\$16.15	9/1/2017	0.00	\$16.15				9/1/2019		
1	MEDICAL SERVICES	97014	U5		21	999	Years									0.00	\$0.0000	\$16.15	9/1/2017	0.00	\$16.15				9/1/2019		
1	MEDICAL SERVICES	97014	UB		0	20	Years									0.00	\$0.0000	\$12.92	9/1/2019	0.00	\$12.92				9/1/2019		
1	MEDICAL SERVICES	97014	UB		21	999	Years									0.00	\$0.0000	\$12.92	9/1/2019	0.00	\$12.92				9/1/2019		

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COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility								Facility								Last Pricing Review Date	Change Ind		
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes				
														1	2	3							1			2	3
1	MEDICAL SERVICES	97016	U5		0	20	Years									0.00	\$0.0000	\$19.74	9/1/2017	0.00	\$19.74				9/1/2019		
1	MEDICAL SERVICES	97016	U5		21	999	Years									0.00	\$0.0000	\$19.74	9/1/2017	0.00	\$19.74				9/1/2019		
1	MEDICAL SERVICES	97016	UB		0	20	Years									0.00	\$0.0000	\$15.79	9/1/2019	0.00	\$15.79				9/1/2019		
1	MEDICAL SERVICES	97016	UB		21	999	Years									0.00	\$0.0000	\$15.79	9/1/2019	0.00	\$15.79				9/1/2019		
1	MEDICAL SERVICES	97018	U5		0	20	Years									0.00	\$0.0000	\$11.13	9/1/2017	0.00	\$11.13				9/1/2019		
1	MEDICAL SERVICES	97018	U5		21	999	Years									0.00	\$0.0000	\$11.13	9/1/2017	0.00	\$11.13				9/1/2019		
1	MEDICAL SERVICES	97018	UB		0	20	Years									0.00	\$0.0000	\$8.90	9/1/2019	0.00	\$8.90				9/1/2019		
1	MEDICAL SERVICES	97018	UB		21	999	Years									0.00	\$0.0000	\$8.90	9/1/2019	0.00	\$8.90				9/1/2019		
1	MEDICAL SERVICES	97022	U5		0	20	Years									0.00	\$0.0000	\$24.05	9/1/2017	0.00	\$24.05				9/1/2019		
1	MEDICAL SERVICES	97022	U5		21	999	Years									0.00	\$0.0000	\$24.05	9/1/2017	0.00	\$24.05				9/1/2019		
1	MEDICAL SERVICES	97022	UB		0	20	Years									0.00	\$0.0000	\$19.24	9/1/2019	0.00	\$19.24				9/1/2019		
1	MEDICAL SERVICES	97022	UB		21	999	Years									0.00	\$0.0000	\$19.24	9/1/2019	0.00	\$19.24				9/1/2019		
1	MEDICAL SERVICES	97024	U5		0	20	Years									0.00	\$0.0000	\$6.82	9/1/2017	0.00	\$6.82				9/1/2019		
1	MEDICAL SERVICES	97024	U5		21	999	Years									0.00	\$0.0000	\$6.82	9/1/2017	0.00	\$6.82				9/1/2019		
1	MEDICAL SERVICES	97024	UB		0	20	Years									0.00	\$0.0000	\$5.46	9/1/2019	0.00	\$5.46				9/1/2019		
1	MEDICAL SERVICES	97024	UB		21	999	Years									0.00	\$0.0000	\$5.46	9/1/2019	0.00	\$5.46				9/1/2019		
1	MEDICAL SERVICES	97026	U5		0	20	Years									0.00	\$0.0000	\$6.10	9/1/2017	0.00	\$6.10				9/1/2019		
1	MEDICAL SERVICES	97026	U5		21	999	Years									0.00	\$0.0000	\$6.10	9/1/2017	0.00	\$6.10				9/1/2019		
1	MEDICAL SERVICES	97026	UB		0	20	Years									0.00	\$0.0000	\$4.88	9/1/2019	0.00	\$4.88				9/1/2019		
1	MEDICAL SERVICES	97026	UB		21	999	Years									0.00	\$0.0000	\$4.88	9/1/2019	0.00	\$4.88				9/1/2019		
1	MEDICAL SERVICES	97028	U5		0	20	Years									0.00	\$0.0000	\$7.54	9/1/2017	0.00	\$7.54				9/1/2019		
1	MEDICAL SERVICES	97028	U5		21	999	Years									0.00	\$0.0000	\$7.54	9/1/2017	0.00	\$7.54				9/1/2019		
1	MEDICAL SERVICES	97028	UB		0	20	Years									0.00	\$0.0000	\$6.03	9/1/2019	0.00	\$6.03				9/1/2019		
1	MEDICAL SERVICES	97028	UB		21	999	Years									0.00	\$0.0000	\$6.03	9/1/2019	0.00	\$6.03				9/1/2019		
1	MEDICAL SERVICES	97032	U5		0	20	Years									0.00	\$0.0000	\$37.07	9/1/2017	0.00	\$37.07				9/1/2019		
1	MEDICAL SERVICES	97032	U5		21	999	Years									0.00	\$0.0000	\$37.07	9/1/2017	0.00	\$37.07				9/1/2019		

