

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
A4263	00	\$25.75	
A4266	00	\$9.05	
A4267	00	\$0.90	
A4269	FP	\$5.75	
A4340	00	\$25.66	
A4351	00	\$1.72	
A4357	00	\$9.22	
A4358	00	\$5.36	
A4461	00	\$3.12	
A4463	00	\$12.65	
A4550	FP	\$25.00	
A4550	00	\$25.00	
A4561	00	\$19.57	
A4562	00	\$48.66	
A4570	00	\$20.00	
A4580	00	\$17.80	
A4590	00	\$25.80	
A4614	00	\$22.60	
A4627	00	\$32.30	
A4641	00	M	
A9500	00	\$105.05	
A9502	00	\$106.83	
A9503	00	\$13.77	
A9505	00	\$30.60	
A9516	00	M	
A9517	00	M	
A9527	00	M	
A9537	00	M	
A9550	00	M	
A9551	00	M	
A9552	00	\$250.00	
A9553	00	M	
A9554	00	M	
A9555	00	M	
A9556	00	M	
A9557	00	M	
A9558	00	M	
A9559	00	M	
A9560	00	M	
A9561	00	M	
A9562	00	M	
A9563	00	M	
A9564	00	M	
A9567	00	M	
A9568	00	M	
A9576	00	\$2.46	

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Proc	Mod	Payment Facility	
		Rate	Rate
A9577	00	\$2.85	
A9578	00	\$2.68	
A9579	00	\$2.55	
A9580	00	M	
A9600	00	\$761.99	
A9605	00	M	
A9698	00	M	
D1206	00	\$17.00	
E0112	LL	\$2.83	
E0112	NU	\$24.08	
E0112	UE	\$18.37	
G0104	00	\$97.29	\$44.37
G0105	00	\$288.31	\$155.43
G0121	00	\$288.31	\$155.43
G0130	TC	\$19.36	
G0130	00	\$27.59	
G0130	26	\$8.22	
G0166	00	\$118.25	
G0202	TC	\$74.57	
G0202	00	\$101.41	
G0202	26	\$26.85	
G0204	TC	\$81.46	
G0204	00	\$114.98	
G0204	26	\$33.51	
G0206	TC	\$64.94	
G0206	00	\$91.79	
G0206	26	\$26.85	
G0237	00	\$10.05	
G0238	00	\$10.62	
G0239	00	\$9.47	
G0364	00	\$9.32	\$6.74
G0372	00	\$11.26	\$6.37
G9008	00	\$78.38	
G9009	00	\$18.88	
G9010	00	\$20.32	
G9011	00	\$13.12	
G9012	00	M	
H0002	00	\$65.00	
J0120	00	\$1.23	
J0128	00	\$63.70	
J0129	00	\$17.71	
J0130	00	\$568.39	
J0133	00	\$0.19	
J0150	00	\$8.95	
J0152	00	\$69.86	
J0170	00	\$1.18	

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Proc	Mod	Payment Facility	
		Rate	Rate
J0180	00	\$121.62	
J0190	00	\$2.73	
J0200	00	\$16.52	
J0205	00	\$37.49	
J0207	00	\$463.26	
J0210	00	\$20.50	
J0215	00	\$27.39	
J0220	00	\$118.08	
J0256	00	\$4.02	
J0270	00	\$1.44	
J0275	00	\$20.43	
J0280	00	\$0.41	
J0282	00	\$0.24	
J0285	00	\$20.09	
J0287	00	\$19.68	
J0288	00	\$15.31	
J0289	00	\$30.90	
J0290	00	\$4.42	
J0295	00	\$4.03	
J0300	00	\$12.25	
J0330	00	\$0.23	
J0350	00	\$2,325.18	
J0360	00	\$12.30	
J0380	00	\$1.18	
J0390	00	\$16.99	
J0395	00	\$157.44	
J0400	00	\$0.28	
J0456	00	\$16.91	
J0460	00	\$0.92	
J0470	00	\$27.03	
J0475	00	\$209.10	
J0476	00	\$68.88	
J0500	00	\$19.24	
J0515	00	\$24.60	
J0520	00	\$4.61	
J0530	00	\$15.96	
J0540	00	\$31.92	
J0550	00	\$63.84	
J0560	00	\$23.12	
J0570	00	\$40.04	
J0580	00	\$82.06	
J0585	00	\$5.17	
J0587	00	\$8.46	
J0592	00	\$0.78	
J0595	00	\$2.11	
J0600	00	\$47.58	

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Proc	Mod	Rate	Payment Facility Rate
J0610	00	\$0.73	
J0620	00	\$12.15	
J0630	00	\$47.54	
J0636	00	\$0.42	
J0640	00	\$0.98	
J0670	00	\$1.41	
J0690	00	\$4.30	
J0692	00	\$8.34	
J0694	00	\$9.20	
J0696	00	\$9.26	
J0697	00	\$6.89	
J0698	00	\$10.46	
J0702	00	\$5.89	
J0704	00	\$0.93	
J0706	00	\$2.73	
J0710	00	\$1.34	
J0713	00	\$3.86	
J0715	00	\$5.97	
J0720	00	\$24.50	
J0725	00	\$4.18	
J0735	00	\$63.49	
J0740	00	\$728.16	
J0743	00	\$16.06	
J0744	00	\$2.01	
J0745	00	\$1.12	
J0760	00	\$6.36	
J0770	00	\$46.74	
J0780	00	\$2.95	
J0800	00	\$2,385.07	
J0835	00	\$104.87	
J0850	00	\$867.16	
J0881	00	\$4.65	
J0882	00	\$4.65	
J0885	00	\$11.93	
J0886	00	\$11.93	
J0894	00	\$25.88	
J0895	00	\$14.02	
J0900	00	\$1.41	
J0945	00	\$0.03	
J0970	00	\$31.16	
J1000	00	\$6.16	
J1020	00	\$2.96	
J1030	00	\$5.01	
J1040	00	\$9.11	
J1051	00	\$7.02	
J1055	FP	\$59.72	

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Proc	Mod	Payment Facility	
		Rate	Rate
J1055	00	\$59.72	
J1056	FP	\$22.13	
J1056	00	\$22.94	
J1060	00	\$4.95	
J1070	00	\$5.99	
J1080	00	\$10.88	
J1094	00	\$0.61	
J1100	00	\$0.07	
J1110	00	\$71.25	
J1120	00	\$35.42	
J1160	00	\$1.00	
J1165	00	\$0.63	
J1170	00	\$0.97	
J1180	00	\$7.78	
J1190	00	\$212.04	
J1200	00	\$0.81	
J1205	00	\$177.05	
J1212	00	\$76.88	
J1240	00	\$4.67	
J1245	00	\$2.07	
J1250	00	\$3.10	
J1260	00	\$3.84	
J1270	00	\$6.14	
J1300	00	\$163.74	
J1320	00	\$0.12	
J1325	00	\$14.46	
J1327	00	\$19.96	
J1330	00	\$3.94	
J1364	00	\$9.68	
J1380	00	\$13.33	
J1390	00	\$18.78	
J1410	00	\$71.60	
J1435	00	\$0.04	
J1436	00	\$66.42	
J1438	00	\$170.35	
J1440	00	\$202.85	
J1441	00	\$323.10	
J1450	00	\$14.76	
J1452	00	\$820.00	
J1453	00	\$1.50	
J1455	00	\$13.52	
J1459	00	\$42.53	
J1460	00	\$12.04	
J1470	00	\$24.08	
J1480	00	\$36.12	
J1490	00	\$48.16	

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Proc	Mod	Payment Facility	
		Rate	Rate
J1500	00	\$60.20	
J1510	00	\$72.22	
J1520	00	\$84.25	
J1530	00	\$96.32	
J1540	00	\$108.36	
J1550	00	\$120.39	
J1561	00	\$44.21	
J1565	00	\$15.65	
J1566	00	\$48.85	
J1568	00	\$52.52	
J1569	00	\$53.23	
J1570	00	\$52.59	
J1571	00	\$61.37	
J1572	00	\$39.67	
J1573	00	\$65.60	
J1580	00	\$0.71	
J1590	00	\$0.78	
J1600	00	\$14.35	
J1610	00	\$68.88	
J1620	00	\$174.34	
J1626	00	\$8.69	
J1630	00	\$2.12	
J1631	00	\$41.33	
J1642	00	\$0.13	
J1644	00	\$1.04	
J1645	00	\$16.82	
J1650	00	\$6.71	
J1655	00	\$3.72	
J1670	00	\$219.73	
J1700	00	\$0.30	
J1710	00	\$4.80	
J1720	00	\$2.00	
J1730	00	\$106.12	
J1740	00	\$132.43	
J1742	00	\$384.43	
J1743	00	\$431.02	
J1745	00	\$59.39	
J1750	00	\$15.46	
J1756	00	\$0.56	
J1785	00	\$3.75	
J1790	00	\$1.39	
J1800	00	\$8.20	
J1810	00	\$11.09	
J1815	00	\$0.17	
J1825	00	\$474.78	
J1830	00	\$106.08	

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Proc	Mod	Payment Facility	
		Rate	Rate
J1835	00	\$39.25	
J1840	00	\$7.43	
J1850	00	\$1.12	
J1885	00	\$1.34	
J1890	00	\$8.86	
J1931	00	\$22.83	
J1940	00	\$0.39	
J1950	00	\$538.03	
J1955	00	\$11.28	
J1956	00	\$15.90	
J1960	00	\$3.25	
J1980	00	\$10.18	
J1990	00	\$21.57	
J2001	00	\$0.42	
J2010	00	\$4.40	
J2020	00	\$28.97	
J2060	00	\$1.01	
J2150	00	\$0.98	
J2175	00	\$0.79	
J2180	00	\$4.07	
J2185	00	\$5.99	
J2210	00	\$5.31	
J2250	00	\$0.57	
J2260	00	\$2.67	
J2270	00	\$1.00	
J2271	00	\$0.86	
J2275	00	\$6.40	
J2300	00	\$1.49	
J2310	00	\$5.43	
J2320	00	\$3.30	
J2321	00	\$6.62	
J2322	00	\$13.94	
J2323	00	\$7.53	
J2353	00	\$100.02	
J2354	00	\$1.18	
J2355	00	\$240.88	
J2357	00	\$18.18	
J2360	00	\$22.14	
J2370	00	\$0.67	
J2400	00	\$17.75	
J2405	00	\$0.33	
J2410	00	\$2.56	
J2430	00	\$39.36	
J2440	00	\$1.02	
J2460	00	\$0.90	
J2469	00	\$32.67	

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Proc	Mod	Payment Facility	
		Rate	Rate
J2501	00	\$4.60	
J2503	00	\$979.08	
J2505	00	\$2,856.55	
J2510	00	\$11.24	
J2515	00	\$9.07	
J2540	00	\$0.12	
J2543	00	\$66.43	
J2545	00	\$81.80	
J2550	00	\$1.82	
J2560	00	\$3.67	
J2590	00	\$1.31	
J2597	00	\$5.81	
J2650	00	\$0.66	
J2670	00	\$3.38	
J2675	00	\$3.18	
J2680	00	\$1.57	
J2690	00	\$5.83	
J2700	00	\$9.30	
J2710	00	\$2.97	
J2720	00	\$0.66	
J2724	00	\$11.32	
J2725	00	\$15.99	
J2730	00	\$85.28	
J2760	00	\$53.14	
J2765	00	\$1.05	
J2770	00	\$134.35	
J2778	00	\$399.75	
J2780	00	\$0.98	
J2785	00	\$49.78	
J2788	00	\$44.58	
J2790	00	\$104.30	
J2791	00	\$9.56	
J2792	00	\$20.96	
J2794	00	\$4.79	
J2795	00	\$0.41	
J2800	00	\$27.51	
J2820	00	\$29.39	
J2910	00	\$24.11	
J2916	00	\$7.05	
J2920	00	\$2.70	
J2930	00	\$4.35	
J2940	00	\$43.36	
J2941	00	\$54.92	
J2950	00	\$0.82	
J2993	00	\$1,187.15	
J2995	00	\$76.88	

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Proc	Mod	Payment Facility	
		Rate	Rate
J2997	00	\$35.28	
J3000	00	\$7.46	
J3010	00	\$0.41	
J3030	00	\$72.60	
J3070	00	\$7.44	
J3101	00	\$49.28	
J3105	00	\$1.97	
J3120	00	\$6.97	
J3130	00	\$13.93	
J3140	00	\$0.69	
J3150	00	\$0.69	
J3230	00	\$3.65	
J3240	00	\$899.87	
J3246	00	\$1.75	
J3250	00	\$2.78	
J3260	00	\$0.71	
J3265	00	\$2.03	
J3280	00	\$4.88	
J3285	00	\$55.15	
J3301	00	\$1.78	
J3302	00	\$0.74	
J3303	00	\$2.91	
J3305	00	\$144.77	
J3310	00	\$6.16	
J3315	00	\$595.32	
J3320	00	\$29.09	
J3350	00	\$1.38	
J3360	00	\$1.91	
J3364	00	\$8.85	
J3365	00	\$442.62	
J3370	00	\$3.70	
J3396	00	\$9.22	
J3400	00	\$10.66	
J3410	00	\$0.42	
J3420	00	\$0.28	
J3430	00	\$4.20	
J3470	00	\$24.35	
J3473	00	\$0.46	
J3475	00	\$0.33	
J3480	00	\$0.04	
J3485	00	\$1.11	
J3487	00	\$207.65	
J3488	00	\$205.39	
J3490	FP	M	
J3490	00	M	
J7030	00	\$1.34	

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Proc	Mod	Payment Facility	
		Rate	Rate
J7040	00	\$1.20	
J7042	00	\$1.32	
J7050	00	\$2.02	
J7060	00	\$1.29	
J7070	00	\$2.58	
J7100	00	\$21.48	
J7110	00	\$11.48	
J7120	00	\$1.35	
J7130	00	\$1.85	
J7300	FP	\$368.07	
J7300	00	\$368.07	
J7302	FP	\$461.21	
J7302	00	\$461.21	
J7307	FP	\$557.86	
J7307	00	\$557.86	
J7308	00	\$140.75	
J7311	00	M	
J7321	00	\$119.54	
J7322	00	\$212.87	
J7323	00	\$125.54	
J7324	00	\$205.75	
J7501	00	\$93.48	
J7513	00	\$444.59	
J7525	00	\$134.43	
J7676	00	M	
J9000	00	\$5.61	
J9001	00	\$418.10	
J9010	00	\$526.66	
J9015	00	\$776.22	
J9017	00	\$33.09	
J9020	00	\$55.00	
J9025	00	\$4.37	
J9027	00	\$110.70	
J9031	00	\$138.66	
J9035	00	\$56.38	
J9040	00	\$40.34	
J9041	00	\$33.51	
J9045	00	\$10.23	
J9050	00	\$157.64	
J9055	00	\$47.23	
J9060	00	\$3.64	
J9062	00	\$18.20	
J9065	00	\$53.30	
J9070	00	\$4.03	
J9080	00	\$8.06	
J9090	00	\$24.88	

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Proc	Mod	Payment Facility	
		Rate	Rate
J9091	00	\$44.79	
J9092	00	\$80.61	
J9093	00	\$2.07	
J9094	00	\$4.13	
J9095	00	\$12.51	
J9096	00	\$22.73	
J9097	00	\$41.33	
J9100	00	\$2.95	
J9110	00	\$14.76	
J9120	00	\$467.40	
J9130	00	\$10.95	
J9140	00	\$18.60	
J9150	00	\$20.66	
J9151	00	\$55.76	
J9160	00	\$1,357.92	
J9165	00	\$12.44	
J9170	00	\$345.79	
J9178	00	\$24.77	
J9181	00	\$0.74	
J9185	00	\$282.15	
J9190	00	\$3.08	
J9200	00	\$118.08	
J9201	00	\$129.20	
J9202	00	\$369.98	
J9206	00	\$120.77	
J9207	00	\$60.48	
J9208	00	\$60.52	
J9209	00	\$21.72	
J9211	00	\$362.47	
J9212	00	\$5.07	
J9213	00	\$41.77	
J9214	00	\$13.76	
J9215	00	\$17.63	
J9216	00	\$323.08	
J9217	00	\$647.26	
J9218	00	\$31.61	
J9219	00	M	
J9226	00	\$13,776.00	
J9230	00	\$136.82	
J9245	00	\$1,538.89	
J9250	00	\$0.46	
J9260	00	\$3.94	
J9263	00	\$9.21	
J9264	00	\$8.59	
J9265	00	\$16.83	
J9266	00	\$2,562.50	

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Proc	Mod	Rate	Payment Facility Rate
J9268	00	\$1,869.60	
J9270	00	\$80.96	
J9280	00	\$19.68	
J9290	00	\$71.83	
J9291	00	\$143.66	
J9293	00	\$100.86	
J9303	00	\$78.72	
J9305	00	\$45.20	
J9310	00	\$525.67	
J9320	00	\$274.91	
J9330	00	\$45.37	
J9340	00	\$96.92	
J9350	00	\$916.92	
J9355	00	\$60.56	
J9357	00	\$609.93	
J9360	00	\$3.54	
J9370	00	\$14.81	
J9375	00	\$29.62	
J9380	00	\$74.05	
J9390	00	\$36.39	
J9395	00	\$78.21	
J9600	00	\$2,468.16	
J9999	00	M	
L0120	00	\$18.57	
L0150	00	\$77.27	
L1610	00	\$27.10	
L1830	00	\$66.96	
L3650	00	\$36.16	
L3660	00	\$62.09	
L3670	00	\$86.55	
P7001	00	\$8.00	
Q0091	FP	\$31.25	\$14.28
Q0091	00	\$31.25	\$14.28
Q0111	FP	\$4.04	
Q0111	00	\$4.04	
Q0112	FP	\$4.21	
Q0112	00	\$4.21	
Q0113	00	\$2.32	
Q0144	00	\$16.00	
Q2004	00	M	
Q2009	00	M	
Q2017	00	M	
Q3001	00	M	
Q4081	00	\$1.24	
Q4100	00	M	
Q4101	00	\$25.39	

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Proc	Mod	Payment Facility	
		Rate	Rate
Q4104	00	\$10.05	
Q4105	00	\$10.05	
Q9951	00	M	
Q9953	00	\$30.41	
Q9954	00	\$8.98	
Q9956	00	\$40.42	
Q9957	00	\$61.89	
Q9960	00	M	
Q9961	00	M	
Q9962	00	M	
Q9963	00	M	
Q9964	00	M	
Q9965	00	\$0.29	
Q9966	00	\$0.32	
Q9967	00	\$0.36	
S0023	00	\$2.85	
S0080	00	\$43.82	
S0191	00	\$1.77	
S0199	00	\$288.03	
S4993	00	\$2.31	
S9211	00	\$5.50	
S9560	00	\$75.00	
T1023	00	\$10.00	
T2010	00	\$75.00	
V2500	00	\$13.00	
V2501	00	\$22.00	
V2510	00	\$30.00	
V2511	00	\$42.00	
V2520	00	\$17.00	
V2521	00	\$50.00	
V2599	00	M	
V2630	00	\$175.00	
V2632	00	\$175.00	
V5264	00	\$60.00	
V5265	00	\$60.00	
X0025	00	\$20.00	
X0096	00	\$12.00	
X0191	00	\$1.77	
X0199	00	\$288.03	
01967	00	\$461.00	
01968	00	\$195.00	
10021	00	\$99.58	\$50.40
10022	00	\$104.49	\$48.69
10040	00	\$67.91	\$59.57
10060	00	\$74.31	\$64.24
10061	00	\$127.70	\$114.76

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
10080	00	\$118.18	\$66.99
10081	00	\$181.67	\$115.22
10120	00	\$95.40	\$63.76
10121	00	\$181.82	\$130.33
10140	00	\$104.14	\$83.15
10160	00	\$85.57	\$67.17
10180	00	\$158.39	\$123.02
11000	00	\$36.58	\$23.35
11001	00	\$15.46	\$11.73
11004	00	\$415.30	
11005	00	\$548.32	
11006	00	\$512.83	
11008	00	\$196.65	
11010	00	\$323.59	\$198.19
11011	00	\$367.63	\$211.75
11012	00	\$512.76	\$308.83
11040	00	\$32.14	\$20.05
11041	00	\$38.14	\$25.77
11042	00	\$51.74	\$33.91
11043	00	\$188.95	\$164.79
11044	00	\$255.29	\$227.11
11055	00	\$32.38	\$16.85
11056	00	\$40.07	\$23.67
11057	00	\$48.47	\$30.92
11100	00	\$67.98	\$34.05
11101	00	\$22.43	\$17.25
11200	00	\$55.43	\$46.80
11201	00	\$13.19	\$12.04
11300	00	\$46.15	\$20.84
11301	00	\$62.21	\$35.46
11302	00	\$74.10	\$43.62
11303	00	\$87.86	\$51.34
11305	00	\$47.42	\$26.71
11306	00	\$65.01	\$40.27
11307	00	\$75.78	\$46.73
11308	00	\$86.85	\$56.94
11310	00	\$56.96	\$30.21
11311	00	\$71.23	\$43.91
11312	00	\$82.75	\$50.53
11313	00	\$104.61	\$67.80
11400	00	\$81.24	\$51.61
11401	00	\$97.50	\$67.88
11402	00	\$108.17	\$74.52
11403	00	\$124.46	\$94.55
11404	00	\$141.30	\$104.78
11406	00	\$197.08	\$155.95

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
11420	00	\$81.13	\$56.10
11421	00	\$103.92	\$75.15
11422	00	\$116.11	\$89.65
11423	00	\$135.58	\$104.51
11424	00	\$155.56	\$121.04
11426	00	\$221.58	\$183.33
11440	00	\$90.26	\$67.54
11441	00	\$111.85	\$87.68
11442	00	\$125.58	\$97.39
11443	00	\$151.29	\$120.51
11444	00	\$190.73	\$154.49
11446	00	\$256.53	\$217.99
11450	00	\$239.27	\$157.00
11451	00	\$316.27	\$208.13
11462	00	\$236.63	\$150.91
11463	00	\$321.86	\$210.55
11470	00	\$259.93	\$178.82
11471	00	\$333.51	\$226.51
11600	00	\$123.18	\$76.00
11601	00	\$146.85	\$97.67
11602	00	\$160.05	\$106.27
11603	00	\$182.59	\$126.22
11604	00	\$201.67	\$138.39
11606	00	\$282.42	\$205.33
11620	00	\$124.22	\$76.77
11621	00	\$148.03	\$98.85
11622	00	\$167.07	\$113.57
11623	00	\$196.01	\$139.64
11624	00	\$221.69	\$159.57
11626	00	\$272.67	\$202.49
11640	00	\$129.48	\$81.73
11641	00	\$157.74	\$107.12
11642	00	\$181.83	\$126.03
11643	00	\$214.69	\$157.16
11644	00	\$266.23	\$196.63
11646	00	\$350.82	\$278.06
11719	00	\$13.99	\$6.80
11720	00	\$21.00	\$12.36
11721	00	\$30.38	\$21.18
11730	00	\$66.84	\$43.25
11732	00	\$31.02	\$22.11
11740	00	\$30.36	\$22.31
11750	00	\$144.07	\$122.78
11752	00	\$204.09	\$185.40
11755	00	\$90.43	\$60.52
11760	00	\$134.48	\$94.21

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
11762	00	\$181.33	\$144.51
11765	00	\$85.36	\$46.54
11770	00	\$178.43	\$122.06
11771	00	\$355.08	\$279.14
11772	00	\$439.15	\$368.39
11900	00	\$37.42	\$21.60
11901	00	\$46.67	\$33.44
11920	00	\$135.49	\$79.98
11921	00	\$153.46	\$94.50
11960	00	\$629.52	
11970	00	\$412.29	
11971	00	\$332.38	\$207.27
11975	FP	\$86.42	\$56.80
11975	00	\$86.42	\$56.80
11976	FP	\$102.51	\$69.71
11976	00	\$102.51	\$69.71
11977	00	\$159.29	\$127.08
11980	00	\$74.39	\$57.99
11981	FP	\$94.96	\$61.31
11981	00	\$94.96	\$61.31
11982	FP	\$109.44	\$74.36
11982	00	\$109.44	\$74.36
11983	FP	\$166.92	\$136.15
11983	00	\$166.92	\$136.15
12001	00	\$103.81	\$71.88
12002	00	\$110.60	\$80.40
12004	00	\$129.75	\$94.37
12005	00	\$161.66	\$117.36
12006	00	\$201.23	\$148.60
12007	00	\$225.72	\$169.63
12011	00	\$110.46	\$74.51
12013	00	\$121.44	\$85.20
12014	00	\$142.71	\$102.15
12015	00	\$179.54	\$128.35
12016	00	\$212.60	\$156.21
12017	00	\$188.55	
12018	00	\$224.78	
12020	00	\$186.37	\$131.15
12021	00	\$108.60	\$95.07
12031	00	\$152.25	\$102.78
12032	00	\$202.49	\$130.87
12034	00	\$198.37	\$135.67
12035	00	\$253.14	\$163.41
12036	00	\$279.48	\$190.61
12037	00	\$314.34	\$221.15
12041	00	\$162.04	\$111.43

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
12042	00	\$191.60	\$131.49
12044	00	\$216.51	\$143.46
12045	00	\$256.29	\$170.58
12046	00	\$302.05	\$199.66
12047	00	\$323.56	\$221.46
12051	00	\$178.86	\$121.34
12052	00	\$197.49	\$138.82
12053	00	\$215.94	\$144.32
12054	00	\$231.33	\$154.82
12055	00	\$282.10	\$191.78
12056	00	\$347.23	\$236.79
12057	00	\$375.65	\$271.82
13100	00	\$214.04	\$160.83
13101	00	\$266.60	\$195.56
13102	00	\$72.84	\$52.42
13120	00	\$222.29	\$167.64
13121	00	\$292.43	\$218.80
13122	00	\$84.05	\$59.89
13131	00	\$245.54	\$190.60
13132	00	\$385.41	\$318.10
13133	00	\$115.05	\$92.91
13150	00	\$250.09	\$190.84
13151	00	\$278.28	\$221.33
13152	00	\$379.15	\$298.33
13153	00	\$127.62	\$101.45
13160	00	\$558.15	
14000	00	\$441.75	\$365.82
14001	00	\$575.22	\$490.67
14020	00	\$492.55	\$417.48
14021	00	\$648.93	\$569.55
14040	00	\$519.22	\$450.19
14041	00	\$714.51	\$625.93
14060	00	\$530.45	\$474.94
14061	00	\$775.56	\$678.35
14300	00	\$743.79	\$656.93
14350	00	\$524.68	
15002	00	\$230.61	\$157.84
15003	00	\$49.74	\$31.34
15004	00	\$277.56	\$195.30
15005	00	\$83.71	\$63.29
15040	00	\$181.75	\$90.86
15050	00	\$368.03	\$304.47
15100	00	\$613.13	\$500.10
15101	00	\$140.67	\$80.56
15110	00	\$603.25	\$516.10
15111	00	\$86.68	\$75.75

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
15115	00	\$595.95	\$533.25
15116	00	\$114.77	\$103.26
15120	00	\$641.73	\$543.37
15121	00	\$194.17	\$125.14
15130	00	\$478.12	\$393.28
15131	00	\$69.77	\$61.14
15135	00	\$602.28	\$542.16
15136	00	\$67.05	\$61.87
15150	00	\$500.14	\$452.68
15151	00	\$91.39	\$81.90
15152	00	\$112.44	\$102.38
15155	00	\$519.77	\$488.12
15156	00	\$121.05	\$113.58
15157	00	\$134.53	\$123.89
15170	00	\$288.69	\$247.27
15171	00	\$64.45	\$61.58
15175	00	\$378.55	\$338.85
15176	00	\$103.75	\$98.57
15200	00	\$543.66	\$446.44
15201	00	\$105.51	\$55.18
15220	00	\$517.89	\$427.58
15221	00	\$97.85	\$50.97
15240	00	\$618.12	\$540.75
15241	00	\$127.15	\$80.27
15260	00	\$664.31	\$587.80
15261	00	\$147.19	\$102.32
15300	00	\$232.88	\$200.37
15301	00	\$43.25	\$40.38
15320	00	\$265.16	\$229.21
15321	00	\$64.88	\$60.85
15330	00	\$214.90	\$181.53
15331	00	\$43.54	\$40.95
15335	00	\$231.82	\$198.17
15336	00	\$63.40	\$58.51
15340	00	\$221.81	\$189.03
15341	00	\$32.71	\$19.77
15360	00	\$250.46	\$211.64
15361	00	\$49.71	\$45.40
15365	00	\$250.81	\$215.43
15366	00	\$62.77	\$58.46
15400	00	\$259.19	\$241.64
15401	00	\$71.73	\$41.24
15420	00	\$291.80	\$259.30
15421	00	\$80.70	\$60.85
15430	00	\$370.24	\$358.16
15431	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
15570	00	\$607.49	\$487.26
15572	00	\$573.22	\$484.63
15574	00	\$617.72	\$525.68
15576	00	\$551.59	\$464.74
15600	00	\$244.43	\$142.33
15610	00	\$221.64	\$167.29
15620	00	\$311.80	\$218.61
15630	00	\$318.93	\$237.54
15650	00	\$343.83	\$260.13
15731	00	\$757.02	\$683.38
15732	00	\$1,052.30	\$917.12
15734	00	\$1,074.16	\$936.39
15736	00	\$964.53	\$808.93
15738	00	\$1,025.23	\$883.72
15740	00	\$675.53	\$588.67
15750	00	\$635.01	
15756	00	\$1,659.48	
15757	00	\$1,660.84	
15758	00	\$1,653.74	
15760	00	\$578.16	\$489.85
15770	00	\$451.59	
15823	00	\$454.58	\$415.76
15830	00	\$797.59	
15840	00	\$705.32	
15841	00	\$1,168.14	
15842	00	\$1,842.07	
15845	00	\$660.49	
15847	00	M	
15851	00	\$68.54	\$32.88
15852	00	\$33.86	
15860	00	\$79.05	
15920	00	\$400.34	
15922	00	\$514.00	
15931	00	\$459.19	
15933	00	\$564.94	
15934	00	\$631.88	
15935	00	\$747.39	
15936	00	\$615.81	
15937	00	\$720.03	
15940	00	\$474.50	
15941	00	\$624.16	
15944	00	\$608.28	
15945	00	\$672.47	
15946	00	\$1,116.68	
15950	00	\$392.46	
15951	00	\$559.99	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
15952	00	\$582.23	
15953	00	\$649.14	
15956	00	\$789.26	
15958	00	\$805.19	
15999	00	M	
16000	00	\$48.75	\$33.21
16020	00	\$57.98	\$39.86
16025	00	\$102.72	\$80.86
16030	00	\$123.01	\$92.53
16035	00	\$151.66	
16036	00	\$60.14	
17000	00	\$52.22	\$36.41
17003	00	\$5.22	\$3.49
17004	00	\$120.83	\$95.22
17106	00	\$268.62	\$230.08
17107	00	\$471.15	\$416.79
17108	00	\$640.47	\$581.80
17110	00	\$68.43	\$42.27
17111	00	\$83.60	\$54.84
17250	00	\$51.41	\$25.23
17260	00	\$65.31	\$46.61
17261	00	\$93.22	\$61.58
17262	00	\$113.79	\$78.99
17263	00	\$125.44	\$87.18
17264	00	\$135.51	\$93.23
17266	00	\$154.03	\$108.02
17270	00	\$97.95	\$66.60
17271	00	\$107.20	\$74.99
17272	00	\$123.10	\$87.15
17273	00	\$137.24	\$98.12
17274	00	\$163.79	\$120.65
17276	00	\$191.36	\$145.35
17280	00	\$91.49	\$60.72
17281	00	\$116.61	\$84.69
17282	00	\$135.19	\$98.09
17283	00	\$164.05	\$123.21
17284	00	\$191.82	\$146.96
17286	00	\$245.25	\$199.53
17311	00	\$485.92	\$265.61
17312	00	\$293.00	\$141.43
17313	00	\$443.86	\$238.51
17314	00	\$270.87	\$130.80
17315	00	\$57.83	\$37.41
17340	00	\$32.46	\$32.74
17999	00	M	
19000	00	\$80.82	\$33.08

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
19001	00	\$19.56	\$16.40
19020	00	\$297.64	\$193.52
19030	00	\$124.06	\$59.35
19100	00	\$97.79	\$48.61
19101	00	\$223.13	\$148.63
19102	00	\$163.15	\$77.45
19103	00	\$418.61	\$142.78
19105	00	\$1,445.69	\$136.74
19110	00	\$300.69	\$215.85
19112	00	\$288.23	\$195.04
19120	00	\$312.53	\$266.51
19125	00	\$344.93	\$296.03
19126	00	\$112.64	
19260	00	\$830.75	
19271	00	\$1,137.02	
19272	00	\$1,255.67	
19290	00	\$119.31	\$49.13
19291	00	\$51.78	\$24.17
19295	00	\$71.75	
19296	00	\$3,148.74	\$146.29
19297	00	\$66.11	
19298	00	\$1,097.91	\$239.66
19300	00	\$374.32	\$260.14
19301	00	\$408.02	
19302	00	\$594.44	
19303	00	\$630.11	
19304	00	\$373.48	
19305	00	\$742.32	
19306	00	\$774.58	
19307	00	\$778.41	
19316	00	\$539.20	
19318	00	\$790.47	
19328	00	\$335.08	
19330	00	\$425.81	
19340	00	\$277.48	
19342	00	\$630.76	
19350	00	\$613.59	\$470.08
19355	00	\$502.03	\$382.96
19357	00	\$1,064.72	
19361	00	\$1,112.24	
19364	00	\$1,935.65	
19366	00	\$963.93	
19367	00	\$1,261.92	
19368	00	\$1,552.42	
19369	00	\$1,433.81	
19370	00	\$467.61	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
19371	00	\$538.50	
19380	00	\$527.14	
19499	00	M	
20000	00	\$142.29	\$110.37
20005	00	\$209.24	\$167.54
20100	00	\$422.90	
20101	00	\$276.78	\$141.88
20102	00	\$325.25	\$171.65
20103	00	\$395.58	\$248.61
20150	00	\$649.76	
20200	00	\$132.35	\$65.05
20205	00	\$181.65	\$103.42
20206	00	\$197.32	\$46.02
20220	00	\$141.30	\$57.89
20225	00	\$580.05	\$86.79
20240	00	\$163.24	
20245	00	\$441.64	
20250	00	\$261.53	
20251	00	\$290.67	
20500	00	\$88.56	\$71.31
20501	00	\$97.90	\$29.45
20520	00	\$134.97	\$101.90
20525	00	\$339.49	\$175.27
20526	00	\$53.89	\$41.52
20550	00	\$41.59	\$29.79
20551	00	\$41.17	\$31.10
20552	00	\$37.92	\$25.55
20553	00	\$42.65	\$28.55
20555	00	\$237.36	
20600	00	\$38.61	\$29.11
20605	00	\$41.83	\$30.04
20610	00	\$52.91	\$35.66
20612	00	\$41.30	\$30.95
20615	00	\$157.06	\$114.49
20650	00	\$136.79	\$110.63
20660	00	\$186.06	\$165.07
20661	00	\$317.76	
20662	00	\$332.46	
20663	00	\$310.11	
20664	00	\$514.74	
20665	00	\$90.59	\$73.33
20670	00	\$314.48	\$107.69
20680	00	\$417.45	\$285.72
20690	00	\$358.36	
20692	00	\$660.08	
20693	00	\$324.31	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
20694	00	\$307.03	\$236.57
20696	00	\$781.86	
20697	00	\$908.12	\$0.13
20802	00	\$1,734.53	
20805	00	\$2,257.76	
20808	00	\$2,904.13	
20816	00	\$1,733.80	
20822	00	\$1,514.82	
20824	00	\$1,714.87	
20827	00	\$1,553.35	
20838	00	\$1,736.36	
20900	00	\$429.03	\$327.21
20902	00	\$427.19	
20910	00	\$302.11	
20912	00	\$344.42	
20920	00	\$284.52	
20922	00	\$419.08	\$343.74
20924	00	\$355.61	
20926	00	\$305.09	
20930	00	\$100.00	
20931	00	\$79.62	
20936	00	\$221.26	
20937	00	\$122.14	
20938	00	\$132.47	
20950	00	\$197.52	\$65.22
20955	00	\$1,808.88	
20956	00	\$1,895.39	
20957	00	\$1,788.06	
20962	00	\$1,880.64	
20969	00	\$2,021.64	
20970	00	\$2,001.54	
20972	00	\$1,826.64	
20973	00	\$1,962.52	
20974	00	\$42.93	\$33.73
20975	00	\$125.51	
20979	00	\$39.22	\$26.56
20982	00	\$2,942.02	\$295.36
20985	00	\$105.26	
20999	00	M	
21010	00	\$514.36	
21015	00	\$300.78	
21025	00	\$686.19	\$589.84
21026	00	\$404.29	\$340.44
21030	00	\$336.97	\$282.32
21031	00	\$257.56	\$200.33
21032	00	\$262.68	\$197.67

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21034	00	\$936.38	\$834.57
21040	00	\$338.12	\$277.14
21044	00	\$621.44	
21045	00	\$864.27	
21046	00	\$754.84	
21047	00	\$927.27	
21048	00	\$769.73	
21049	00	\$894.06	
21050	00	\$598.63	
21060	00	\$553.08	
21070	00	\$448.99	
21073	00	\$257.67	\$165.92
21100	00	\$512.80	\$280.98
21110	00	\$498.39	\$433.38
21116	00	\$121.88	\$31.57
21159	00	\$1,954.31	
21172	00	\$1,233.83	
21175	00	\$1,457.15	
21179	00	\$1,036.93	
21180	00	\$1,171.98	
21188	00	\$1,166.62	
21193	00	\$878.49	
21195	00	\$955.15	
21206	00	\$789.14	
21208	00	\$1,127.14	\$581.82
21209	00	\$556.16	\$447.73
21210	00	\$1,321.92	\$583.03
21215	00	\$2,197.99	\$606.03
21230	00	\$545.40	
21235	00	\$501.22	\$395.37
21240	00	\$783.59	
21242	00	\$722.69	
21243	00	\$1,174.90	
21244	00	\$732.59	
21245	00	\$790.26	\$644.44
21246	00	\$614.93	
21248	00	\$729.95	\$617.21
21249	00	\$1,023.40	\$877.29
21256	00	\$818.54	
21260	00	\$882.84	
21261	00	\$1,558.41	
21263	00	\$1,377.08	
21267	00	\$1,114.42	
21268	00	\$1,282.97	
21270	00	\$634.03	\$495.11
21275	00	\$565.77	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21280	00	\$366.97	
21282	00	\$243.53	
21295	00	\$121.77	
21296	00	\$284.73	
21299	00	M	
21310	00	\$78.53	\$20.72
21310	54	\$62.83	\$16.58
21310	55	\$15.71	\$4.14
21315	00	\$180.95	\$104.73
21315	54	\$144.76	\$83.78
21315	55	\$36.19	\$20.95
21320	00	\$173.08	\$97.73
21320	54	\$138.47	\$78.18
21320	55	\$34.62	\$19.55
21325	00	\$343.01	
21325	54	\$274.41	
21325	55	\$68.60	
21330	00	\$416.80	
21335	00	\$521.31	
21335	54	\$417.05	
21335	55	\$104.26	
21336	00	\$455.14	
21336	54	\$364.11	
21336	55	\$91.03	
21337	00	\$272.15	\$198.23
21337	54	\$217.72	\$158.59
21337	55	\$54.43	\$39.65
21338	00	\$545.87	
21338	54	\$436.69	
21338	55	\$109.17	
21339	00	\$590.64	
21339	54	\$472.51	
21339	55	\$118.13	
21340	00	\$559.83	
21340	54	\$447.87	
21340	55	\$111.97	
21343	00	\$823.97	
21343	54	\$659.18	
21343	55	\$164.79	
21344	00	\$1,059.73	
21344	54	\$847.78	
21344	55	\$211.95	
21345	00	\$554.64	\$459.73
21345	54	\$443.71	\$367.79
21345	55	\$110.93	\$91.95
21346	00	\$665.49	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21346	54	\$532.39	
21346	55	\$133.10	
21347	00	\$797.97	
21347	54	\$638.38	
21347	55	\$159.59	
21348	00	\$840.50	
21348	54	\$672.40	
21348	55	\$168.10	
21355	00	\$300.69	\$223.04
21355	54	\$240.56	\$178.43
21355	55	\$60.14	\$44.61
21356	00	\$341.36	\$262.26
21356	54	\$273.09	\$209.81
21356	55	\$68.27	\$52.45
21360	00	\$370.99	
21360	54	\$296.79	
21360	55	\$74.20	
21365	00	\$774.93	
21365	54	\$619.95	
21365	55	\$154.99	
21366	00	\$867.00	
21366	54	\$693.60	
21366	55	\$173.40	
21385	00	\$501.19	
21385	54	\$400.96	
21385	55	\$100.24	
21386	00	\$467.54	
21386	54	\$374.04	
21386	55	\$93.51	
21387	00	\$532.40	
21387	54	\$425.92	
21387	55	\$106.48	
21390	00	\$537.06	
21390	54	\$429.65	
21390	55	\$107.41	
21395	00	\$680.90	
21395	54	\$544.72	
21395	55	\$136.18	
21400	00	\$119.14	\$97.85
21400	54	\$95.31	\$78.28
21400	55	\$23.83	\$19.57
21401	00	\$321.81	\$199.58
21401	54	\$257.45	\$159.66
21401	55	\$64.36	\$39.92
21406	00	\$379.43	
21406	54	\$303.54	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21406	55	\$75.89	
21407	00	\$447.48	
21407	54	\$357.98	
21407	55	\$89.50	
21408	00	\$611.23	
21408	54	\$488.99	
21408	55	\$122.25	
21421	00	\$486.73	\$425.17
21421	54	\$389.38	\$340.14
21421	55	\$97.35	\$85.03
21422	00	\$473.47	
21422	54	\$378.78	
21422	55	\$94.69	
21423	00	\$559.37	
21423	54	\$447.50	
21423	55	\$111.87	
21431	00	\$520.62	
21432	00	\$471.46	
21433	00	\$1,184.10	
21435	00	\$932.85	
21436	00	\$1,338.20	
21440	00	\$344.59	\$293.40
21440	54	\$275.67	\$234.72
21440	55	\$68.92	\$58.68
21445	00	\$497.57	\$422.78
21445	54	\$398.05	\$338.22
21445	55	\$99.51	\$84.56
21450	00	\$361.96	\$314.50
21450	54	\$289.56	\$251.60
21450	55	\$72.39	\$62.90
21451	00	\$483.56	\$422.30
21451	54	\$386.85	\$337.84
21451	55	\$96.71	\$84.46
21452	00	\$428.90	\$221.82
21452	54	\$343.12	\$177.46
21452	55	\$85.78	\$44.36
21453	00	\$557.89	\$512.44
21453	54	\$446.31	\$409.95
21453	55	\$111.58	\$102.49
21454	00	\$385.38	
21454	55	\$77.08	
21461	00	\$1,220.71	\$635.12
21461	54	\$976.57	\$508.10
21461	55	\$244.14	\$127.02
21462	00	\$1,336.10	\$696.15
21462	54	\$1,068.88	\$556.92