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TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility								Facility								Last Pricing Review Date	Change Ind		
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes				
														1	2	3							1			2	3
1	MEDICAL SERVICES	97032	UB		0	20	Years									0.00	\$0.0000	\$29.66	9/1/2019	0.00	\$29.66				9/1/2019		
1	MEDICAL SERVICES	97032	UB		21	999	Years									0.00	\$0.0000	\$29.66	9/1/2019	0.00	\$29.66				9/1/2019		
1	MEDICAL SERVICES	97033	U5		0	20	Years									0.00	\$0.0000	\$35.29	9/1/2017	0.00	\$35.29				9/1/2019		
1	MEDICAL SERVICES	97033	U5		21	999	Years									0.00	\$0.0000	\$35.29	9/1/2017	0.00	\$35.29				9/1/2019		
1	MEDICAL SERVICES	97033	UB		0	20	Years									0.00	\$0.0000	\$28.23	9/1/2019	0.00	\$28.23				9/1/2019		
1	MEDICAL SERVICES	97033	UB		21	999	Years									0.00	\$0.0000	\$28.23	9/1/2019	0.00	\$28.23				9/1/2019		
1	MEDICAL SERVICES	97034	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97034	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97034	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97034	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97035	U5		0	20	Years									0.00	\$0.0000	\$34.78	9/1/2017	0.00	\$34.78				9/1/2019		
1	MEDICAL SERVICES	97035	U5		21	999	Years									0.00	\$0.0000	\$34.78	9/1/2017	0.00	\$34.78				9/1/2019		
1	MEDICAL SERVICES	97035	UB		0	20	Years									0.00	\$0.0000	\$27.82	9/1/2019	0.00	\$27.82				9/1/2019		
1	MEDICAL SERVICES	97035	UB		21	999	Years									0.00	\$0.0000	\$27.82	9/1/2019	0.00	\$27.82				9/1/2019		
1	MEDICAL SERVICES	97036	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97036	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97036	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97036	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97110	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97110	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97110	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97110	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97112	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97112	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97112	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97112	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		