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21462	55	\$267.22	\$139.23
21465	00	\$640.80	
21465	54	\$512.64	
21465	55	\$128.16	
21470	00	\$831.20	
21470	54	\$664.96	
21470	55	\$166.24	
21480	00	\$65.54	\$23.25
21485	00	\$427.95	\$377.05
21490	00	\$640.55	
21495	00	\$462.54	
21495	54	\$370.03	
21495	55	\$92.51	
21499	00	M	
21501	00	\$301.50	\$220.39
21502	00	\$368.86	
21510	00	\$332.23	
21550	00	\$174.86	\$111.01
21555	00	\$293.79	\$226.49
21556	00	\$285.85	
21557	00	\$407.64	
21600	00	\$382.70	
21610	00	\$740.85	
21615	00	\$480.40	
21616	00	\$587.25	
21620	00	\$369.40	
21627	00	\$386.36	
21630	00	\$889.38	
21632	00	\$880.51	
21700	00	\$307.04	
21705	00	\$439.08	
21720	00	\$268.01	
21725	00	\$368.53	
21740	00	\$764.12	
21742	00	M	
21743	00	M	
21750	00	\$505.87	
21800	00	\$67.54	\$68.41
21800	54	\$54.04	\$54.73
21800	55	\$13.51	\$13.68
21805	00	\$177.28	
21810	00	\$356.08	
21820	00	\$91.56	
21820	54	\$73.25	
21820	55	\$18.31	
21825	00	\$399.85	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
21825	54	\$319.88	
21825	55	\$79.97	
21899	00	M	
21920	00	\$171.44	\$108.74
21925	00	\$287.26	\$230.89
21930	00	\$320.61	\$254.75
21935	00	\$811.06	
22010	00	\$625.30	
22015	00	\$620.98	
22100	00	\$559.16	
22101	00	\$560.35	
22102	00	\$562.25	
22103	00	\$101.98	
22110	00	\$688.84	
22112	00	\$687.84	
22114	00	\$688.74	
22116	00	\$101.56	
22206	00	\$1,635.40	
22207	00	\$1,615.73	
22208	00	\$407.16	
22210	00	\$1,211.99	
22212	00	\$1,006.52	
22214	00	\$1,016.53	
22216	00	\$265.62	
22220	00	\$1,095.28	
22222	00	\$1,009.11	
22224	00	\$1,089.58	
22226	00	\$264.47	
22305	00	\$127.89	\$117.25
22305	54	\$102.31	\$93.80
22305	55	\$25.58	\$23.45
22310	00	\$194.06	\$180.54
22310	54	\$155.25	\$144.43
22310	55	\$38.81	\$36.11
22315	00	\$585.69	\$516.67
22315	54	\$468.55	\$413.33
22315	55	\$117.14	\$103.33
22318	00	\$1,089.17	
22319	00	\$1,194.61	
22325	00	\$953.20	
22325	54	\$762.56	
22325	55	\$190.64	
22326	00	\$996.52	
22326	54	\$797.21	
22326	55	\$199.30	
22327	00	\$986.84	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
22327	54	\$789.47	
22327	55	\$197.37	
22328	00	\$199.92	
22328	54	\$159.94	
22328	55	\$39.98	
22505	00	\$86.93	
22520	00	\$1,799.21	\$420.66
22521	00	\$1,716.29	\$397.28
22522	00	\$177.93	
22523	00	\$434.56	
22524	00	\$416.58	
22525	00	\$193.94	
22526	00	\$1,530.67	\$245.60
22548	00	\$1,273.83	
22554	00	\$884.55	
22556	00	\$1,146.47	
22558	00	\$1,055.08	
22585	00	\$242.05	
22590	00	\$1,051.39	
22595	00	\$1,001.42	
22600	00	\$856.59	
22610	00	\$848.10	
22612	00	\$1,102.63	
22614	00	\$282.90	
22630	00	\$1,056.13	
22632	00	\$229.66	
22800	00	\$938.32	
22802	00	\$1,493.28	
22804	00	\$1,731.68	
22808	00	\$1,272.10	
22810	00	\$1,429.03	
22812	00	\$1,567.29	
22818	00	\$1,559.83	
22819	00	\$1,766.08	
22830	00	\$560.22	
22840	00	\$552.33	
22841	00	\$412.50	
22842	00	\$553.04	
22843	00	\$586.08	
22844	00	\$723.19	
22845	00	\$526.27	
22846	00	\$547.04	
22847	00	\$603.83	
22848	00	\$263.33	
22849	00	\$904.45	
22850	00	\$494.55	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
22851	00	\$293.49	
22852	00	\$473.72	
22855	00	\$762.57	
22856	00	\$1,174.13	
22857	00	\$1,232.30	
22899	00	M	
22900	00	\$280.43	
22999	00	M	
23000	00	\$369.02	\$250.24
23020	00	\$482.87	
23030	00	\$301.27	\$180.76
23031	00	\$290.67	\$154.92
23035	00	\$485.97	
23040	00	\$502.90	
23044	00	\$399.37	
23065	00	\$145.20	\$115.29
23066	00	\$349.14	\$236.39
23075	00	\$178.21	\$122.69
23076	00	\$390.37	
23077	00	\$825.86	
23100	00	\$338.65	
23101	00	\$313.58	
23105	00	\$444.53	
23106	00	\$333.77	
23107	00	\$462.99	
23120	00	\$391.91	
23125	00	\$490.48	
23130	00	\$422.45	
23140	00	\$357.63	
23145	00	\$481.73	
23146	00	\$429.81	
23150	00	\$454.78	
23155	00	\$550.22	
23156	00	\$470.13	
23170	00	\$373.38	
23172	00	\$386.01	
23174	00	\$524.47	
23180	00	\$490.59	
23182	00	\$472.37	
23184	00	\$530.12	
23190	00	\$388.01	
23195	00	\$522.21	
23200	00	\$611.04	
23210	00	\$639.77	
23220	00	\$753.41	
23221	00	\$880.70	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
23222	00	\$1,188.40	
23330	00	\$157.23	\$104.88
23331	00	\$410.19	
23332	00	\$620.44	
23350	00	\$118.11	\$38.73
23395	00	\$900.93	
23397	00	\$806.07	
23400	00	\$685.26	
23405	00	\$441.39	
23406	00	\$551.67	
23410	00	\$632.07	
23412	00	\$672.34	
23415	00	\$517.31	
23420	00	\$742.22	
23430	00	\$520.34	
23440	00	\$537.28	
23450	00	\$673.15	
23455	00	\$716.42	
23460	00	\$775.71	
23462	00	\$759.59	
23465	00	\$789.62	
23466	00	\$778.40	
23470	00	\$861.79	
23472	00	\$1,064.06	
23480	00	\$579.11	
23485	00	\$679.90	
23490	00	\$581.07	
23491	00	\$718.19	
23500	00	\$143.53	\$139.51
23500	54	\$114.82	\$111.61
23500	55	\$28.71	\$27.90
23505	00	\$234.49	\$220.68
23505	54	\$187.59	\$176.54
23505	55	\$46.90	\$44.14
23515	00	\$480.51	
23515	54	\$384.40	
23515	55	\$96.10	
23520	00	\$147.74	\$147.17
23525	00	\$234.59	\$218.48
23530	00	\$385.28	
23532	00	\$433.15	
23540	00	\$147.85	\$141.51
23545	00	\$212.28	\$193.29
23550	00	\$398.93	
23552	00	\$459.84	
23570	00	\$152.52	\$152.80

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
23570	54	\$122.02	\$122.24
23570	55	\$30.50	\$30.56
23575	00	\$260.33	\$244.81
23575	54	\$208.27	\$195.85
23575	55	\$52.07	\$48.96
23585	00	\$649.34	
23585	54	\$519.47	
23585	55	\$129.87	
23600	00	\$214.83	\$194.41
23600	54	\$171.86	\$155.53
23600	55	\$42.97	\$38.88
23605	00	\$316.34	\$289.87
23605	54	\$253.07	\$231.89
23605	55	\$63.27	\$57.97
23615	00	\$606.02	
23615	54	\$484.81	
23615	55	\$121.20	
23616	00	\$915.66	
23616	54	\$732.53	
23616	55	\$183.13	
23620	00	\$175.71	\$163.06
23620	54	\$140.57	\$130.45
23620	55	\$35.14	\$32.61
23625	00	\$256.12	\$239.16
23625	54	\$204.90	\$191.33
23625	55	\$51.22	\$47.83
23630	00	\$511.01	
23630	54	\$408.81	
23630	55	\$102.20	
23650	00	\$202.47	\$181.19
23650	54	\$161.98	\$144.95
23650	55	\$40.49	\$36.24
23655	00	\$259.70	
23660	00	\$403.69	
23665	00	\$283.84	\$266.58
23665	54	\$227.08	\$213.27
23665	55	\$56.77	\$53.32
23670	00	\$571.77	
23670	54	\$457.42	
23670	55	\$114.35	
23675	00	\$372.62	\$344.14
23675	54	\$298.09	\$275.31
23675	55	\$74.52	\$68.83
23680	00	\$624.46	
23680	54	\$499.57	
23680	55	\$124.89	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
23700	00	\$136.21	
23800	00	\$719.86	
23802	00	\$855.79	
23900	00	\$940.35	
23920	00	\$760.23	
23921	00	\$311.40	
23929	00	M	
23930	00	\$251.74	\$151.07
23931	00	\$202.44	\$110.98
23935	00	\$349.09	
24000	00	\$327.65	
24006	00	\$497.51	
24065	00	\$167.29	\$114.09
24066	00	\$406.44	\$274.71
24075	00	\$328.22	\$214.91
24076	00	\$327.59	
24077	00	\$569.61	
24100	00	\$275.76	
24101	00	\$346.00	
24102	00	\$429.80	
24105	00	\$232.56	
24110	00	\$404.44	
24115	00	\$470.22	
24116	00	\$609.55	
24120	00	\$363.38	
24125	00	\$414.88	
24126	00	\$442.63	
24130	00	\$352.25	
24134	00	\$532.94	
24136	00	\$438.91	
24138	00	\$458.07	
24140	00	\$511.18	
24145	00	\$430.61	
24147	00	\$447.92	
24149	00	\$802.02	
24150	00	\$682.97	
24151	00	\$792.87	
24152	00	\$508.22	
24153	00	\$490.50	
24155	00	\$590.46	
24160	00	\$422.62	
24164	00	\$345.85	
24200	00	\$141.48	\$95.75
24201	00	\$392.88	\$253.11
24220	00	\$128.46	\$50.80
24300	00	\$273.92	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
24301	00	\$527.04	
24305	00	\$404.85	
24310	00	\$331.10	
24320	00	\$535.26	
24330	00	\$502.74	
24331	00	\$553.88	
24332	00	\$417.88	
24340	00	\$428.50	
24341	00	\$500.61	
24342	00	\$551.53	
24343	00	\$490.19	
24344	00	\$762.19	
24345	00	\$487.74	
24346	00	\$760.35	
24357	00	\$309.46	
24358	00	\$363.36	
24359	00	\$446.68	
24360	00	\$629.45	
24361	00	\$709.50	
24362	00	\$689.50	
24363	00	\$1,045.90	
24365	00	\$447.98	
24366	00	\$480.34	
24400	00	\$576.15	
24410	00	\$737.06	
24420	00	\$685.82	
24430	00	\$727.11	
24435	00	\$743.37	
24470	00	\$460.43	
24495	00	\$467.63	
24498	00	\$613.87	
24500	00	\$233.19	\$207.30
24500	54	\$186.55	\$165.84
24500	55	\$46.64	\$41.46
24505	00	\$338.58	\$307.52
24505	54	\$270.86	\$246.01
24505	55	\$67.72	\$61.50
24515	00	\$615.09	
24515	54	\$492.07	
24515	55	\$123.02	
24516	00	\$608.19	
24516	54	\$486.55	
24516	55	\$121.64	
24530	00	\$251.01	\$223.68
24530	54	\$200.81	\$178.95
24530	55	\$50.20	\$44.74

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
24535	00	\$422.69	\$391.33
24535	54	\$338.15	\$313.06
24535	55	\$84.54	\$78.27
24538	00	\$521.83	
24538	54	\$417.47	
24538	55	\$104.37	
24545	00	\$631.15	
24545	54	\$504.92	
24545	55	\$126.23	
24546	00	\$745.45	
24546	54	\$596.36	
24546	55	\$149.09	
24560	00	\$210.49	\$182.01
24560	54	\$168.39	\$145.61
24560	55	\$42.10	\$36.40
24565	00	\$352.04	\$323.56
24565	54	\$281.63	\$258.85
24565	55	\$70.41	\$64.71
24566	00	\$482.03	
24566	54	\$385.62	
24566	55	\$96.41	
24575	00	\$514.55	
24575	54	\$411.64	
24575	55	\$102.91	
24576	00	\$221.01	\$195.70
24576	54	\$176.81	\$156.56
24576	55	\$44.20	\$39.14
24577	00	\$364.74	\$335.40
24577	54	\$291.80	\$268.32
24577	55	\$72.95	\$67.08
24579	00	\$582.89	
24579	54	\$466.31	
24579	55	\$116.58	
24582	00	\$547.19	
24582	54	\$437.75	
24582	55	\$109.44	
24586	00	\$771.57	
24586	54	\$617.26	
24586	55	\$154.31	
24587	00	\$767.12	
24587	54	\$613.70	
24587	55	\$153.42	
24600	00	\$252.69	\$224.78
24605	00	\$314.55	
24615	00	\$502.00	
24620	00	\$382.43	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
24620	54	\$305.94	
24620	55	\$76.49	
24635	00	\$570.55	
24635	54	\$456.44	
24635	55	\$114.11	
24640	00	\$84.44	\$59.13
24640	54	\$67.55	\$47.30
24640	55	\$16.89	\$11.83
24650	00	\$170.60	\$149.60
24650	54	\$136.48	\$119.68
24650	55	\$34.12	\$29.92
24655	00	\$295.92	\$268.02
24655	54	\$236.73	\$214.42
24655	55	\$59.18	\$53.60
24665	00	\$452.06	
24665	54	\$361.65	
24665	55	\$90.41	
24666	00	\$512.11	
24666	54	\$409.69	
24666	55	\$102.42	
24670	00	\$191.48	\$168.18
24670	54	\$153.18	\$134.55
24670	55	\$38.30	\$33.64
24675	00	\$309.47	\$283.01
24675	54	\$247.58	\$226.41
24675	55	\$61.89	\$56.60
24685	00	\$453.50	
24685	54	\$362.80	
24685	55	\$90.70	
24800	00	\$564.03	
24802	00	\$696.24	
24900	00	\$497.09	
24920	00	\$490.32	
24925	00	\$376.49	
24930	00	\$517.71	
24931	00	\$555.94	
24935	00	\$753.70	
24940	00	\$650.00	
24999	00	M	
25000	00	\$260.45	
25001	00	\$228.63	
25020	00	\$418.26	
25023	00	\$790.99	
25024	00	\$526.66	
25025	00	\$808.12	
25028	00	\$366.73	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
25031	00	\$290.37	
25035	00	\$505.38	
25040	00	\$406.90	
25065	00	\$167.34	\$114.42
25066	00	\$283.02	
25075	00	\$246.18	
25076	00	\$346.44	
25077	00	\$560.81	
25085	00	\$336.62	
25100	00	\$249.18	
25101	00	\$290.67	
25105	00	\$355.24	
25107	00	\$434.04	
25109	00	\$355.48	
25110	00	\$273.51	
25111	00	\$223.66	
25112	00	\$272.59	
25115	00	\$603.60	
25116	00	\$500.89	
25118	00	\$275.90	
25119	00	\$366.67	
25120	00	\$434.10	
25125	00	\$493.52	
25126	00	\$503.13	
25130	00	\$320.89	
25135	00	\$398.69	
25136	00	\$351.88	
25145	00	\$443.06	
25150	00	\$417.56	
25151	00	\$493.46	
25170	00	\$667.21	
25210	00	\$351.25	
25215	00	\$454.58	
25230	00	\$312.32	
25240	00	\$322.21	
25246	00	\$131.02	\$56.53
25248	00	\$337.04	
25250	00	\$364.61	
25251	00	\$500.86	
25259	00	\$273.51	
25260	00	\$521.53	
25263	00	\$516.83	
25265	00	\$608.23	
25270	00	\$427.99	
25272	00	\$477.65	
25274	00	\$554.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
25275	00	\$468.26	
25280	00	\$481.22	
25290	00	\$441.73	
25295	00	\$450.63	
25300	00	\$484.44	
25301	00	\$460.95	
25310	00	\$521.68	
25312	00	\$589.14	
25315	00	\$628.09	
25316	00	\$728.95	
25320	00	\$675.94	
25332	00	\$592.80	
25335	00	\$685.29	
25337	00	\$627.24	
25350	00	\$564.73	
25355	00	\$623.77	
25360	00	\$550.98	
25365	00	\$731.58	
25370	00	\$784.06	
25375	00	\$764.77	
25390	00	\$631.68	
25391	00	\$790.90	
25392	00	\$792.90	
25393	00	\$890.16	
25400	00	\$661.90	
25405	00	\$826.94	
25415	00	\$778.08	
25420	00	\$916.52	
25425	00	\$840.22	
25426	00	\$863.89	
25430	00	\$493.44	
25431	00	\$552.22	
25440	00	\$553.69	
25441	00	\$658.81	
25442	00	\$565.63	
25443	00	\$544.63	
25444	00	\$577.63	
25445	00	\$506.90	
25446	00	\$831.73	
25447	00	\$567.76	
25449	00	\$728.93	
25450	00	\$443.68	
25455	00	\$537.34	
25490	00	\$581.96	
25491	00	\$609.58	
25492	00	\$721.53	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
25500	00	\$174.32	\$155.62
25500	54	\$139.45	\$124.49
25500	55	\$34.86	\$31.12
25505	00	\$339.45	\$310.98
25515	00	\$465.15	
25515	54	\$372.12	
25515	55	\$93.03	
25520	00	\$373.88	\$354.31
25520	54	\$299.10	\$283.45
25520	55	\$74.78	\$70.86
25525	00	\$571.03	
25525	54	\$456.83	
25525	55	\$114.21	
25526	00	\$713.65	
25526	54	\$570.92	
25526	55	\$142.73	
25530	00	\$169.12	\$148.99
25530	54	\$135.29	\$119.19
25530	55	\$33.82	\$29.80
25535	00	\$325.58	\$304.86
25535	54	\$260.46	\$243.89
25535	55	\$65.12	\$60.97
25545	00	\$439.46	
25545	54	\$351.57	
25545	55	\$87.89	
25560	00	\$176.58	\$153.58
25560	54	\$141.27	\$122.86
25560	55	\$35.32	\$30.72
25565	00	\$354.82	\$322.32
25565	54	\$283.85	\$257.85
25565	55	\$70.96	\$64.46
25574	00	\$457.49	
25574	54	\$365.99	
25574	55	\$91.50	
25575	00	\$622.46	
25575	54	\$497.97	
25575	55	\$124.49	
25600	00	\$193.31	\$169.72
25600	54	\$154.65	\$135.78
25600	55	\$38.66	\$33.94
25605	00	\$413.83	\$388.80
25605	54	\$331.06	\$311.04
25605	55	\$82.77	\$77.76
25606	00	\$470.12	
25606	54	\$376.10	
25606	55	\$94.02	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
25607	00	\$488.54	
25607	54	\$390.83	
25607	55	\$97.71	
25608	00	\$554.74	
25608	54	\$443.80	
25608	55	\$110.95	
25609	00	\$707.26	
25609	54	\$565.81	
25609	55	\$141.45	
25622	00	\$198.61	\$173.87
25622	54	\$158.89	\$139.10
25622	55	\$39.72	\$34.77
25624	00	\$312.06	\$281.86
25624	54	\$249.65	\$225.49
25624	55	\$62.41	\$56.37
25628	00	\$497.17	
25628	54	\$397.74	
25628	55	\$99.43	
25630	00	\$203.05	\$178.03
25630	54	\$162.44	\$142.42
25630	55	\$40.61	\$35.61
25635	00	\$294.97	\$254.43
25635	54	\$235.98	\$203.54
25635	55	\$58.99	\$50.89
25645	00	\$397.49	
25645	54	\$317.99	
25645	55	\$79.50	
25650	00	\$211.34	\$189.18
25650	54	\$169.07	\$151.35
25650	55	\$42.27	\$37.84
25651	00	\$324.45	
25651	54	\$259.56	
25651	55	\$64.89	
25652	00	\$428.38	
25652	54	\$342.71	
25652	55	\$85.68	
25660	00	\$274.03	
25670	00	\$426.35	
25671	00	\$359.80	
25675	00	\$291.28	\$266.25
25676	00	\$441.18	
25680	00	\$312.72	
25680	54	\$250.18	
25680	55	\$62.54	
25685	00	\$509.62	
25685	54	\$407.70	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
25685	55	\$101.92	
25690	00	\$317.81	
25695	00	\$442.75	
25800	00	\$529.86	
25805	00	\$608.79	
25810	00	\$611.82	
25820	00	\$433.15	
25825	00	\$530.59	
25830	00	\$681.26	
25900	00	\$561.68	
25905	00	\$550.14	
25907	00	\$491.83	
25909	00	\$546.13	
25915	00	\$886.23	
25920	00	\$476.82	
25922	00	\$419.22	
25924	00	\$467.17	
25927	00	\$562.51	
25929	00	\$398.40	
25931	00	\$523.40	
25999	00	M	
26010	00	\$184.57	\$91.39
26011	00	\$283.65	\$128.34
26020	00	\$295.12	
26025	00	\$288.36	
26030	00	\$339.84	
26034	00	\$368.18	
26035	00	\$563.56	
26037	00	\$395.89	
26040	00	\$212.57	
26045	00	\$322.35	
26055	00	\$426.71	\$201.79
26060	00	\$180.64	
26070	00	\$203.67	
26075	00	\$217.85	
26080	00	\$263.68	
26100	00	\$223.99	
26105	00	\$227.35	
26110	00	\$217.69	
26115	00	\$448.15	\$247.67
26116	00	\$332.04	
26117	00	\$450.32	
26121	00	\$415.47	
26123	00	\$564.16	
26125	00	\$201.04	
26130	00	\$314.33	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
26135	00	\$383.70	
26140	00	\$349.27	
26145	00	\$354.38	
26160	00	\$412.15	\$220.03
26170	00	\$278.89	
26180	00	\$303.42	
26185	00	\$358.41	
26200	00	\$311.16	
26205	00	\$419.66	
26210	00	\$303.50	
26215	00	\$385.51	
26230	00	\$349.45	
26235	00	\$343.06	
26236	00	\$304.51	
26250	00	\$403.50	
26255	00	\$637.07	
26260	00	\$380.79	
26261	00	\$462.11	
26262	00	\$317.95	
26320	00	\$237.61	
26340	00	\$215.43	
26350	00	\$531.01	
26352	00	\$599.12	
26356	00	\$765.71	
26357	00	\$635.43	
26358	00	\$675.39	
26370	00	\$570.87	
26372	00	\$658.62	
26373	00	\$627.03	
26390	00	\$604.59	
26392	00	\$714.59	
26410	00	\$423.12	
26412	00	\$507.36	
26415	00	\$526.80	
26416	00	\$616.65	
26418	00	\$425.35	
26420	00	\$529.26	
26426	00	\$450.56	
26428	00	\$552.39	
26432	00	\$368.42	
26433	00	\$395.77	
26434	00	\$465.95	
26437	00	\$456.30	
26440	00	\$468.21	
26442	00	\$683.29	
26445	00	\$438.99	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
26449	00	\$580.59	
26450	00	\$292.54	
26455	00	\$290.30	
26460	00	\$282.19	
26471	00	\$448.72	
26474	00	\$435.02	
26476	00	\$421.20	
26477	00	\$425.71	
26478	00	\$459.24	
26479	00	\$453.31	
26480	00	\$559.47	
26483	00	\$622.44	
26485	00	\$600.31	
26489	00	\$620.63	
26490	00	\$567.49	
26492	00	\$628.98	
26494	00	\$577.21	
26496	00	\$619.78	
26497	00	\$622.92	
26498	00	\$824.91	
26499	00	\$587.93	
26500	00	\$457.68	
26502	00	\$510.70	
26508	00	\$464.38	
26510	00	\$438.02	
26516	00	\$513.50	
26517	00	\$595.10	
26518	00	\$597.43	
26520	00	\$489.27	
26525	00	\$491.81	
26530	00	\$370.47	
26531	00	\$432.10	
26535	00	\$271.62	
26536	00	\$466.01	
26540	00	\$482.97	
26541	00	\$585.68	
26542	00	\$497.27	
26545	00	\$507.33	
26546	00	\$696.60	
26548	00	\$555.61	
26550	00	\$1,101.93	
26551	00	\$2,179.08	
26553	00	\$2,102.59	
26554	00	\$2,779.59	
26555	00	\$973.62	
26556	00	\$2,166.26	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
26560	00	\$400.97	
26561	00	\$643.09	
26562	00	\$864.62	
26565	00	\$494.89	
26567	00	\$496.52	
26568	00	\$653.66	
26580	00	\$916.38	
26587	00	\$673.05	
26590	00	\$937.94	
26591	00	\$327.30	
26593	00	\$434.43	
26596	00	\$507.80	
26600	00	\$181.03	\$162.04
26600	54	\$144.82	\$129.64
26600	55	\$36.21	\$32.41
26605	00	\$213.01	\$191.73
26605	54	\$170.41	\$153.38
26605	55	\$42.60	\$38.35
26607	00	\$324.38	
26607	54	\$259.51	
26607	55	\$64.88	
26608	00	\$329.76	
26608	54	\$263.81	
26608	55	\$65.95	
26615	00	\$368.79	
26615	54	\$295.03	
26615	55	\$73.76	
26641	00	\$241.81	\$217.94
26645	00	\$275.64	\$251.76
26645	54	\$220.51	\$201.41
26645	55	\$55.13	\$50.35
26650	00	\$325.28	
26650	54	\$260.23	
26650	55	\$65.06	
26665	00	\$417.24	
26665	54	\$333.80	
26665	55	\$83.45	
26670	00	\$223.78	\$196.46
26675	00	\$297.49	\$272.19
26676	00	\$346.17	
26685	00	\$383.36	
26686	00	\$430.36	
26700	00	\$211.45	\$193.33
26705	00	\$273.74	\$248.72
26706	00	\$297.95	
26715	00	\$371.36	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
26720	00	\$128.28	\$113.90
26720	54	\$102.62	\$91.12
26720	55	\$25.66	\$22.78
26725	00	\$230.14	\$202.25
26725	54	\$184.11	\$161.80
26725	55	\$46.03	\$40.45
26727	00	\$324.84	
26727	54	\$259.88	
26727	55	\$64.97	
26735	00	\$385.08	
26735	54	\$308.06	
26735	55	\$77.02	
26740	00	\$148.42	\$138.07
26740	54	\$118.74	\$110.46
26740	55	\$29.68	\$27.61
26742	00	\$250.64	\$224.46
26742	54	\$200.51	\$179.57
26742	55	\$50.13	\$44.89
26746	00	\$465.66	
26746	54	\$372.53	
26746	55	\$93.13	
26750	00	\$120.05	\$113.43
26750	54	\$96.04	\$90.75
26750	55	\$24.01	\$22.69
26755	00	\$211.57	\$179.64
26755	54	\$169.26	\$143.71
26755	55	\$42.31	\$35.93
26756	00	\$287.36	
26756	54	\$229.88	
26756	55	\$57.47	
26765	00	\$311.20	
26765	54	\$248.96	
26765	55	\$62.24	
26770	00	\$181.45	\$161.31
26770	54	\$145.16	\$129.05
26770	55	\$36.29	\$32.26
26775	00	\$254.97	\$224.47
26775	54	\$203.97	\$179.58
26775	55	\$50.99	\$44.89
26776	00	\$305.71	
26776	54	\$244.57	
26776	55	\$61.14	
26785	00	\$338.60	
26785	54	\$270.88	
26785	55	\$67.72	
26820	00	\$571.71	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
26841	00	\$535.28	
26842	00	\$575.53	
26843	00	\$532.14	
26844	00	\$591.44	
26850	00	\$506.70	
26852	00	\$575.10	
26860	00	\$413.29	
26861	00	\$76.14	
26862	00	\$526.51	
26863	00	\$170.42	
26910	00	\$511.85	
26951	00	\$441.14	
26952	00	\$473.73	
26989	00	M	
26990	00	\$430.02	
26991	00	\$495.70	\$359.65
26992	00	\$675.87	
27000	00	\$313.33	
27001	00	\$378.01	
27003	00	\$407.59	
27005	00	\$509.31	
27006	00	\$516.20	
27025	00	\$622.43	
27027	00	\$624.14	
27030	00	\$665.89	
27033	00	\$688.70	
27035	00	\$798.32	
27036	00	\$702.25	
27040	00	\$235.00	\$140.67
27041	00	\$479.82	
27047	00	\$428.56	\$358.39
27048	00	\$328.85	
27049	00	\$694.44	
27050	00	\$245.85	
27052	00	\$385.12	
27054	00	\$474.59	
27057	00	\$696.38	
27060	00	\$299.21	
27062	00	\$312.66	
27065	00	\$345.01	
27066	00	\$563.99	
27067	00	\$715.86	
27070	00	\$592.58	
27071	00	\$638.73	
27075	00	\$1,619.96	
27076	00	\$1,126.01	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27077	00	\$1,893.29	
27078	00	\$709.04	
27079	00	\$698.61	
27080	00	\$339.51	
27086	00	\$174.65	\$103.90
27087	00	\$440.89	
27090	00	\$584.99	
27091	00	\$1,118.99	
27093	00	\$147.79	\$52.01
27095	00	\$179.85	\$58.77
27096	00	\$139.36	\$49.91
27097	00	\$462.63	
27098	00	\$443.53	
27100	00	\$571.83	
27105	00	\$595.94	
27110	00	\$663.36	
27111	00	\$624.62	
27120	00	\$905.22	
27122	00	\$778.97	
27125	00	\$788.38	
27130	00	\$1,016.32	
27132	00	\$1,190.47	
27134	00	\$1,382.19	
27137	00	\$1,053.78	
27138	00	\$1,096.28	
27140	00	\$633.80	
27146	00	\$895.33	
27147	00	\$1,027.50	
27151	00	\$1,025.77	
27156	00	\$1,218.13	
27158	00	\$954.53	
27161	00	\$862.37	
27165	00	\$958.82	
27170	00	\$832.54	
27175	00	\$451.45	
27176	00	\$637.02	
27177	00	\$779.52	
27178	00	\$623.65	
27179	00	\$687.03	
27181	00	\$758.13	
27185	00	\$508.23	
27187	00	\$702.31	
27193	00	\$321.19	\$322.92
27193	54	\$256.95	\$258.34
27193	55	\$64.24	\$64.58
27194	00	\$511.18	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27194	54	\$408.95	
27194	55	\$102.24	
27200	00	\$118.36	\$119.52
27200	54	\$94.69	\$95.61
27200	55	\$23.67	\$23.90
27202	00	\$531.48	
27202	54	\$425.18	
27202	55	\$106.30	
27215	00	\$516.91	
27215	54	\$413.53	
27215	55	\$103.38	
27216	00	\$747.82	
27216	54	\$598.25	
27216	55	\$149.56	
27217	00	\$715.07	
27217	54	\$572.05	
27217	55	\$143.01	
27218	00	\$963.21	
27218	54	\$770.57	
27218	55	\$192.64	
27220	00	\$361.58	\$358.70
27220	54	\$289.26	\$286.96
27220	55	\$72.32	\$71.74
27222	00	\$688.91	
27222	54	\$551.13	
27222	55	\$137.78	
27226	00	\$709.38	
27226	54	\$567.50	
27226	55	\$141.88	
27227	00	\$1,178.29	
27227	54	\$942.63	
27227	55	\$235.66	
27228	00	\$1,350.01	
27228	54	\$1,080.01	
27228	55	\$270.00	
27230	00	\$323.38	\$316.19
27230	54	\$258.71	\$252.95
27230	55	\$64.68	\$63.24
27232	00	\$544.36	
27232	54	\$435.49	
27232	55	\$108.87	
27235	00	\$641.89	
27235	54	\$513.51	
27235	55	\$128.38	
27236	00	\$832.26	
27236	54	\$665.80	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27236	55	\$166.45	
27238	00	\$311.81	
27238	54	\$249.45	
27238	55	\$62.36	
27240	00	\$668.08	
27240	54	\$534.46	
27240	55	\$133.62	
27244	00	\$819.11	
27244	54	\$655.29	
27244	55	\$163.82	
27245	00	\$1,002.16	
27245	54	\$801.73	
27245	55	\$200.43	
27246	00	\$264.76	
27246	54	\$211.81	
27246	55	\$52.95	
27248	00	\$534.01	
27248	54	\$427.21	
27248	55	\$106.80	
27250	00	\$339.70	
27250	54	\$271.76	
27250	55	\$67.94	
27252	00	\$530.10	
27252	54	\$424.08	
27252	55	\$106.02	
27253	00	\$667.41	
27253	54	\$533.93	
27253	55	\$133.48	
27254	00	\$896.67	
27254	54	\$717.33	
27254	55	\$179.33	
27256	00	\$212.65	\$176.12
27256	54	\$170.12	\$140.90
27256	55	\$42.53	\$35.22
27257	00	\$236.97	
27257	54	\$189.58	
27257	55	\$47.39	
27258	00	\$779.89	
27258	54	\$623.91	
27258	55	\$155.98	
27259	00	\$1,085.69	
27259	54	\$868.55	
27259	55	\$217.14	
27265	00	\$278.38	
27265	54	\$222.71	
27265	55	\$55.68	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27266	00	\$403.72	
27266	54	\$322.98	
27266	55	\$80.74	
27267	00	\$290.07	
27268	00	\$356.94	
27269	00	\$851.75	
27275	00	\$126.78	
27280	00	\$717.65	
27282	00	\$581.73	
27284	00	\$1,139.48	
27286	00	\$1,153.99	
27290	00	\$1,109.28	
27295	00	\$890.65	
27299	00	M	
27301	00	\$464.55	\$342.32
27303	00	\$445.69	
27305	00	\$326.75	
27306	00	\$269.06	
27307	00	\$327.69	
27310	00	\$506.33	
27323	00	\$179.17	\$123.09
27324	00	\$264.54	
27325	00	\$357.13	
27326	00	\$342.29	
27327	00	\$309.02	\$240.85
27328	00	\$290.95	
27329	00	\$722.17	
27330	00	\$280.01	
27331	00	\$329.02	
27332	00	\$444.31	
27333	00	\$403.80	
27334	00	\$474.80	
27335	00	\$536.21	
27340	00	\$252.29	
27345	00	\$333.23	
27347	00	\$351.90	
27350	00	\$453.54	
27355	00	\$420.87	
27356	00	\$514.02	
27357	00	\$569.17	
27358	00	\$206.77	
27360	00	\$597.55	
27365	00	\$860.34	
27370	00	\$124.90	\$38.04
27372	00	\$419.53	\$280.90
27380	00	\$415.06	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27381	00	\$563.37	
27385	00	\$443.85	
27386	00	\$585.31	
27390	00	\$303.29	
27391	00	\$398.66	
27392	00	\$493.80	
27393	00	\$352.99	
27394	00	\$456.46	
27395	00	\$616.61	
27396	00	\$429.04	
27397	00	\$625.61	
27400	00	\$474.82	
27403	00	\$448.95	
27405	00	\$472.18	
27407	00	\$543.59	
27409	00	\$674.35	
27416	00	\$666.73	
27418	00	\$585.02	
27420	00	\$524.65	
27422	00	\$522.94	
27424	00	\$523.59	
27425	00	\$308.04	
27427	00	\$502.85	
27428	00	\$770.64	
27429	00	\$862.35	
27430	00	\$518.91	
27435	00	\$554.66	
27437	00	\$461.74	
27438	00	\$588.27	
27440	00	\$520.29	
27441	00	\$549.54	
27442	00	\$611.37	
27443	00	\$574.74	
27445	00	\$890.63	
27446	00	\$791.30	
27447	00	\$1,090.71	
27448	00	\$578.41	
27450	00	\$719.28	
27454	00	\$910.26	
27455	00	\$664.79	
27457	00	\$684.74	
27465	00	\$847.75	
27466	00	\$834.49	
27468	00	\$940.97	
27470	00	\$831.14	
27472	00	\$899.82	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27475	00	\$459.72	
27477	00	\$511.94	
27479	00	\$670.55	
27485	00	\$470.31	
27486	00	\$995.81	
27487	00	\$1,256.13	
27488	00	\$842.63	
27495	00	\$800.55	
27496	00	\$352.83	
27497	00	\$382.11	
27498	00	\$417.34	
27499	00	\$466.03	
27500	00	\$353.99	\$326.38
27500	54	\$283.19	\$261.11
27500	55	\$70.80	\$65.28
27501	00	\$347.58	\$340.38
27501	54	\$278.06	\$272.31
27501	55	\$69.52	\$68.08
27502	00	\$556.04	
27502	54	\$444.83	
27502	55	\$111.21	
27503	00	\$561.12	
27503	54	\$448.90	
27503	55	\$112.22	
27506	00	\$935.08	
27506	54	\$748.06	
27506	55	\$187.02	
27507	00	\$696.34	
27507	54	\$557.07	
27507	55	\$139.27	
27508	00	\$358.97	\$335.68
27508	54	\$287.18	\$268.54
27508	55	\$71.79	\$67.14
27509	00	\$452.27	
27509	54	\$361.82	
27509	55	\$90.45	
27510	00	\$488.57	
27510	54	\$390.86	
27510	55	\$97.71	
27511	00	\$731.26	
27511	54	\$585.01	
27511	55	\$146.25	
27513	00	\$920.17	
27513	54	\$736.14	
27513	55	\$184.03	
27514	00	\$752.88	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27514	54	\$602.30	
27514	55	\$150.58	
27516	00	\$338.09	\$316.81
27516	54	\$270.47	\$253.45
27516	55	\$67.62	\$63.36
27517	00	\$468.95	
27517	54	\$375.16	
27517	55	\$93.79	
27519	00	\$676.30	
27519	54	\$541.04	
27519	55	\$135.26	
27520	00	\$213.07	\$188.91
27520	54	\$170.45	\$151.13
27520	55	\$42.61	\$37.78
27524	00	\$530.54	
27524	54	\$424.44	
27524	55	\$106.11	
27530	00	\$266.47	\$245.47
27530	54	\$213.18	\$196.38
27530	55	\$53.29	\$49.09
27532	00	\$423.92	\$399.76
27532	54	\$339.14	\$319.81
27532	55	\$84.78	\$79.95
27535	00	\$653.34	
27535	54	\$522.67	
27535	55	\$130.67	
27536	00	\$834.72	
27536	54	\$667.78	
27536	55	\$166.94	
27538	00	\$318.38	\$295.94
27538	54	\$254.70	\$236.75
27538	55	\$63.68	\$59.19
27540	00	\$587.95	
27540	54	\$470.36	
27540	55	\$117.59	
27550	00	\$336.23	\$310.34
27550	54	\$268.98	\$248.27
27550	55	\$67.25	\$62.07
27552	00	\$432.18	
27552	54	\$345.74	
27552	55	\$86.44	
27556	00	\$667.73	
27556	54	\$534.19	
27556	55	\$133.55	
27557	00	\$794.16	
27557	54	\$635.33	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27557	55	\$158.83	
27558	00	\$876.62	
27558	54	\$701.30	
27558	55	\$175.32	
27560	00	\$245.33	\$213.98
27560	54	\$196.26	\$171.19
27560	55	\$49.07	\$42.80
27562	00	\$312.51	
27562	54	\$250.01	
27562	55	\$62.50	
27566	00	\$630.86	
27566	54	\$504.69	
27566	55	\$126.17	
27570	00	\$102.49	
27580	00	\$1,022.05	
27590	00	\$582.22	
27591	00	\$646.53	
27592	00	\$492.31	
27594	00	\$357.86	
27596	00	\$519.20	
27598	00	\$524.38	
27599	00	M	
27600	00	\$298.44	
27601	00	\$307.71	
27602	00	\$367.37	
27603	00	\$363.26	\$270.07
27604	00	\$317.13	\$242.35
27605	00	\$271.38	\$145.12
27606	00	\$211.97	
27607	00	\$427.95	
27610	00	\$461.06	
27612	00	\$402.85	
27613	00	\$167.09	\$115.89
27614	00	\$385.61	\$291.84
27615	00	\$628.82	
27618	00	\$333.72	\$266.71
27619	00	\$536.06	\$416.98
27620	00	\$327.52	
27625	00	\$424.86	
27626	00	\$455.45	
27630	00	\$369.96	\$264.12
27635	00	\$418.50	
27637	00	\$527.39	
27638	00	\$551.46	
27640	00	\$621.95	
27641	00	\$501.32	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27645	00	\$747.96	
27646	00	\$668.19	
27647	00	\$589.28	
27648	00	\$120.30	\$38.04
27650	00	\$497.88	
27652	00	\$530.96	
27654	00	\$500.86	
27656	00	\$376.70	\$245.26
27658	00	\$273.65	
27659	00	\$360.03	
27664	00	\$262.37	
27665	00	\$299.50	
27675	00	\$368.78	
27676	00	\$440.26	
27680	00	\$309.03	
27681	00	\$369.30	
27685	00	\$429.42	\$342.57
27686	00	\$401.26	
27687	00	\$331.83	
27690	00	\$438.72	
27691	00	\$518.79	
27692	00	\$80.64	
27695	00	\$353.98	
27696	00	\$423.68	
27698	00	\$471.43	
27700	00	\$442.84	
27702	00	\$708.87	
27703	00	\$812.42	
27704	00	\$394.89	
27705	00	\$544.53	
27707	00	\$277.10	
27709	00	\$771.41	
27712	00	\$765.08	
27715	00	\$751.25	
27720	00	\$620.96	
27722	00	\$619.05	
27724	00	\$908.53	
27725	00	\$842.96	
27726	00	\$639.88	
27727	00	\$725.82	
27730	00	\$405.63	
27732	00	\$292.46	
27734	00	\$442.91	
27740	00	\$499.04	
27742	00	\$465.74	
27745	00	\$533.59	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27750	00	\$229.74	\$208.17
27750	54	\$183.79	\$166.54
27750	55	\$45.95	\$41.63
27752	00	\$368.08	\$341.91
27752	54	\$294.46	\$273.52
27752	55	\$73.62	\$68.38
27756	00	\$397.70	
27756	54	\$318.16	
27756	55	\$79.54	
27758	00	\$624.22	
27758	54	\$499.38	
27758	55	\$124.84	
27759	00	\$708.24	
27759	54	\$566.59	
27759	55	\$141.65	
27760	00	\$222.28	\$197.83
27760	54	\$177.82	\$158.26
27760	55	\$44.46	\$39.57
27762	00	\$331.37	\$304.33
27762	54	\$265.10	\$243.47
27762	55	\$66.27	\$60.87
27766	00	\$429.21	
27766	54	\$343.37	
27766	55	\$85.84	
27767	00	\$178.51	\$179.37
27768	00	\$274.98	
27769	00	\$476.08	
27780	00	\$197.88	\$176.01
27780	54	\$158.30	\$140.81
27780	55	\$39.58	\$35.20
27781	00	\$285.06	\$263.79
27781	54	\$228.05	\$211.03
27781	55	\$57.01	\$52.76
27784	00	\$475.74	
27784	54	\$380.59	
27784	55	\$95.15	
27786	00	\$210.56	\$185.25
27786	54	\$168.45	\$148.20
27786	55	\$42.11	\$37.05
27788	00	\$289.93	\$264.91
27788	54	\$231.94	\$211.93
27788	55	\$57.99	\$52.98
27792	00	\$484.84	
27792	54	\$387.87	
27792	55	\$96.97	
27808	00	\$220.34	\$194.46