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TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility								Facility								Last Pricing Review Date	Change Ind		
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes				
														1	2	3							1			2	3
1	MEDICAL SERVICES	97113	U5		0	20	Years										0.00	\$0.0000	\$38.75	9/1/2017	0.00	\$38.75				9/1/2019	
1	MEDICAL SERVICES	97113	U5		21	999	Years										0.00	\$0.0000	\$38.75	9/1/2017	0.00	\$38.75				9/1/2019	
1	MEDICAL SERVICES	97113	UB		0	20	Years										0.00	\$0.0000	\$31.00	9/1/2019	0.00	\$31.00				9/1/2019	
1	MEDICAL SERVICES	97113	UB		21	999	Years										0.00	\$0.0000	\$31.00	9/1/2019	0.00	\$31.00				9/1/2019	
1	MEDICAL SERVICES	97116	U5		0	20	Years										0.00	\$0.0000	\$31.22	9/1/2017	0.00	\$31.22				9/1/2019	
1	MEDICAL SERVICES	97116	U5		21	999	Years										0.00	\$0.0000	\$31.22	9/1/2017	0.00	\$31.22				9/1/2019	
1	MEDICAL SERVICES	97116	UB		0	20	Years										0.00	\$0.0000	\$24.98	9/1/2019	0.00	\$24.98				9/1/2019	
1	MEDICAL SERVICES	97116	UB		21	999	Years										0.00	\$0.0000	\$24.98	9/1/2019	0.00	\$24.98				9/1/2019	
1	MEDICAL SERVICES	97124	U5		0	20	Years										0.00	\$0.0000	\$28.16	9/1/2017	0.00	\$28.16				9/1/2019	
1	MEDICAL SERVICES	97124	U5		21	999	Years										0.00	\$0.0000	\$28.16	9/1/2017	0.00	\$28.16				9/1/2019	
1	MEDICAL SERVICES	97124	UB		0	20	Years										0.00	\$0.0000	\$22.53	9/1/2019	0.00	\$22.53				9/1/2019	
1	MEDICAL SERVICES	97124	UB		21	999	Years										0.00	\$0.0000	\$22.53	9/1/2019	0.00	\$22.53				9/1/2019	
1	MEDICAL SERVICES	97140	U5		0	20	Years										0.00	\$0.0000	\$31.80	9/1/2017	0.00	\$31.80				9/1/2019	
1	MEDICAL SERVICES	97140	U5		21	999	Years										0.00	\$0.0000	\$31.80	9/1/2017	0.00	\$31.80				9/1/2019	
1	MEDICAL SERVICES	97140	UB		0	20	Years										0.00	\$0.0000	\$25.44	9/1/2019	0.00	\$25.44				9/1/2019	
1	MEDICAL SERVICES	97140	UB		21	999	Years										0.00	\$0.0000	\$25.44	9/1/2019	0.00	\$25.44				9/1/2019	
1	MEDICAL SERVICES	97150	U5		0	20	Years										0.00	\$0.0000	\$34.31	9/1/2017	0.00	\$34.31				9/1/2019	
1	MEDICAL SERVICES	97150	U5		21	999	Years										0.00	\$0.0000	\$34.31	9/1/2017	0.00	\$34.31				9/1/2019	
1	MEDICAL SERVICES	97150	UB		0	20	Years										0.00	\$0.0000	\$27.45	9/1/2019	0.00	\$27.45				9/1/2019	
1	MEDICAL SERVICES	97150	UB		21	999	Years										0.00	\$0.0000	\$27.45	9/1/2019	0.00	\$27.45				9/1/2019	
1	MEDICAL SERVICES	97161			0	20	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	
1	MEDICAL SERVICES	97161			21	999	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	
1	MEDICAL SERVICES	97162			0	20	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	
1	MEDICAL SERVICES	97162			21	999	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	
1	MEDICAL SERVICES	97163			0	20	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	
1	MEDICAL SERVICES	97163			21	999	Years										0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019	