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
27808	54	\$176.27	\$155.57
27808	55	\$44.07	\$38.89
27810	00	\$325.15	\$296.97
27810	54	\$260.12	\$237.57
27810	55	\$65.03	\$59.39
27814	00	\$546.69	
27814	54	\$437.35	
27814	55	\$109.34	
27816	00	\$209.75	\$186.17
27816	54	\$167.80	\$148.94
27816	55	\$41.95	\$37.23
27818	00	\$337.11	\$306.05
27818	54	\$269.69	\$244.84
27818	55	\$67.42	\$61.21
27822	00	\$607.49	
27822	54	\$485.99	
27822	55	\$121.50	
27823	00	\$689.49	
27823	54	\$551.59	
27823	55	\$137.90	
27824	00	\$207.24	\$197.47
27824	54	\$165.80	\$157.97
27824	55	\$41.45	\$39.49
27825	00	\$377.52	\$345.31
27825	54	\$302.02	\$276.25
27825	55	\$75.50	\$69.06
27826	00	\$572.43	
27826	54	\$457.95	
27826	55	\$114.49	
27827	00	\$772.89	
27827	54	\$618.31	
27827	55	\$154.58	
27828	00	\$917.47	
27828	54	\$733.98	
27828	55	\$183.49	
27829	00	\$454.02	
27829	54	\$363.22	
27829	55	\$90.80	
27830	00	\$237.61	\$222.36
27830	54	\$190.09	\$177.89
27830	55	\$47.52	\$44.47
27831	00	\$262.47	
27831	54	\$209.98	
27831	55	\$52.49	
27832	00	\$482.55	
27832	54	\$386.04	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
27832	55	\$96.51	
27840	00	\$243.69	
27840	54	\$194.95	
27840	55	\$48.74	
27842	00	\$335.09	
27842	54	\$268.07	
27842	55	\$67.02	
27846	00	\$520.55	
27846	54	\$416.44	
27846	55	\$104.11	
27848	00	\$596.75	
27848	54	\$477.40	
27848	55	\$119.35	
27860	00	\$124.67	
27870	00	\$742.16	
27871	00	\$489.81	
27880	00	\$651.00	
27881	00	\$635.38	
27882	00	\$453.73	
27884	00	\$415.92	
27886	00	\$471.89	
27888	00	\$502.83	
27889	00	\$492.91	
27892	00	\$388.99	
27893	00	\$386.27	
27894	00	\$589.45	
27899	00	M	
28001	00	\$182.20	\$133.02
28002	00	\$338.66	\$276.54
28003	00	\$468.67	\$407.69
28005	00	\$444.03	
28008	00	\$288.46	\$223.46
28010	00	\$161.42	\$153.95
28011	00	\$228.03	\$217.10
28020	00	\$344.71	\$263.31
28022	00	\$315.66	\$244.62
28024	00	\$301.92	\$233.76
28035	00	\$343.23	\$264.14
28043	00	\$230.59	\$191.76
28045	00	\$321.10	\$241.14
28046	00	\$590.61	\$491.38
28050	00	\$299.53	\$228.20
28052	00	\$280.40	\$209.65
28054	00	\$262.26	\$190.93
28055	00	\$286.66	
28060	00	\$339.05	\$265.13

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28062	00	\$402.54	\$309.06
28070	00	\$335.90	\$260.83
28072	00	\$327.99	\$253.21
28080	00	\$320.91	\$250.45
28086	00	\$374.19	\$268.35
28088	00	\$301.38	\$219.69
28090	00	\$305.02	\$229.09
28092	00	\$278.49	\$204.28
28100	00	\$403.14	\$297.01
28102	00	\$390.31	
28103	00	\$321.31	
28104	00	\$337.83	\$261.04
28106	00	\$341.28	
28107	00	\$372.73	\$281.27
28108	00	\$283.09	\$215.50
28110	00	\$298.24	\$213.97
28111	00	\$344.05	\$250.28
28112	00	\$323.06	\$234.19
28113	00	\$381.50	\$302.41
28114	00	\$705.73	\$585.79
28116	00	\$499.07	\$416.82
28118	00	\$384.69	\$301.00
28119	00	\$344.68	\$267.88
28120	00	\$390.46	\$289.79
28122	00	\$446.17	\$370.53
28124	00	\$314.70	\$247.97
28126	00	\$252.54	\$187.54
28130	00	\$464.06	
28140	00	\$426.60	\$338.02
28150	00	\$284.91	\$213.87
28153	00	\$262.17	\$191.13
28160	00	\$269.86	\$203.41
28171	00	\$448.71	
28173	00	\$504.62	\$411.15
28175	00	\$368.40	\$289.02
28190	00	\$165.02	\$99.15
28192	00	\$315.71	\$238.64
28193	00	\$358.99	\$281.63
28200	00	\$311.27	\$236.49
28202	00	\$423.69	\$329.35
28208	00	\$297.57	\$225.38
28210	00	\$390.28	\$305.72
28220	00	\$295.87	\$230.01
28222	00	\$344.01	\$276.13
28225	00	\$258.56	\$191.25
28226	00	\$304.64	\$237.33

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28230	00	\$285.28	\$222.00
28232	00	\$252.92	\$188.49
28234	00	\$260.11	\$194.81
28238	00	\$460.13	\$368.95
28240	00	\$289.46	\$224.16
28250	00	\$368.76	\$293.70
28260	00	\$455.55	\$381.06
28261	00	\$661.97	\$580.86
28262	00	\$932.43	\$811.05
28264	00	\$576.84	\$507.53
28270	00	\$313.61	\$247.18
28272	00	\$258.37	\$193.37
28280	00	\$351.94	\$272.56
28285	00	\$305.26	\$236.22
28286	00	\$300.29	\$228.39
28288	00	\$381.58	\$310.25
28289	00	\$492.55	\$401.66
28290	00	\$379.85	\$297.01
28292	00	\$514.11	\$426.11
28293	00	\$690.34	\$514.89
28294	00	\$500.72	\$394.02
28296	00	\$533.33	\$424.91
28297	00	\$559.23	\$446.77
28298	00	\$477.13	\$377.33
28299	00	\$617.01	\$508.86
28300	00	\$479.31	
28302	00	\$478.31	
28304	00	\$530.31	\$434.25
28305	00	\$496.45	
28306	00	\$397.03	\$293.48
28307	00	\$484.06	\$330.47
28308	00	\$356.79	\$268.20
28309	00	\$645.46	
28310	00	\$355.14	\$264.25
28312	00	\$322.34	\$236.63
28313	00	\$333.05	\$273.81
28315	00	\$313.14	\$240.95
28320	00	\$458.14	
28322	00	\$526.10	\$421.70
28340	00	\$418.66	\$329.21
28341	00	\$479.14	\$388.54
28344	00	\$303.25	\$222.72
28345	00	\$378.02	\$300.94
28400	00	\$167.72	\$153.06
28400	54	\$134.18	\$122.45
28400	55	\$33.54	\$30.61

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28405	00	\$273.44	\$259.64
28405	54	\$218.75	\$207.71
28405	55	\$54.69	\$51.93
28406	00	\$373.96	
28406	54	\$299.17	
28406	55	\$74.79	
28415	00	\$823.65	
28415	54	\$658.92	
28415	55	\$164.73	
28420	00	\$858.38	
28420	54	\$686.70	
28420	55	\$171.68	
28430	00	\$158.05	\$138.20
28430	54	\$126.44	\$110.56
28430	55	\$31.61	\$27.64
28435	00	\$217.63	\$205.26
28435	54	\$174.10	\$164.21
28435	55	\$43.53	\$41.05
28436	00	\$298.80	
28436	54	\$239.04	
28436	55	\$59.76	
28445	00	\$767.31	
28445	54	\$613.85	
28445	55	\$153.46	
28446	00	\$823.67	
28450	00	\$145.62	\$129.23
28450	54	\$116.50	\$103.39
28450	55	\$29.12	\$25.85
28455	00	\$197.46	\$188.25
28455	54	\$157.97	\$150.60
28455	55	\$39.49	\$37.65
28456	00	\$196.62	
28456	54	\$157.30	
28456	55	\$39.32	
28465	00	\$436.18	
28465	54	\$348.94	
28465	55	\$87.24	
28470	00	\$145.13	\$129.02
28470	54	\$116.10	\$103.21
28470	55	\$29.03	\$25.80
28475	00	\$182.59	\$171.95
28475	54	\$146.07	\$137.56
28475	55	\$36.52	\$34.39
28476	00	\$238.53	
28476	54	\$190.82	
28476	55	\$47.71	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28485	00	\$374.62	
28485	54	\$299.70	
28485	55	\$74.92	
28490	00	\$92.50	\$81.00
28490	54	\$74.00	\$64.80
28490	55	\$18.50	\$16.20
28495	00	\$115.15	\$105.08
28495	54	\$92.12	\$84.06
28495	55	\$23.03	\$21.02
28496	00	\$297.19	\$160.86
28496	54	\$237.75	\$128.69
28496	55	\$59.44	\$32.17
28505	00	\$450.69	\$337.95
28505	54	\$360.55	\$270.36
28505	55	\$90.14	\$67.59
28510	00	\$79.85	\$78.70
28510	54	\$63.88	\$62.96
28510	55	\$15.97	\$15.74
28515	00	\$103.88	\$98.13
28515	54	\$83.11	\$78.50
28515	55	\$20.78	\$19.63
28525	00	\$385.34	\$272.02
28525	54	\$308.27	\$217.61
28525	55	\$77.07	\$54.40
28530	00	\$76.26	\$72.24
28530	54	\$61.01	\$57.79
28530	55	\$15.25	\$14.45
28531	00	\$273.98	\$139.95
28531	54	\$219.19	\$111.96
28531	55	\$54.80	\$27.99
28540	00	\$136.86	\$130.54
28540	54	\$109.49	\$104.43
28540	55	\$27.37	\$26.11
28545	00	\$158.76	\$149.85
28546	00	\$314.82	\$214.73
28546	54	\$251.86	\$171.78
28546	55	\$62.96	\$42.95
28555	00	\$579.31	\$453.62
28555	54	\$463.44	\$362.89
28555	55	\$115.86	\$90.72
28570	00	\$121.81	\$112.03
28570	54	\$97.45	\$89.62
28570	55	\$24.36	\$22.41
28575	00	\$219.87	\$209.81
28576	00	\$254.07	
28576	54	\$203.26	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28576	55	\$50.81	
28585	00	\$596.25	\$508.81
28585	54	\$477.00	\$407.05
28585	55	\$119.25	\$101.76
28600	00	\$142.30	\$131.07
28600	54	\$113.84	\$104.86
28600	55	\$28.46	\$26.21
28605	00	\$184.67	\$175.75
28606	00	\$277.62	
28606	54	\$222.10	
28606	55	\$55.52	
28615	00	\$544.68	
28615	54	\$435.74	
28615	55	\$108.94	
28630	00	\$100.16	\$78.30
28630	54	\$80.13	\$62.64
28630	55	\$20.03	\$15.66
28635	00	\$119.69	\$98.99
28636	00	\$202.58	\$151.10
28636	54	\$162.07	\$120.88
28636	55	\$40.52	\$30.22
28645	00	\$403.95	\$326.29
28645	54	\$323.16	\$261.03
28645	55	\$80.79	\$65.26
28660	00	\$73.74	\$59.65
28660	54	\$58.99	\$47.72
28660	55	\$14.75	\$11.93
28665	00	\$105.06	\$97.87
28665	54	\$84.05	\$78.29
28665	55	\$21.01	\$19.57
28666	00	\$144.16	
28666	54	\$115.33	
28666	55	\$28.83	
28675	00	\$381.07	\$272.06
28675	54	\$304.85	\$217.65
28675	55	\$76.21	\$54.41
28705	00	\$940.34	
28715	00	\$696.93	
28725	00	\$578.73	
28730	00	\$600.28	
28735	00	\$574.19	
28737	00	\$510.05	
28740	00	\$584.86	\$451.41
28750	00	\$577.02	\$431.20
28755	00	\$335.82	\$245.78
28760	00	\$522.35	\$420.82

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
28800	00	\$414.44	
28805	00	\$535.22	
28810	00	\$317.92	
28820	00	\$364.62	\$251.58
28825	00	\$314.34	\$206.20
28899	00	M	
29000	00	\$169.19	\$117.42
29010	00	\$174.06	\$112.80
29015	00	\$166.19	\$117.00
29020	00	\$163.91	\$103.80
29025	00	\$176.63	\$125.44
29035	00	\$158.91	\$97.65
29040	00	\$149.74	\$108.03
29044	00	\$172.93	\$113.11
29046	00	\$184.45	\$130.96
29049	00	\$61.49	\$42.80
29055	00	\$137.64	\$93.06
29058	00	\$79.62	\$59.19
29065	00	\$64.02	\$47.63
29075	00	\$59.44	\$42.76
29085	00	\$63.03	\$45.49
29086	00	\$47.86	\$33.48
29105	00	\$59.60	\$41.19
29125	00	\$46.04	\$29.37
29126	00	\$54.62	\$36.20
29130	00	\$27.82	\$20.05
29131	00	\$34.74	\$22.66
29200	00	\$37.75	\$28.55
29220	00	\$38.30	\$29.38
29240	00	\$42.81	\$31.89
29260	00	\$36.45	\$26.09
29280	00	\$35.79	\$24.86
29305	00	\$157.14	\$109.68
29325	00	\$169.25	\$121.51
29345	00	\$92.02	\$71.32
29355	00	\$94.41	\$76.28
29358	00	\$102.32	\$72.41
29365	00	\$82.54	\$61.82
29405	00	\$60.98	\$45.74
29425	00	\$65.86	\$50.61
29435	00	\$80.24	\$60.97
29440	00	\$36.34	\$24.54
29445	00	\$102.15	\$80.30
29450	00	\$106.15	\$90.63
29505	00	\$53.09	\$33.52
29515	00	\$47.85	\$34.91

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
29520	00	\$37.33	\$27.84
29530	00	\$37.37	\$26.73
29540	00	\$29.01	\$24.12
29550	00	\$28.01	\$22.26
29580	00	\$35.85	\$26.07
29590	00	\$38.46	\$30.40
29700	00	\$43.53	\$24.54
29705	00	\$45.89	\$33.81
29710	00	\$81.55	\$58.54
29715	00	\$61.98	\$39.83
29720	00	\$54.16	\$31.44
29730	00	\$44.86	\$32.49
29740	00	\$65.43	\$47.88
29750	00	\$68.80	\$54.13
29799	00	M	
29800	00	\$369.74	
29804	00	\$455.35	
29805	00	\$330.20	
29806	00	\$749.48	
29807	00	\$730.69	
29819	00	\$412.49	
29820	00	\$380.81	
29821	00	\$416.09	
29822	00	\$404.83	
29823	00	\$442.06	
29824	00	\$469.73	
29825	00	\$412.20	
29826	00	\$472.97	
29827	00	\$770.71	
29828	00	\$630.55	
29830	00	\$318.20	
29834	00	\$346.48	
29835	00	\$355.21	
29836	00	\$408.09	
29837	00	\$371.78	
29838	00	\$416.80	
29840	00	\$311.85	
29843	00	\$333.25	
29844	00	\$348.51	
29845	00	\$400.32	
29846	00	\$366.69	
29847	00	\$380.42	
29848	00	\$343.58	
29850	00	\$387.38	
29851	00	\$659.06	
29851	54	\$527.24	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
29851	55	\$131.81	
29855	00	\$554.13	
29855	54	\$443.30	
29855	55	\$110.83	
29856	00	\$708.40	
29856	54	\$566.72	
29856	55	\$141.68	
29860	00	\$457.20	
29861	00	\$499.07	
29862	00	\$562.77	
29863	00	\$558.09	
29868	00	\$1,199.51	
29870	00	\$285.60	
29871	00	\$358.42	
29873	00	\$360.52	
29874	00	\$375.25	
29875	00	\$348.15	
29876	00	\$454.10	
29877	00	\$429.71	
29879	00	\$459.58	
29880	00	\$480.09	
29881	00	\$447.49	
29882	00	\$483.21	
29883	00	\$592.30	
29884	00	\$428.07	
29885	00	\$519.29	
29886	00	\$437.68	
29887	00	\$516.44	
29888	00	\$696.36	
29889	00	\$851.94	
29891	00	\$489.00	
29892	00	\$505.93	
29893	00	\$397.01	\$304.11
29894	00	\$366.47	
29895	00	\$356.97	
29897	00	\$373.28	
29898	00	\$417.71	
29899	00	\$744.70	
29900	00	\$325.68	
29901	00	\$359.23	
29902	00	\$374.59	
29904	00	\$425.71	
29905	00	\$458.84	
29906	00	\$483.24	
29907	00	\$589.87	
29999	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
30000	00	\$158.75	\$81.96
30020	00	\$149.55	\$83.68
30100	00	\$93.06	\$49.92
30110	00	\$150.94	\$91.69
30115	00	\$298.08	
30117	00	\$544.10	\$230.88
30118	00	\$542.23	
30124	00	\$196.94	
30125	00	\$437.92	
30130	00	\$261.75	
30140	00	\$293.83	
30140	52	\$146.92	
30150	00	\$566.75	
30160	00	\$564.76	
30200	00	\$75.22	\$43.29
30210	00	\$98.67	\$69.33
30220	00	\$190.10	\$88.00
30300	00	\$159.10	\$85.18
30310	00	\$144.38	
30320	00	\$326.52	
30400	00	\$735.13	
30410	00	\$890.34	
30420	00	\$973.36	
30430	00	\$655.62	
30435	00	\$867.38	
30450	00	\$1,130.38	
30460	00	\$553.12	
30462	00	\$1,102.99	
30465	00	\$689.37	
30520	00	\$410.74	
30540	00	\$485.60	
30545	00	\$677.66	
30560	00	\$182.15	\$97.31
30580	00	\$431.17	\$352.94
30600	00	\$399.09	\$312.81
30620	00	\$429.76	
30630	00	\$435.83	
30801	00	\$153.93	\$90.65
30802	00	\$197.81	\$130.22
30901	00	\$73.67	\$44.61
30903	00	\$131.53	\$58.47
30905	00	\$164.90	\$75.73
30906	00	\$189.41	\$99.96
30915	00	\$404.31	
30920	00	\$579.32	
30930	00	\$84.64	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
30930	54	\$67.71	
30930	55	\$16.93	
30999	00	M	
31000	00	\$121.30	\$73.56
31002	00	\$141.81	
31020	00	\$334.50	\$242.46
31030	00	\$490.88	\$364.32
31032	00	\$398.86	
31040	00	\$531.22	
31050	00	\$341.20	
31051	00	\$449.16	
31070	00	\$300.94	
31075	00	\$549.01	
31080	00	\$717.06	
31081	00	\$849.62	
31084	00	\$811.12	
31085	00	\$866.60	
31086	00	\$788.28	
31087	00	\$772.58	
31090	00	\$692.65	
31200	00	\$385.18	
31201	00	\$511.69	
31205	00	\$611.66	
31225	00	\$1,279.98	
31230	00	\$1,443.81	
31231	00	\$132.61	\$55.82
31233	00	\$187.19	\$101.49
31235	00	\$215.17	\$120.55
31237	00	\$232.81	\$134.73
31238	00	\$240.10	\$146.91
31239	00	\$475.75	
31240	00	\$119.93	
31254	00	\$205.60	
31255	00	\$303.32	
31256	00	\$148.96	
31267	00	\$240.00	
31276	00	\$382.27	
31287	00	\$174.80	
31288	00	\$202.62	
31290	00	\$843.28	
31291	00	\$887.26	
31292	00	\$729.48	
31293	00	\$795.02	
31294	00	\$914.00	
31299	00	M	
31300	00	\$883.46	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
31320	00	\$458.73	
31360	00	\$1,381.02	
31365	00	\$1,734.18	
31367	00	\$1,514.34	
31368	00	\$1,703.97	
31370	00	\$1,429.63	
31375	00	\$1,344.38	
31380	00	\$1,329.36	
31382	00	\$1,455.41	
31390	00	\$1,942.30	
31395	00	\$2,075.00	
31400	00	\$712.45	
31420	00	\$590.91	
31500	00	\$81.66	
31502	00	\$26.09	
31505	00	\$59.36	\$35.20
31510	00	\$149.97	\$88.70
31511	00	\$150.47	\$93.23
31512	00	\$149.50	\$95.43
31513	00	\$97.99	
31515	00	\$149.66	\$80.63
31520	00	\$114.34	
31525	00	\$179.13	\$118.44
31526	00	\$117.68	
31527	00	\$142.77	
31528	00	\$105.92	
31529	00	\$121.00	
31530	00	\$148.10	
31531	00	\$160.15	
31535	00	\$141.88	
31536	00	\$158.94	
31540	00	\$182.37	
31541	00	\$199.57	
31545	00	\$268.50	
31546	00	\$405.38	
31560	00	\$235.52	
31561	00	\$257.12	
31570	00	\$255.86	\$171.01
31571	00	\$188.21	
31575	00	\$84.01	\$56.10
31576	00	\$160.47	\$90.87
31577	00	\$175.22	\$111.38
31578	00	\$202.12	\$124.18
31579	00	\$161.56	\$103.75
31580	00	\$848.58	
31582	00	\$1,363.57	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
31584	00	\$1,077.16	
31584	54	\$861.73	
31584	55	\$215.43	
31587	00	\$696.48	
31588	00	\$801.81	
31595	00	\$546.24	
31599	00	M	
31600	00	\$291.35	
31601	00	\$189.97	
31603	00	\$164.35	
31605	00	\$134.56	
31610	00	\$502.34	
31611	00	\$376.17	
31612	00	\$58.01	\$35.29
31613	00	\$310.72	
31614	00	\$509.58	
31615	00	\$132.62	\$93.21
31620	00	\$208.50	\$53.47
31622	00	\$237.54	\$108.97
31623	00	\$261.32	\$110.90
31624	00	\$242.91	\$110.90
31625	00	\$259.60	\$129.02
31628	00	\$310.62	\$144.09
31629	00	\$495.24	\$154.12
31630	00	\$154.62	
31630	54	\$123.70	
31630	55	\$30.92	
31631	00	\$173.12	
31633	00	\$66.57	\$49.32
31635	00	\$269.33	\$143.35
31637	00	\$60.01	
31638	00	\$191.13	
31640	00	\$196.76	
31641	00	\$194.69	
31643	00	\$133.38	
31645	00	\$232.87	\$120.99
31646	00	\$212.11	\$105.11
31656	00	\$249.77	\$84.97
31715	00	\$40.92	
31717	00	\$264.47	\$83.27
31720	HA	\$44.53	
31720	00	\$39.31	
31725	00	\$71.31	
31730	00	\$484.91	\$108.12
31750	00	\$945.70	
31755	00	\$1,199.64	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
31760	00	\$992.26	
31766	00	\$1,314.86	
31770	00	\$969.58	
31775	00	\$1,037.30	
31780	00	\$862.70	
31781	00	\$1,041.29	
31785	00	\$793.46	
31786	00	\$1,084.52	
31800	00	\$496.64	
31805	00	\$593.61	
31820	00	\$299.67	\$233.52
31825	00	\$421.27	\$345.63
31830	00	\$302.10	\$242.27
31899	00	M	
32035	00	\$503.97	
32036	00	\$546.22	
32095	00	\$450.45	
32100	00	\$696.32	
32110	00	\$1,048.14	
32120	00	\$623.22	
32124	00	\$661.17	
32140	00	\$709.29	
32141	00	\$1,045.29	
32150	00	\$714.87	
32151	00	\$729.98	
32160	00	\$544.35	
32200	00	\$799.02	
32201	00	\$699.07	\$154.61
32215	00	\$575.91	
32220	00	\$1,149.58	
32225	00	\$713.44	
32310	00	\$659.73	
32320	00	\$1,148.39	
32400	00	\$112.48	\$67.03
32402	00	\$405.71	
32405	00	\$75.42	\$74.84
32420	00	\$83.16	
32421	00	\$123.09	\$58.09
32422	00	\$151.07	\$93.55
32440	00	\$1,157.38	
32442	00	\$2,121.26	
32445	00	\$2,371.64	
32480	00	\$1,091.13	
32482	00	\$1,162.86	
32484	00	\$1,054.79	
32486	00	\$1,653.72	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
32488	00	\$1,679.83	
32491	00	\$1,078.24	
32500	00	\$1,058.85	
32501	00	\$181.90	
32503	00	\$1,339.71	
32504	00	\$1,527.33	
32540	00	\$1,182.81	
32550	00	\$625.49	\$168.46
32551	00	\$131.88	
32560	00	\$230.48	\$83.22
32601	00	\$227.80	
32602	00	\$247.41	
32603	00	\$318.12	
32604	00	\$357.14	
32605	00	\$286.99	
32606	00	\$343.31	
32650	00	\$496.94	
32651	00	\$766.73	
32652	00	\$1,159.55	
32653	00	\$742.53	
32654	00	\$820.53	
32655	00	\$681.75	
32656	00	\$596.69	
32657	00	\$585.29	
32658	00	\$535.87	
32659	00	\$546.31	
32660	00	\$771.96	
32661	00	\$598.78	
32662	00	\$671.76	
32663	00	\$1,018.35	
32664	00	\$622.05	
32665	00	\$873.32	
32800	00	\$672.03	
32810	00	\$652.23	
32815	00	\$1,872.04	
32820	00	\$989.76	
32851	00	\$1,916.35	
32852	00	\$2,140.16	
32853	00	\$2,291.08	
32854	00	\$2,485.01	
32900	00	\$986.45	
32905	00	\$977.84	
32906	00	\$1,207.52	
32940	00	\$895.08	
32960	00	\$102.29	\$71.79
32997	00	\$267.45	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
32999	00	M	
33010	00	\$91.06	
33011	00	\$92.93	
33015	00	\$391.62	
33020	00	\$632.06	
33025	00	\$584.15	
33030	00	\$933.62	
33031	00	\$1,036.85	
33050	00	\$722.34	
33120	00	\$1,138.12	
33130	00	\$998.20	
33140	00	\$1,139.34	
33141	00	\$114.81	
33202	00	\$568.17	
33203	00	\$587.09	
33206	00	\$350.74	
33207	00	\$375.19	
33208	00	\$403.02	
33210	00	\$137.49	
33211	00	\$140.16	
33212	00	\$262.43	
33213	00	\$299.35	
33214	00	\$374.44	
33215	00	\$238.60	
33216	00	\$294.29	
33217	00	\$292.59	
33218	00	\$304.37	
33220	00	\$305.75	
33222	00	\$270.37	
33223	00	\$325.33	
33224	00	\$389.86	
33225	00	\$350.13	
33226	00	\$375.40	
33233	00	\$190.72	
33234	00	\$378.10	
33235	00	\$491.55	
33236	00	\$577.37	
33237	00	\$635.86	
33238	00	\$691.54	
33240	00	\$361.33	
33241	00	\$179.93	
33243	00	\$1,009.85	
33244	00	\$666.95	
33249	00	\$699.87	
33250	00	\$1,084.03	
33251	00	\$1,184.95	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
33254	00	\$989.87	
33255	00	\$1,194.13	
33256	00	\$1,423.02	
33257	00	\$440.50	
33258	00	\$496.83	
33259	00	\$646.41	
33261	00	\$1,194.88	
33265	00	\$989.87	
33266	00	\$1,352.74	
33282	00	\$254.31	
33284	00	\$186.84	
33300	00	\$1,649.63	
33305	00	\$2,720.99	
33310	00	\$862.34	
33315	00	\$1,083.13	
33320	00	\$781.22	
33321	00	\$883.54	
33322	00	\$1,009.28	
33330	00	\$1,031.04	
33332	00	\$1,016.89	
33335	00	\$1,380.82	
33400	00	\$1,655.51	
33401	00	\$1,077.46	
33403	00	\$1,148.71	
33404	00	\$1,320.17	
33405	00	\$1,712.10	
33406	00	\$2,092.92	
33410	00	\$1,842.58	
33411	00	\$2,391.24	
33412	00	\$1,845.18	
33413	00	\$2,408.50	
33414	00	\$1,576.64	
33415	00	\$1,465.12	
33416	00	\$1,472.14	
33417	00	\$1,240.72	
33420	00	\$1,021.74	
33422	00	\$1,246.43	
33425	00	\$1,899.36	
33426	00	\$1,755.98	
33427	00	\$1,844.98	
33430	00	\$2,013.51	
33460	00	\$1,677.23	
33463	00	\$2,125.76	
33464	00	\$1,731.37	
33465	00	\$1,924.20	
33468	00	\$1,394.51	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
33470	00	\$882.03	
33471	00	\$995.47	
33472	00	\$989.77	
33474	00	\$1,492.12	
33475	00	\$1,694.31	
33476	00	\$1,097.71	
33478	00	\$1,169.54	
33496	00	\$1,235.17	
33500	00	\$1,159.03	
33501	00	\$807.00	
33502	00	\$944.75	
33503	00	\$969.02	
33504	00	\$1,079.76	
33505	00	\$1,513.15	
33506	00	\$1,519.53	
33507	00	\$1,293.28	
33508	00	\$12.05	
33510	00	\$1,462.13	
33511	00	\$1,590.18	
33512	00	\$1,780.82	
33513	00	\$1,831.89	
33514	00	\$1,924.40	
33516	00	\$1,996.11	
33517	00	\$134.55	
33518	00	\$289.71	
33519	00	\$388.01	
33521	00	\$471.45	
33522	00	\$537.68	
33523	00	\$615.47	
33530	00	\$367.01	
33533	00	\$1,426.09	
33534	00	\$1,650.19	
33535	00	\$1,820.03	
33536	00	\$1,946.41	
33542	00	\$1,843.01	
33545	00	\$2,188.16	
33572	00	\$173.46	
33600	00	\$1,263.30	
33602	00	\$1,212.86	
33606	00	\$1,310.64	
33608	00	\$1,344.80	
33610	00	\$1,331.55	
33611	00	\$1,439.47	
33612	00	\$1,522.59	
33615	00	\$1,452.81	
33617	00	\$1,604.05	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
33619	00	\$2,013.46	
33641	00	\$1,168.79	
33645	00	\$1,161.87	
33647	00	\$1,252.73	
33660	00	\$1,318.56	
33665	00	\$1,407.18	
33670	00	\$1,506.99	
33675	00	\$1,529.98	
33676	00	\$1,573.30	
33677	00	\$1,635.14	
33681	00	\$1,362.03	
33684	00	\$1,398.55	
33688	00	\$1,357.67	
33690	00	\$865.80	
33692	00	\$1,427.12	
33694	00	\$1,419.39	
33697	00	\$1,568.25	
33702	00	\$1,144.97	
33710	00	\$1,275.01	
33720	00	\$1,146.02	
33722	00	\$1,187.77	
33724	00	\$1,128.06	
33726	00	\$1,491.24	
33730	00	\$1,469.89	
33732	00	\$1,235.20	
33735	00	\$934.21	
33736	00	\$1,066.03	
33737	00	\$961.14	
33750	00	\$919.54	
33755	00	\$914.40	
33762	00	\$945.29	
33764	00	\$948.17	
33766	00	\$998.66	
33767	00	\$1,050.36	
33768	00	\$305.82	
33770	00	\$1,558.39	
33771	00	\$1,585.32	
33774	00	\$1,339.18	
33775	00	\$1,352.45	
33776	00	\$1,415.58	
33777	00	\$1,397.41	
33778	00	\$1,741.30	
33779	00	\$1,655.06	
33780	00	\$1,747.99	
33781	00	\$1,647.46	
33786	00	\$1,695.46	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
33788	00	\$1,112.41	
33800	00	\$733.00	
33802	00	\$791.15	
33803	00	\$843.60	
33813	00	\$923.91	
33814	00	\$1,127.15	
33820	00	\$719.73	
33822	00	\$746.56	
33824	00	\$870.01	
33840	00	\$908.89	
33845	00	\$982.68	
33851	00	\$939.26	
33852	00	\$1,088.75	
33853	00	\$1,360.68	
33860	00	\$2,275.97	
33861	00	\$1,803.40	
33863	00	\$2,292.75	
33864	00	\$2,358.70	
33870	00	\$1,881.17	
33875	00	\$1,459.03	
33877	00	\$2,556.25	
33880	00	\$1,358.89	
33881	00	\$1,172.82	
33883	00	\$855.51	
33886	00	\$740.46	
33889	00	\$609.35	
33891	00	\$783.61	
33910	00	\$1,210.70	
33915	00	\$988.69	
33916	00	\$1,165.20	
33917	00	\$1,077.52	
33920	00	\$1,311.39	
33922	00	\$1,024.23	
33924	00	\$214.94	
33925	00	\$1,389.49	
33926	00	\$1,809.28	
33933	00	M	
33935	00	\$2,602.80	
33944	00	M	
33945	00	\$3,337.98	
33960	00	\$726.26	
33961	00	\$414.11	
33967	00	\$202.22	
33968	00	\$25.75	
33970	00	\$270.30	
33971	00	\$525.14	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
33973	00	\$396.03	
33974	00	\$668.56	
33975	00	\$812.78	
33976	00	\$909.59	
33977	00	\$897.62	
33978	00	\$997.23	
33979	00	\$1,792.94	
33980	00	\$2,637.21	
33999	00	M	
34001	00	\$713.80	
34051	00	\$724.74	
34101	00	\$463.27	
34111	00	\$462.84	
34151	00	\$1,065.75	
34201	00	\$737.46	
34203	00	\$738.55	
34401	00	\$1,072.27	
34421	00	\$560.38	
34451	00	\$1,151.40	
34471	00	\$796.83	
34490	00	\$464.67	
34501	00	\$717.49	
34502	00	\$1,160.81	
34510	00	\$832.66	
34520	00	\$790.01	
34530	00	\$745.08	
34800	00	\$873.63	
34802	00	\$957.67	
34803	00	\$986.25	
34804	00	\$955.83	
34806	00	\$76.57	
34808	00	\$158.81	
34812	00	\$261.87	
34813	00	\$183.06	
34820	00	\$376.19	
34825	00	\$537.90	
34826	00	\$157.95	
34830	00	\$1,395.32	
34831	00	\$1,462.62	
34832	00	\$1,511.26	
34833	00	\$471.22	
34834	00	\$214.58	
34900	00	\$695.38	
35001	00	\$868.94	
35002	00	\$910.89	
35005	00	\$813.92	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
35011	00	\$760.54	
35013	00	\$942.90	
35021	00	\$917.68	
35022	00	\$1,058.00	
35045	00	\$736.34	
35081	00	\$1,312.74	
35082	00	\$1,657.57	
35091	00	\$1,403.62	
35092	00	\$1,979.24	
35102	00	\$1,424.76	
35103	00	\$1,712.04	
35111	00	\$1,056.69	
35112	00	\$1,285.43	
35121	00	\$1,263.56	
35122	00	\$1,491.26	
35131	00	\$1,070.03	
35132	00	\$1,297.56	
35141	00	\$853.52	
35142	00	\$1,017.73	
35151	00	\$962.04	
35152	00	\$1,118.49	
35180	00	\$626.12	
35182	00	\$1,287.86	
35184	00	\$773.83	
35188	00	\$652.91	
35189	00	\$1,220.18	
35190	00	\$568.16	
35201	00	\$711.61	
35206	00	\$583.26	
35207	00	\$526.61	
35211	00	\$1,025.29	
35216	00	\$1,387.40	
35221	00	\$1,055.52	
35226	00	\$646.06	
35231	00	\$884.02	
35236	00	\$741.83	
35241	00	\$1,069.96	
35246	00	\$1,154.37	
35251	00	\$1,257.61	
35256	00	\$781.38	
35261	00	\$782.58	
35266	00	\$651.24	
35271	00	\$1,022.74	
35276	00	\$1,073.20	
35281	00	\$1,198.30	
35286	00	\$718.39	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
35301	00	\$803.48	
35302	00	\$837.73	
35303	00	\$920.63	
35304	00	\$957.98	
35305	00	\$920.63	
35306	00	\$344.20	
35311	00	\$1,156.44	
35321	00	\$684.45	
35331	00	\$1,117.33	
35341	00	\$1,060.59	
35351	00	\$983.67	
35355	00	\$800.60	
35361	00	\$1,209.82	
35363	00	\$1,296.75	
35371	00	\$634.17	
35372	00	\$760.17	
35390	00	\$123.08	
35400	00	\$116.37	
35450	00	\$393.87	
35452	00	\$274.08	
35454	00	\$240.16	
35456	00	\$290.73	
35458	00	\$374.26	
35459	00	\$342.67	
35460	00	\$238.77	
35470	00	\$2,410.89	\$349.83
35471	00	\$2,684.77	\$416.33
35472	00	\$1,812.06	\$282.21
35473	00	\$1,707.39	\$247.44
35474	00	\$2,346.14	\$299.16
35475	00	\$1,782.82	\$375.22
35476	00	\$1,352.50	\$240.28
35480	00	\$444.89	
35481	00	\$307.34	
35482	00	\$264.89	
35483	00	\$323.37	
35484	00	\$406.70	
35485	00	\$377.19	
35490	00	\$463.17	
35491	00	\$326.58	
35492	00	\$288.96	
35493	00	\$346.86	
35494	00	\$439.91	
35495	00	\$403.48	
35500	00	\$245.87	
35501	00	\$1,152.49	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
35506	00	\$1,004.87	
35508	00	\$1,031.43	
35509	00	\$1,122.21	
35510	00	\$969.75	
35511	00	\$906.81	
35512	00	\$949.91	
35515	00	\$1,033.73	
35516	00	\$915.50	
35518	00	\$910.85	
35521	00	\$973.47	
35522	00	\$924.52	
35523	00	\$969.75	
35525	00	\$872.61	
35526	00	\$1,316.91	
35531	00	\$1,540.75	
35533	00	\$1,195.71	
35535	00	\$1,594.66	
35536	00	\$1,331.31	
35537	00	\$1,629.47	
35538	00	\$1,819.94	
35539	00	\$1,706.83	
35540	00	\$1,902.69	
35548	00	\$922.56	
35549	00	\$1,004.60	
35551	00	\$1,131.25	
35556	00	\$1,055.31	
35558	00	\$938.40	
35560	00	\$1,362.64	
35563	00	\$1,058.27	
35565	00	\$1,011.69	
35566	00	\$1,264.19	
35570	00	\$1,231.97	
35571	00	\$1,033.50	
35572	00	\$264.99	
35583	00	\$1,090.72	
35585	00	\$1,282.55	
35587	00	\$1,068.88	
35600	00	\$194.07	
35601	00	\$1,084.20	
35606	00	\$900.66	
35612	00	\$702.71	
35616	00	\$860.87	
35621	00	\$851.56	
35623	00	\$1,045.09	
35626	00	\$1,193.25	
35631	00	\$1,428.37	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Rate	Facility Rate
35632	00	\$1,513.81	
35633	00	\$1,634.75	
35634	00	\$1,481.50	
35636	00	\$1,262.05	
35637	00	\$1,293.03	
35638	00	\$1,313.47	
35642	00	\$775.78	
35645	00	\$783.87	
35646	00	\$1,323.29	
35647	00	\$1,195.93	
35650	00	\$821.96	
35651	00	\$1,056.07	
35654	00	\$1,058.06	
35656	00	\$833.99	
35661	00	\$835.89	
35663	00	\$969.19	
35665	00	\$908.15	
35666	00	\$980.59	
35671	00	\$863.20	
35681	00	\$61.70	
35682	00	\$274.93	
35683	00	\$324.06	
35685	00	\$154.71	
35686	00	\$128.81	
35691	00	\$757.11	
35693	00	\$669.19	
35694	00	\$791.26	
35695	00	\$818.76	
35697	00	\$115.24	
35700	00	\$118.17	
35701	00	\$407.57	
35721	00	\$348.48	
35741	00	\$379.97	
35761	00	\$281.44	
35800	00	\$361.58	
35820	00	\$1,352.26	
35840	00	\$469.30	
35860	00	\$306.51	
35870	00	\$981.91	
35875	00	\$454.92	
35876	00	\$725.31	
35879	00	\$713.80	
35881	00	\$793.52	
35883	00	\$937.13	
35884	00	\$994.95	
35901	00	\$385.12	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
35903	00	\$437.94	
35905	00	\$1,342.67	
35907	00	\$1,472.52	
36000	00	\$19.92	\$6.98
36002	00	\$130.96	\$83.79
36005	00	\$259.36	\$37.61
36010	00	\$508.60	\$93.85
36011	00	\$774.74	\$121.85
36012	00	\$665.94	\$137.31
36013	00	\$651.90	\$97.66
36014	00	\$649.93	\$118.41
36015	00	\$709.11	\$133.87
36100	00	\$423.93	\$121.93
36120	00	\$344.96	\$76.33
36140	00	\$393.26	\$78.04
36145	00	\$386.85	\$77.08
36160	00	\$434.59	\$101.82
36200	00	\$522.61	\$117.36
36215	00	\$897.57	\$185.43
36216	00	\$974.59	\$208.38
36217	00	\$1,641.05	\$249.26
36218	00	\$156.82	\$39.77
36245	00	\$1,011.71	\$190.28
36246	00	\$979.56	\$208.45
36247	00	\$1,545.96	\$248.23
36248	00	\$133.24	\$39.77
36260	00	\$430.85	
36261	00	\$262.42	
36262	00	\$199.94	
36299	00	M	
36400	00	\$19.01	\$13.55
36405	00	\$16.80	\$11.34
36406	00	\$12.73	\$6.69
36410	00	\$13.88	\$6.69
36415	FP	\$2.12	
36415	00	\$2.12	
36416	00	\$3.75	
36420	00	\$36.31	
36425	00	\$28.27	
36430	00	\$28.70	
36440	00	\$38.21	
36450	00	\$86.79	
36455	00	\$94.63	
36460	00	\$254.17	
36470	00	\$105.66	\$52.16
36471	00	\$128.76	\$72.95