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COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility								Facility								Last Pricing Review Date	Change Ind		
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes				
														1	2	3							1			2	3
1	MEDICAL SERVICES	97164			0	20	Years									0.00	\$0.0000	\$104.57	9/1/2017	0.00	\$104.57				9/1/2019		
1	MEDICAL SERVICES	97164			21	999	Years									0.00	\$0.0000	\$104.57	9/1/2017	0.00	\$104.57				9/1/2019		
1	MEDICAL SERVICES	97165			0	20	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97165			21	999	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97166			0	20	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97166			21	999	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97167			0	20	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97167			21	999	Years									0.00	\$0.0000	\$116.19	9/1/2017	0.00	\$116.19				9/1/2019		
1	MEDICAL SERVICES	97168			0	20	Years									0.00	\$0.0000	\$104.57	9/1/2017	0.00	\$104.57				9/1/2019		
1	MEDICAL SERVICES	97168			21	999	Years									0.00	\$0.0000	\$104.57	9/1/2017	0.00	\$104.57				9/1/2019		
1	MEDICAL SERVICES	97530	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97530	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97530	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97530	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97535	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97535	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97535	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97535	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97537	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97537	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97537	UB		0	20	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97537	UB		21	999	Years									0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019		
1	MEDICAL SERVICES	97542	U5		0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97542	U5		21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97542	U5	UC	0	20	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		
1	MEDICAL SERVICES	97542	U5	UC	21	999	Years									0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019		

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COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

TOS	TOS Desc	Proc Code	Mod 1	Mod 2	Client Age			Non-facility							Facility							Last Pricing Review Date	Change Ind		
					Frm	Thru	Units	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes 1 2 3	Total RVUs/ Base Units	Conversion Factor	Medicaid Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes 1 2 3				
1	MEDICAL SERVICES	97542	UB		0	20	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97542	UB		21	999	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97542	UB	UC	0	20	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97542	UB	UC	21	999	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97602			0	999	Years	0.00	\$0.0000	\$27.68	3/1/2021	0.00	\$27.68		0.00	\$0.0000	\$27.68	3/1/2021	0.00	\$27.68				8/24/2012	
1	MEDICAL SERVICES	97750	U5		0	20	Years								0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019	
1	MEDICAL SERVICES	97750	U5		21	999	Years								0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019	
1	MEDICAL SERVICES	97750	UB		0	20	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97750	UB		21	999	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97760	U5		0	20	Years								0.00	\$0.0000	\$34.61	9/1/2017	0.00	\$34.61				9/1/2019	
1	MEDICAL SERVICES	97760	UB		0	20	Years								0.00	\$0.0000	\$27.69	9/1/2019	0.00	\$27.69				9/1/2019	
1	MEDICAL SERVICES	97761	U5		0	20	Years								0.00	\$0.0000	\$33.75	9/1/2017	0.00	\$33.75				9/1/2019	
1	MEDICAL SERVICES	97761	UB		0	20	Years								0.00	\$0.0000	\$27.00	9/1/2019	0.00	\$27.00				9/1/2019	
1	MEDICAL SERVICES	97763	U5		0	20	Years								0.00	\$0.0000	\$35.66	1/1/2018	0.00	\$35.66				9/1/2019	
1	MEDICAL SERVICES	97763	UB		0	20	Years								0.00	\$0.0000	\$28.53	9/1/2019	0.00	\$28.53				9/1/2019	
1	MEDICAL SERVICES	97799	U5		0	20	Years								0.00	\$0.0000	\$35.80	9/1/2017	0.00	\$35.80				9/1/2019	
1	MEDICAL SERVICES	97799	U5		21	999	Years								0.00	\$0.0000	\$35.80	9/1/2017	0.00	\$35.80				9/1/2019	
1	MEDICAL SERVICES	97799	UB		0	20	Years								0.00	\$0.0000	\$28.64	9/1/2019	0.00	\$28.64				9/1/2019	
1	MEDICAL SERVICES	97799	UB		21	999	Years								0.00	\$0.0000	\$28.64	9/1/2019	0.00	\$28.64				9/1/2019	
1	MEDICAL SERVICES	99366			0	20	Years								0.32	\$28.0672	\$8.98	3/1/2022	0.00	\$8.98				3/1/2022	
9	OTHER MEDICAL ITEMS OR SERVICES	A4570			0	999	Years	0.00	\$0.0000	\$31.01	7/1/2011	0.00	\$31.01		0.00	\$0.0000	\$31.01	7/1/2011	0.00	\$31.01				9/1/2021	
1	MEDICAL SERVICES	S9152			0	20	Years								0.00	\$0.0000	\$118.87	9/1/2017	0.00	\$118.87				9/1/2019	
1	MEDICAL SERVICES	S9152			21	999	Years								0.00	\$0.0000	\$118.87	9/1/2017	0.00	\$118.87				9/1/2019	

COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

Texas Medicaid Fee Schedule Information

COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY (CORF) / OUTPATIENT REHABILITATION FACILITY (ORF)

This fee schedule is intended to be used by a variety of provider types and provider specialties. Some procedure codes might not apply to every provider type and provider specialty designated to use the fee schedule. For detailed benefits and limitations, providers should refer to the current year's Texas Medicaid Provider Procedures Manual and relevant issues of the Texas Medicaid Bulletin.

Field Descriptions

Proc Code: The five-digit code for services and items defined in Current Procedure Terminology or the Healthcare Common Procedure Coding System.

Mod 1: 1st Modifier, if required for pricing determination.

Mod 2: 2nd Modifier, if required for pricing determination.

Client Age

Frm: The "from age" is the beginning of an age range, if it is required for determining pricing. Some procedure codes have more than one pricing row. If the first row has a 0-999 age range, and the second row has a 21-999 age range, then the client age range for the first row (0-999) is actually 0-20 years of age. If the first row has a 0-999 age range and the second row has a 0-20 age range, then the client age range for the first row (0-999) is actually 21-999 years of age. Refer to the Texas Medicaid Provider Procedures Manual (TMPPM) for the exact age limitations.

Thru: The "through age" is the end of an age range, if it is required for determining pricing. Some procedure codes have more than one pricing row. If the first row has a 0-999 age range, and the second row has a 21-999 age range, then the client age range for the first row (0-999) is actually 0-20 years of age. If the first row has a 0-999 age range and the second row has a 0-20 age range, then the client age range for the first row (0-999) is actually 21-999 years of age. Refer to the TMPPM for exact age limitations.

Client Age Units: Medicaid rates are based on the client's age in days, months or years.

Purchase/Rental

Fee: The Medicaid allowed amount.

Fee Effect Date: The effective date of service for which the fee is payable.

Adjust%: A percentage reduction has been applied to the allowed fee for this service. This column shows the percent by which the fee was adjusted. Additional information about rate changes is available on the TMHP website at www.tmhp.com/pages/topics/rates.aspx.

Adjusted Fee for Report Date: A percentage reduction has been applied to the allowed fee for this service. This column does not show reductions that may have been applied using other criteria that include but are not limited to place of service, client type program, or provider specialty. Additional information about rate changes is available on the TMHP website at www.tmhp.com.

Note Codes: Note code indicator. Providers should review each note code to identify specific payment explanation or limitation. See Note Codes worksheet for applicable payment explanation or limitation.

Last Pricing Review Date: Medicaid rates are reviewed every two years or as necessary. This column shows the date on which the most recent review was conducted.

Change Ind: Indicator denoting that the Fee Schedule row has been added/updated since the last run. 'C' for change; blank for no changes.

Proc Code	Mod 1	Mod 2	Client Age			Purchase						Rental						Change Ind				
			Frm	Thru	Units	Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date	Note Codes			Last Pricing Review Date	Fee	Fee Effect Date	Adjust %	Adjusted Fee for Report Date		Note Codes			Last Pricing Review Date
										1	2	3							1	2	3	
E0710			0	999	Years	\$31.80	4/1/2013	0.00	\$31.80				9/1/2021									

- Note Code(s):**
- 5 - This procedure is manually reviewed to determine pricing.
 - 6 - This procedure is payable only through the CCP program.
 - 9 - The NP/CNS/PA/CNM Provider Fee Schedule reflects 100 percent of the fee applicable to a physician.
 - HP - This is a Healthy Texas Women Plus procedure for clients eligible for HTW Plus effective 09/01/2020.