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
36481	00	\$275.43	
36500	00	\$139.20	
36510	00	\$103.38	\$44.99
36511	00	\$68.71	
36512	00	\$69.28	
36513	00	\$69.63	
36514	00	\$445.20	\$67.85
36515	00	\$1,658.66	\$66.41
36516	00	\$1,958.02	\$47.67
36522	00	\$1,053.12	\$76.09
36555	00	\$214.45	\$96.82
36556	00	\$194.87	\$91.62
36557	00	\$673.02	\$222.62
36558	00	\$659.53	\$214.01
36560	00	\$917.60	\$266.72
36561	00	\$922.92	\$257.38
36563	00	\$903.53	\$266.46
36565	00	\$784.30	\$254.79
36566	00	\$2,167.72	\$273.18
36568	00	\$248.24	\$72.51
36569	00	\$223.71	\$71.56
36570	00	\$940.55	\$226.97
36571	00	\$988.55	\$231.54
36575	00	\$127.39	\$28.74
36576	00	\$278.01	\$142.25
36578	00	\$393.62	\$163.23
36580	00	\$196.08	\$51.41
36581	00	\$603.41	\$152.43
36582	00	\$833.62	\$225.89
36583	00	\$835.77	\$227.74
36584	00	\$193.77	\$53.13
36589	00	\$126.15	\$104.87
36590	00	\$199.95	\$147.03
36591	00	\$15.67	
36592	00	\$19.40	
36593	00	\$22.19	
36595	00	\$508.01	\$144.45
36596	00	\$111.80	\$35.30
36597	00	\$99.02	\$48.11
36598	00	\$91.35	\$63.45
36600	00	\$23.32	\$11.52
36620	00	\$38.72	
36625	00	\$77.94	
36640	00	\$89.89	
36660	00	\$53.30	
36680	00	\$46.59	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
36800	00	\$119.83	
36810	00	\$160.80	
36815	00	\$110.21	
36818	00	\$509.36	
36819	00	\$596.88	
36820	00	\$598.76	
36821	00	\$397.95	
36822	00	\$282.48	
36825	00	\$433.32	
36830	00	\$494.92	
36831	00	\$342.77	
36832	00	\$436.81	
36833	00	\$492.61	
36834	00	\$460.60	
36835	00	\$338.22	
36860	00	\$132.01	\$76.79
36861	00	\$113.46	
36870	00	\$1,499.52	\$234.57
37140	00	\$1,013.91	
37145	00	\$1,086.25	
37160	00	\$936.68	
37180	00	\$1,062.43	
37181	00	\$1,127.12	
37182	00	\$669.64	
37183	00	\$319.23	
37184	00	\$2,001.89	\$346.07
37185	00	\$660.43	\$127.48
37186	00	\$1,355.97	\$192.27
37187	00	\$1,937.13	\$321.29
37188	00	\$1,665.50	\$231.15
37195	00	\$266.25	
37200	00	\$177.34	
37201	00	\$215.03	
37202	00	\$257.13	
37203	00	\$1,051.85	\$204.53
37204	00	\$704.62	
37205	00	\$3,366.17	\$341.58
37206	00	\$2,031.49	\$163.41
37207	00	\$328.19	
37208	00	\$158.23	
37209	00	\$87.56	
37210	00	\$2,702.64	\$412.35
37215	00	\$839.92	
37216	00	\$754.63	
37250	00	\$83.85	
37251	00	\$62.61	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
37500	00	\$521.04	
37501	00	M	
37565	00	\$509.69	
37600	00	\$532.82	
37605	00	\$604.21	
37606	00	\$397.58	
37607	00	\$280.32	
37609	00	\$215.01	\$144.26
37615	00	\$344.55	
37616	00	\$793.51	
37617	00	\$953.11	
37618	00	\$276.96	
37620	00	\$496.40	
37650	00	\$378.82	
37660	00	\$898.27	
37700	00	\$187.46	
37718	00	\$308.98	
37722	00	\$355.75	
37735	00	\$471.00	
37760	00	\$461.49	
37765	00	\$339.03	
37766	00	\$412.47	
37780	00	\$191.52	
37785	00	\$261.84	\$192.52
37788	00	\$988.10	
37799	00	M	
38100	00	\$761.54	
38101	00	\$769.31	
38102	00	\$184.55	
38115	00	\$844.64	
38120	00	\$713.92	
38129	00	M	
38200	00	\$104.56	
38204	00	M	
38205	00	\$60.42	
38206	00	\$60.71	
38220	00	\$123.10	\$44.86
38221	00	\$136.28	\$57.19
38230	00	\$233.20	
38240	00	\$92.68	
38241	00	\$92.97	
38242	00	\$70.38	
38300	00	\$190.17	\$126.60
38305	00	\$320.59	
38308	00	\$305.75	
38380	00	\$399.15	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
38381	00	\$586.34	
38382	00	\$475.60	
38500	00	\$219.42	\$171.69
38505	00	\$93.02	\$55.05
38510	00	\$355.37	\$292.67
38520	00	\$319.17	
38525	00	\$286.73	
38530	00	\$370.05	
38542	00	\$300.54	
38550	00	\$326.74	
38555	00	\$687.75	
38562	00	\$489.74	
38564	00	\$486.05	
38570	00	\$391.51	
38571	00	\$608.23	
38572	00	\$687.82	
38589	00	M	
38700	00	\$550.47	
38720	00	\$909.04	
38724	00	\$983.96	
38740	00	\$458.41	
38745	00	\$583.67	
38746	00	\$190.60	
38747	00	\$188.39	
38760	00	\$576.17	
38765	00	\$893.49	
38770	00	\$591.70	
38780	00	\$752.51	
38790	00	\$59.77	
38792	00	\$28.74	
38794	00	\$226.48	
38999	00	M	
39000	00	\$351.30	
39010	00	\$592.28	
39200	00	\$648.26	
39220	00	\$831.15	
39400	00	\$365.60	
39499	00	M	
39501	00	\$591.62	
39502	00	\$708.04	
39503	00	\$4,082.26	
39520	00	\$711.67	
39530	00	\$677.14	
39531	00	\$715.71	
39540	00	\$604.30	
39541	00	\$649.31	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
39545	00	\$643.57	
39560	00	\$556.26	
39561	00	\$857.40	
39599	00	M	
40490	00	\$88.11	\$51.87
40500	00	\$340.44	\$252.71
40510	00	\$332.08	\$249.82
40520	00	\$348.81	\$253.89
40525	00	\$393.09	
40527	00	\$466.23	
40530	00	\$382.37	\$288.03
40650	00	\$292.83	\$201.94
40652	00	\$344.22	\$249.03
40654	00	\$399.50	\$297.68
40700	00	\$661.31	
40701	00	\$777.45	
40702	00	\$615.64	
40720	00	\$712.80	
40761	00	\$749.61	
40799	00	M	
40800	00	\$133.11	\$87.96
40801	00	\$204.43	\$152.95
40804	00	\$140.24	\$90.19
40805	00	\$219.40	\$159.86
40806	00	\$70.43	\$23.55
40808	00	\$118.87	\$73.43
40810	00	\$133.80	\$87.77
40812	00	\$188.11	\$136.63
40814	00	\$255.74	\$211.74
40816	00	\$268.98	\$221.52
40818	00	\$237.78	\$190.60
40819	00	\$202.69	\$162.14
40820	00	\$170.82	\$115.31
40830	00	\$164.36	\$111.73
40831	00	\$216.76	\$157.22
40840	00	\$553.79	\$449.37
40842	00	\$560.40	\$448.52
40843	00	\$709.06	\$568.99
40844	00	\$939.27	\$790.86
40845	00	\$1,041.90	\$902.98
40899	00	M	
41000	00	\$108.89	\$78.12
41005	00	\$147.91	\$88.08
41006	00	\$244.10	\$183.41
41007	00	\$243.47	\$175.30
41008	00	\$247.95	\$188.13

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
41009	00	\$263.96	\$205.29
41010	00	\$136.59	\$76.77
41015	00	\$287.01	\$235.53
41016	00	\$293.15	\$242.25
41017	00	\$295.75	\$243.97
41018	00	\$339.51	\$284.29
41019	00	\$351.12	
41100	00	\$114.37	\$78.14
41105	00	\$113.98	\$78.61
41108	00	\$97.56	\$63.34
41110	00	\$140.41	\$92.10
41112	00	\$221.87	\$174.70
41113	00	\$242.94	\$194.05
41114	00	\$450.60	
41115	00	\$159.56	\$103.47
41116	00	\$215.47	\$153.35
41120	00	\$744.53	
41130	00	\$911.06	
41135	00	\$1,514.25	
41140	00	\$1,565.02	
41145	00	\$1,947.21	
41150	00	\$1,544.95	
41153	00	\$1,668.91	
41155	00	\$2,052.57	
41250	00	\$151.70	\$96.77
41251	00	\$164.77	\$115.31
41252	00	\$209.96	\$151.00
41500	00	\$324.69	
41520	00	\$231.80	\$180.61
41530	00	\$2,143.89	\$289.77
41599	00	M	
41800	00	\$142.25	\$84.73
41805	00	\$143.15	\$108.64
41806	00	\$217.19	\$173.47
41825	00	\$137.29	\$93.57
41826	00	\$178.37	\$137.53
41827	00	\$284.47	\$210.85
41850	00	\$33.20	
41899	00	M	
42000	00	\$109.28	\$72.17
42100	00	\$101.87	\$76.84
42104	00	\$136.85	\$95.15
42106	00	\$173.61	\$128.17
42107	00	\$308.55	\$242.11
42120	00	\$682.47	
42140	00	\$167.49	\$108.81

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
42145	00	\$495.40	
42145	52	\$247.70	
42160	00	\$168.79	\$110.70
42180	00	\$166.44	\$130.77
42182	00	\$226.51	\$191.42
42200	00	\$637.56	
42205	00	\$654.20	
42210	00	\$761.38	
42215	00	\$504.95	
42220	00	\$410.39	
42225	00	\$705.38	
42226	00	\$684.87	
42227	00	\$674.61	
42235	00	\$552.14	
42260	00	\$587.98	\$489.62
42280	00	\$106.76	\$74.84
42281	00	\$138.69	\$108.49
42299	00	M	
42300	00	\$142.88	\$108.36
42305	00	\$307.84	
42310	00	\$111.78	\$88.20
42320	00	\$170.62	\$126.91
42330	00	\$159.58	\$116.73
42335	00	\$251.84	\$184.53
42340	00	\$319.96	\$243.16
42400	00	\$75.22	\$42.44
42405	00	\$211.31	\$162.99
42408	00	\$312.40	\$233.87
42409	00	\$225.41	\$160.12
42410	00	\$445.46	
42415	00	\$806.27	
42420	00	\$925.85	
42425	00	\$611.01	
42426	00	\$990.54	
42440	00	\$331.09	
42450	00	\$313.37	\$255.85
42500	00	\$297.38	\$243.31
42505	00	\$390.06	\$327.94
42507	00	\$365.16	
42508	00	\$509.80	
42509	00	\$615.62	
42510	00	\$452.79	
42550	00	\$115.22	\$48.49
42600	00	\$331.92	\$251.10
42650	00	\$56.92	\$42.24
42660	00	\$73.46	\$56.20

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
42665	00	\$207.39	\$147.28
42699	00	M	
42700	00	\$128.62	\$95.84
42720	00	\$320.66	\$283.84
42725	00	\$578.01	
42800	00	\$108.15	\$79.97
42802	00	\$173.42	\$99.21
42804	00	\$142.11	\$83.44
42806	00	\$160.46	\$97.75
42808	00	\$158.68	\$118.71
42809	00	\$119.22	\$91.61
42810	00	\$268.67	\$201.66
42815	00	\$394.29	
42820	00	\$209.85	
42821	00	\$219.72	
42825	00	\$188.03	
42826	00	\$181.52	
42830	00	\$147.84	
42831	00	\$159.46	
42835	00	\$129.36	
42836	00	\$174.83	
42842	00	\$679.29	
42844	00	\$966.57	
42845	00	\$1,575.97	
42860	00	\$133.34	
42870	00	\$407.62	
42890	00	\$970.10	
42892	00	\$1,266.47	
42894	00	\$1,627.42	
42900	00	\$250.00	
42950	00	\$569.54	
42953	00	\$722.26	
42955	00	\$532.50	
42960	00	\$121.68	
42961	00	\$302.05	
42962	00	\$373.41	
42970	00	\$279.01	
42971	00	\$329.43	
42972	00	\$374.26	
42999	00	M	
43020	00	\$384.80	
43030	00	\$376.43	
43045	00	\$933.84	
43100	00	\$445.99	
43101	00	\$726.15	
43107	00	\$1,805.40	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
43108	00	\$2,939.75	
43112	00	\$1,932.85	
43113	00	\$2,890.99	
43116	00	\$3,331.14	
43117	00	\$1,761.73	
43118	00	\$2,446.52	
43121	00	\$1,954.66	
43122	00	\$1,785.94	
43123	00	\$2,965.11	
43124	00	\$2,527.70	
43130	00	\$565.63	
43135	00	\$1,025.25	
43200	00	\$159.56	\$75.86
43201	00	\$208.41	\$93.95
43202	00	\$209.27	\$82.72
43204	00	\$160.52	
43205	00	\$161.76	
43215	00	\$111.86	
43216	00	\$129.71	\$103.54
43217	00	\$279.77	\$121.87
43219	00	\$123.93	
43220	00	\$91.65	
43226	00	\$101.81	
43227	00	\$151.14	
43228	00	\$159.90	
43231	00	\$136.97	
43232	00	\$190.99	
43234	00	\$207.30	\$85.93
43235	00	\$220.15	\$103.66
43236	00	\$273.70	\$126.15
43237	00	\$171.79	
43238	00	\$212.44	
43239	00	\$253.29	\$123.28
43240	00	\$285.24	
43241	00	\$111.69	
43242	00	\$305.11	
43243	00	\$192.84	
43244	00	\$213.43	
43245	00	\$135.04	
43246	00	\$180.76	
43247	00	\$144.39	
43248	00	\$135.98	
43249	00	\$125.07	
43250	00	\$135.69	
43251	00	\$156.74	
43255	00	\$203.88	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
43256	00	\$183.43	
43258	00	\$192.20	
43259	00	\$218.18	
43260	00	\$250.18	
43261	00	\$262.95	
43262	00	\$308.93	
43263	00	\$304.32	
43264	00	\$370.78	
43265	00	\$416.42	
43267	00	\$304.03	
43268	00	\$312.66	
43269	00	\$342.25	
43271	00	\$308.63	
43272	00	\$309.50	
43273	00	\$99.67	
43279	00	\$923.42	
43280	00	\$737.69	
43289	00	M	
43300	00	\$444.10	
43305	00	\$800.81	
43310	00	\$1,085.88	
43312	00	\$1,195.97	
43313	00	\$1,952.15	
43314	00	\$2,079.26	
43320	00	\$945.80	
43324	00	\$927.04	
43325	00	\$914.89	
43326	00	\$928.25	
43330	00	\$896.01	
43331	00	\$967.32	
43340	00	\$939.43	
43341	00	\$1,000.87	
43350	00	\$810.18	
43351	00	\$946.25	
43352	00	\$760.59	
43360	00	\$1,621.68	
43361	00	\$1,845.90	
43400	00	\$1,075.09	
43401	00	\$1,057.06	
43405	00	\$1,020.94	
43410	00	\$701.75	
43415	00	\$1,194.66	
43420	00	\$702.08	
43425	00	\$1,036.30	
43450	00	\$117.00	\$63.80
43453	00	\$222.05	\$69.04

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
43456	00	\$460.09	\$111.50
43458	00	\$284.56	\$130.68
43460	00	\$157.58	
43499	00	M	
43500	00	\$524.90	
43501	00	\$904.34	
43502	00	\$1,026.71	
43510	00	\$668.76	
43520	00	\$478.88	
43600	00	\$76.04	
43605	00	\$558.33	
43610	00	\$659.18	
43611	00	\$818.50	
43620	00	\$1,337.46	
43621	00	\$1,514.66	
43622	00	\$1,542.57	
43631	00	\$982.19	
43632	00	\$1,320.19	
43633	00	\$1,259.63	
43634	00	\$1,387.65	
43635	00	\$79.05	
43640	00	\$787.52	
43641	00	\$800.17	
43644	00	\$1,172.58	
43645	00	\$1,254.45	
43651	00	\$438.02	
43652	00	\$520.27	
43653	00	\$373.83	
43659	00	M	
43752	00	\$30.46	
43760	00	\$142.67	\$37.69
43761	00	\$90.00	\$77.92
43770	00	\$749.59	
43771	00	\$856.10	
43772	00	\$644.26	
43773	00	\$855.95	
43774	00	\$649.08	
43800	00	\$625.37	
43810	00	\$676.23	
43820	00	\$866.68	
43825	00	\$872.30	
43830	00	\$463.75	
43831	00	\$385.60	
43832	00	\$712.89	
43840	00	\$881.59	
43842	00	\$830.45	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
43846	00	\$1,097.66	
43847	00	\$1,203.67	
43848	00	\$1,301.82	
43850	00	\$1,094.87	
43855	00	\$1,139.12	
43860	00	\$1,106.24	
43865	00	\$1,152.76	
43870	00	\$472.92	
43880	00	\$1,081.53	
43886	00	\$225.93	
43887	00	\$209.83	
43888	00	\$299.75	
43999	00	M	
44005	00	\$737.91	
44010	00	\$579.37	
44015	00	\$101.01	
44020	00	\$651.14	
44021	00	\$656.43	
44025	00	\$662.01	
44050	00	\$629.33	
44055	00	\$1,005.66	
44100	00	\$82.19	
44110	00	\$568.33	
44111	00	\$663.65	
44120	00	\$818.71	
44121	00	\$170.80	
44125	00	\$797.12	
44126	00	\$1,644.96	
44127	00	\$1,911.31	
44128	00	\$172.64	
44130	00	\$848.68	
44135	00	M	
44139	00	\$85.43	
44140	00	\$909.43	
44141	00	\$1,186.91	
44143	00	\$1,120.80	
44144	00	\$1,167.44	
44145	00	\$1,137.25	
44146	00	\$1,412.71	
44147	00	\$1,259.69	
44150	00	\$1,239.84	
44151	00	\$1,418.08	
44155	00	\$1,392.86	
44156	00	\$1,525.95	
44157	00	\$1,544.04	
44158	00	\$1,583.71	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
44160	00	\$836.55	
44180	00	\$626.03	
44186	00	\$442.02	
44187	00	\$748.61	
44188	00	\$822.84	
44202	00	\$941.17	
44203	00	\$170.38	
44204	00	\$1,053.07	
44205	00	\$920.30	
44206	00	\$1,193.50	
44207	00	\$1,255.08	
44208	00	\$1,367.62	
44210	00	\$1,218.99	
44211	00	\$1,501.14	
44212	00	\$1,403.40	
44213	00	\$134.32	
44227	00	\$1,137.14	
44238	00	M	
44300	00	\$564.66	
44310	00	\$707.63	
44312	00	\$399.50	
44314	00	\$683.25	
44316	00	\$943.24	
44320	00	\$805.96	
44322	00	\$645.28	
44340	00	\$402.42	
44345	00	\$705.27	
44346	00	\$791.66	
44360	00	\$112.87	
44361	00	\$124.29	
44363	00	\$148.13	
44364	00	\$158.30	
44365	00	\$140.88	
44366	00	\$187.04	
44369	00	\$190.38	
44370	00	\$205.24	
44372	00	\$183.99	
44373	00	\$147.55	
44376	00	\$218.12	
44377	00	\$231.29	
44378	00	\$297.85	
44380	00	\$49.20	
44382	00	\$58.43	
44383	00	\$127.08	
44385	00	\$171.97	\$76.78
44386	00	\$253.76	\$89.82

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
44388	00	\$243.88	\$118.77
44389	00	\$289.50	\$132.75
44390	00	\$334.09	\$160.66
44391	00	\$380.36	\$182.20
44392	00	\$312.79	\$158.05
44393	00	\$356.42	\$199.10
44394	00	\$364.22	\$183.88
44397	00	\$194.60	
44500	00	\$19.04	
44602	00	\$924.15	
44603	00	\$1,055.42	
44604	00	\$717.02	
44605	00	\$886.59	
44615	00	\$727.06	
44620	00	\$580.42	
44625	00	\$688.70	
44626	00	\$1,096.38	
44640	00	\$955.34	
44650	00	\$991.89	
44660	00	\$960.06	
44661	00	\$1,078.31	
44680	00	\$719.54	
44700	00	\$699.05	
44701	00	\$118.45	
44715	00	M	
44720	00	\$188.56	
44721	00	\$270.13	
44799	00	M	
44800	00	\$512.32	
44820	00	\$564.19	
44850	00	\$501.45	
44899	00	M	
44900	00	\$507.85	
44901	00	\$784.21	\$131.03
44950	00	\$433.96	
44955	00	\$59.38	
44960	00	\$581.55	
44970	00	\$397.59	
44979	00	M	
45000	00	\$275.67	
45005	00	\$175.27	\$105.08
45020	00	\$357.18	
45100	00	\$192.02	
45108	00	\$234.48	
45110	00	\$1,254.96	
45111	00	\$735.14	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
45112	00	\$1,294.29	
45113	00	\$1,326.57	
45114	00	\$1,212.26	
45116	00	\$1,097.91	
45119	00	\$1,329.60	
45120	00	\$1,057.36	
45121	00	\$1,162.55	
45123	00	\$750.20	
45126	00	\$1,968.60	
45130	00	\$734.94	
45135	00	\$900.43	
45136	00	\$1,252.52	
45150	00	\$261.27	
45160	00	\$666.09	
45170	00	\$522.05	
45190	00	\$450.75	
45300	00	\$72.97	\$33.57
45303	00	\$598.29	\$56.99
45305	00	\$120.36	\$52.47
45307	00	\$139.77	\$66.43
45308	00	\$118.20	\$55.79
45309	00	\$136.34	\$66.74
45315	00	\$148.93	\$74.44
45317	00	\$141.72	\$78.73
45320	00	\$143.25	\$73.94
45321	00	\$71.43	
45327	00	\$81.45	
45330	00	\$97.29	\$44.37
45331	00	\$124.98	\$53.36
45332	00	\$204.25	\$78.57
45333	00	\$204.13	\$78.15
45334	00	\$117.99	
45335	00	\$165.84	\$65.46
45337	00	\$101.56	
45338	00	\$228.64	\$101.23
45339	00	\$224.40	\$134.37
45340	00	\$291.53	\$81.86
45341	00	\$112.32	
45342	00	\$171.43	
45345	00	\$123.55	
45355	00	\$146.23	
45378	00	\$288.31	\$155.43
45379	00	\$363.37	\$194.25
45380	00	\$344.58	\$186.68
45381	00	\$335.47	\$176.70
45382	00	\$457.36	\$238.49

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
45383	00	\$408.48	\$241.38
45384	00	\$338.54	\$195.01
45385	00	\$387.69	\$221.45
45386	00	\$490.17	\$190.76
45387	00	\$246.68	
45391	00	\$214.80	
45392	00	\$271.86	
45395	00	\$1,355.17	
45397	00	\$1,469.24	
45400	00	\$785.53	
45402	00	\$1,050.32	
45499	00	M	
45500	00	\$340.37	
45505	00	\$370.46	
45520	00	\$80.74	\$26.96
45540	00	\$714.18	
45541	00	\$615.64	
45550	00	\$991.28	
45560	00	\$489.07	
45562	00	\$743.67	
45563	00	\$1,086.24	
45800	00	\$831.77	
45805	00	\$959.94	
45820	00	\$831.64	
45825	00	\$984.55	
45900	00	\$132.95	
45905	00	\$112.30	
45910	00	\$133.68	
45915	00	\$215.47	\$152.19
45990	00	\$75.00	
45999	00	M	
46020	00	\$167.53	\$147.39
46030	00	\$83.34	\$58.60
46040	00	\$329.55	\$265.12
46045	00	\$268.73	
46050	00	\$118.65	\$62.28
46060	00	\$294.74	
46070	00	\$142.02	
46080	00	\$152.62	\$106.89
46083	00	\$112.17	\$69.03
46200	00	\$248.93	\$198.01
46210	00	\$238.25	\$166.05
46211	00	\$318.67	\$245.62
46220	00	\$123.24	\$76.08
46221	00	\$159.77	\$121.80
46230	00	\$171.57	\$114.63

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
46250	00	\$285.75	\$202.05
46255	00	\$320.47	\$230.15
46257	00	\$265.15	
46258	00	\$289.83	
46260	00	\$302.02	
46261	00	\$339.14	
46262	00	\$351.67	
46270	00	\$305.44	\$238.71
46275	00	\$318.60	\$256.47
46280	00	\$293.87	
46285	00	\$303.72	\$251.95
46288	00	\$346.75	
46320	00	\$113.44	\$72.89
46500	00	\$130.46	\$82.71
46505	00	\$181.05	\$151.14
46600	00	\$58.30	\$26.38
46604	00	\$342.21	\$46.82
46606	00	\$145.27	\$49.49
46608	00	\$155.95	\$56.15
46610	00	\$150.61	\$55.41
46611	00	\$123.28	\$58.28
46612	00	\$188.05	\$70.42
46614	00	\$92.08	\$50.38
46615	00	\$107.32	\$71.08
46700	00	\$419.72	
46705	00	\$329.80	
46706	00	\$110.96	
46710	00	\$717.70	
46712	00	\$1,490.01	
46715	00	\$329.98	
46716	00	\$756.67	
46730	00	\$1,235.63	
46735	00	\$1,458.12	
46740	00	\$1,383.98	
46742	00	\$1,608.00	
46744	00	\$2,297.27	
46746	00	\$2,576.93	
46748	00	\$2,685.43	
46750	00	\$508.76	
46751	00	\$421.50	
46753	00	\$382.18	
46754	00	\$187.63	\$139.59
46760	00	\$723.95	
46761	00	\$625.66	
46762	00	\$610.77	
46900	00	\$145.76	\$93.12

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Rate
46910	00	\$153.15	\$88.14
46916	00	\$154.09	\$97.15
46917	00	\$313.61	\$89.56
46922	00	\$162.75	\$88.54
46924	00	\$344.74	\$122.98
46930	00	\$146.59	\$109.79
46937	00	\$166.88	\$115.98
46938	00	\$278.54	\$235.10
46940	00	\$138.26	\$99.43
46942	00	\$127.17	\$88.91
46945	00	\$178.59	\$141.20
46946	00	\$197.09	\$149.34
46947	00	\$248.23	
46999	00	M	
47000	00	\$209.48	\$74.01
47001	00	\$73.16	
47010	00	\$807.52	
47011	00	\$143.15	
47015	00	\$767.40	
47100	00	\$558.08	
47120	00	\$1,575.90	
47122	00	\$2,346.55	
47125	00	\$2,104.65	
47130	00	\$2,262.80	
47135	00	\$3,332.07	
47136	00	\$2,837.91	
47140	00	\$2,369.00	
47141	00	\$2,828.96	
47142	00	\$3,118.46	
47143	00	\$375.00	
47144	00	M	
47145	00	M	
47146	00	\$231.48	
47147	00	\$269.84	
47300	00	\$749.38	
47350	00	\$918.18	
47360	00	\$1,251.79	
47361	00	\$2,073.27	
47362	00	\$952.01	
47370	00	\$843.93	
47371	00	\$847.76	
47379	00	M	
47380	00	\$984.74	
47381	00	\$1,006.60	
47382	00	\$617.48	
47399	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
47400	00	\$1,442.19	
47420	00	\$901.63	
47425	00	\$911.51	
47460	00	\$856.07	
47480	00	\$569.09	
47490	00	\$388.74	
47500	00	\$76.22	
47505	00	\$29.45	
47510	00	\$368.40	
47511	00	\$456.46	
47525	00	\$591.70	\$239.95
47530	00	\$1,099.03	\$275.86
47550	00	\$116.32	
47552	00	\$245.38	
47553	00	\$245.58	
47554	00	\$363.28	
47555	00	\$293.82	
47556	00	\$332.14	
47560	00	\$187.95	
47561	00	\$204.71	
47562	00	\$494.63	
47563	00	\$508.87	
47564	00	\$588.81	
47570	00	\$524.55	
47579	00	M	
47600	00	\$705.00	
47605	00	\$659.15	
47610	00	\$844.34	
47612	00	\$852.25	
47620	00	\$923.97	
47630	00	\$416.72	
47700	00	\$700.96	
47701	00	\$1,173.43	
47711	00	\$1,047.90	
47712	00	\$1,345.08	
47715	00	\$881.66	
47720	00	\$759.62	
47721	00	\$895.53	
47740	00	\$866.88	
47741	00	\$982.63	
47760	00	\$1,463.69	
47765	00	\$1,908.24	
47780	00	\$1,598.08	
47785	00	\$2,074.95	
47800	00	\$1,059.72	
47801	00	\$745.96	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
47802	00	\$1,015.30	
47900	00	\$918.85	
47999	00	M	
48000	00	\$1,264.43	
48001	00	\$1,560.32	
48020	00	\$776.97	
48100	00	\$592.60	
48102	00	\$388.07	\$191.06
48105	00	\$1,921.04	
48120	00	\$741.40	
48140	00	\$1,050.27	
48145	00	\$1,089.28	
48146	00	\$1,247.78	
48148	00	\$828.66	
48150	00	\$2,107.06	
48152	00	\$1,946.75	
48153	00	\$2,105.13	
48154	00	\$1,957.45	
48155	00	\$1,208.08	
48160	00	M	
48400	00	\$75.73	
48500	00	\$750.84	
48510	00	\$721.24	
48511	00	\$706.55	\$154.90
48520	00	\$730.93	
48540	00	\$879.35	
48545	00	\$890.18	
48547	00	\$1,196.47	
48548	00	\$1,119.62	
48551	00	M	
48552	00	\$162.78	
48554	00	\$1,657.17	
48999	00	M	
49000	00	\$522.75	
49002	00	\$676.51	
49010	00	\$644.30	
49020	00	\$1,072.23	
49021	00	\$683.28	\$131.05
49040	00	\$671.07	
49041	00	\$682.97	\$154.90
49060	00	\$753.39	
49061	00	\$673.52	\$143.44
49062	00	\$511.48	
49080	00	\$135.78	\$52.66
49081	00	\$116.10	\$49.65
49180	00	\$130.21	\$66.93

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
49203	00	\$813.99	
49204	00	\$1,038.48	
49205	00	\$1,188.30	
49215	00	\$1,503.87	
49220	00	\$655.78	
49250	00	\$389.55	
49255	00	\$530.40	
49320	00	\$225.05	
49321	00	\$236.09	
49322	00	\$258.26	
49323	00	\$433.41	
49324	00	\$266.58	
49325	00	\$285.85	
49326	00	\$130.87	
49329	00	M	
49400	00	\$134.78	\$72.95
49402	00	\$574.89	
49419	00	\$309.51	
49420	00	\$97.69	
49421	00	\$265.59	
49422	00	\$266.45	
49423	00	\$433.35	\$58.00
49424	00	\$119.76	\$30.60
49425	00	\$518.69	
49426	00	\$442.24	
49427	00	\$34.80	
49428	00	\$301.51	
49429	00	\$314.85	
49435	00	\$84.92	
49436	00	\$127.30	
49440	00	\$845.04	\$176.33
49441	00	\$1,004.83	\$196.05
49442	00	\$819.33	\$162.70
49446	00	\$836.98	\$128.58
49450	00	\$585.07	\$52.11
49451	00	\$620.19	\$71.70
49452	00	\$759.22	\$111.79
49460	00	\$620.06	\$36.78
49465	00	\$129.88	\$24.33
49491	00	\$507.60	
49492	00	\$633.19	
49495	00	\$269.85	
49496	00	\$402.34	
49500	00	\$268.89	
49501	00	\$397.99	
49505	00	\$345.36	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Rate
49507	00	\$425.83	
49520	00	\$422.93	
49521	00	\$516.27	
49525	00	\$382.23	
49540	00	\$452.73	
49550	00	\$384.85	
49553	00	\$420.76	
49555	00	\$400.02	
49557	00	\$485.88	
49560	00	\$498.06	
49561	00	\$626.72	
49565	00	\$514.57	
49566	00	\$633.19	
49568	00	\$187.82	
49570	00	\$272.34	
49572	00	\$335.91	
49580	00	\$210.69	
49582	00	\$313.39	
49585	00	\$292.05	
49587	00	\$346.78	
49590	00	\$381.01	
49600	00	\$494.62	
49605	00	\$3,378.87	
49606	00	\$773.77	
49610	00	\$470.20	
49611	00	\$431.93	
49650	00	\$284.02	
49651	00	\$367.54	
49652	00	\$558.99	
49653	00	\$698.83	
49654	00	\$642.89	
49655	00	\$773.77	
49656	00	\$645.09	
49657	00	\$931.77	
49659	00	M	
49900	00	\$547.18	
49904	00	\$1,049.92	
49905	00	\$251.52	
49999	00	M	
50010	00	\$526.09	
50020	00	\$755.31	
50021	00	\$712.90	\$131.05
50040	00	\$702.88	
50045	00	\$698.17	
50060	00	\$872.60	
50065	00	\$898.82	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
50070	00	\$911.60	
50075	00	\$1,118.90	
50080	00	\$667.20	
50081	00	\$978.82	
50100	00	\$720.52	
50120	00	\$725.05	
50125	00	\$756.76	
50130	00	\$789.88	
50135	00	\$859.38	
50200	00	\$112.02	
50205	00	\$511.91	
50220	00	\$781.16	
50225	00	\$907.90	
50230	00	\$978.52	
50234	00	\$994.94	
50236	00	\$1,124.49	
50240	00	\$1,007.92	
50250	00	\$937.28	
50280	00	\$719.85	
50290	00	\$673.81	
50320	00	\$989.38	
50323	00	\$285.00	
50325	00	\$337.50	
50327	00	\$151.58	
50328	00	\$133.07	
50329	00	\$128.75	
50340	00	\$618.30	
50360	00	\$1,681.81	
50365	00	\$1,887.19	
50370	00	\$783.69	
50380	00	\$1,275.26	
50382	00	\$1,058.48	\$215.75
50384	00	\$949.08	\$196.10
50385	00	\$1,009.96	\$187.66
50386	00	\$653.17	\$142.08
50387	00	\$501.41	\$78.04
50389	00	\$311.53	\$43.18
50390	00	\$76.22	
50391	00	\$99.78	\$76.48
50392	00	\$141.41	
50393	00	\$171.88	
50394	00	\$87.68	\$39.93
50395	00	\$141.83	
50396	00	\$91.66	
50398	00	\$447.43	\$58.00
50400	00	\$884.13	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
50405	00	\$1,062.76	
50500	00	\$866.05	
50520	00	\$787.32	
50525	00	\$1,005.77	
50526	00	\$1,021.58	
50540	00	\$880.79	
50541	00	\$705.59	
50542	00	\$893.05	
50543	00	\$1,139.20	
50544	00	\$963.66	
50545	00	\$1,031.95	
50546	00	\$914.74	
50547	00	\$1,115.42	
50548	00	\$1,040.92	
50549	00	M	
50551	00	\$288.43	\$229.19
50553	00	\$301.22	\$242.84
50555	00	\$332.02	\$266.73
50557	00	\$333.98	\$269.55
50561	00	\$377.35	\$307.74
50562	00	\$456.08	
50570	00	\$383.33	
50572	00	\$414.93	
50574	00	\$443.10	
50575	00	\$558.55	
50576	00	\$440.83	
50580	00	\$475.05	
50590	00	\$704.53	\$427.55
50593	00	\$3,560.36	\$362.91
50600	00	\$713.60	
50605	00	\$698.93	
50610	00	\$730.77	
50620	00	\$692.25	
50630	00	\$675.80	
50650	00	\$789.44	
50660	00	\$875.08	
50684	00	\$150.67	\$37.92
50686	00	\$126.56	\$67.60
50688	00	\$63.25	
50690	00	\$80.73	\$54.57
50700	00	\$711.45	
50715	00	\$854.20	
50722	00	\$743.68	
50725	00	\$827.74	
50727	00	\$381.97	
50728	00	\$528.39	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
50740	00	\$827.60	
50750	00	\$885.98	
50760	00	\$834.36	
50770	00	\$884.04	
50780	00	\$832.65	
50782	00	\$839.47	
50783	00	\$868.41	
50785	00	\$921.43	
50800	00	\$697.97	
50810	00	\$944.26	
50815	00	\$928.35	
50820	00	\$993.29	
50825	00	\$1,260.92	
50830	00	\$1,377.26	
50840	00	\$937.55	
50845	00	\$948.15	
50860	00	\$722.02	
50900	00	\$637.69	
50920	00	\$671.52	
50930	00	\$832.84	
50940	00	\$665.43	
50945	00	\$756.41	
50947	00	\$1,067.13	
50948	00	\$976.08	
50949	00	M	
50951	00	\$300.75	\$238.91
50953	00	\$315.70	\$261.63
50955	00	\$362.69	\$284.74
50957	00	\$340.35	\$276.79
50961	00	\$306.54	\$247.29
50970	00	\$289.83	
50972	00	\$279.80	
50974	00	\$365.66	
50976	00	\$362.67	
50980	00	\$278.10	
51020	00	\$352.22	
51030	00	\$351.42	
51040	00	\$221.81	
51045	00	\$353.79	
51050	00	\$357.10	
51060	00	\$442.05	
51065	00	\$437.58	
51080	00	\$308.99	
51100	00	\$49.21	\$30.51
51101	00	\$99.45	\$39.91
51102	00	\$260.65	\$192.19

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
51500	00	\$476.25	
51520	00	\$451.21	
51525	00	\$653.80	
51530	00	\$585.61	
51535	00	\$598.34	
51550	00	\$721.33	
51555	00	\$959.41	
51565	00	\$986.83	
51570	00	\$1,126.59	
51575	00	\$1,396.39	
51580	00	\$1,452.46	
51585	00	\$1,617.37	
51590	00	\$1,478.17	
51595	00	\$1,677.79	
51596	00	\$1,800.89	
51597	00	\$1,741.62	
51600	00	\$158.89	\$34.35
51605	00	\$29.67	
51610	00	\$90.77	\$49.06
51700	00	\$70.01	\$34.35
51701	00	\$52.29	\$20.94
51702	00	\$66.67	\$22.95
51703	00	\$114.51	\$62.16
51705	00	\$91.89	\$51.05
51710	00	\$130.85	\$71.59
51715	00	\$228.45	\$153.10
51720	00	\$92.42	\$64.52
51725	TC	\$126.80	
51725	00	\$185.91	
51725	26	\$59.11	
51726	TC	\$193.66	
51726	00	\$260.96	
51726	26	\$67.30	
51736	TC	\$15.67	
51736	00	\$39.93	
51736	26	\$24.27	
51741	TC	\$18.10	
51741	00	\$63.08	
51741	26	\$44.98	
51772	TC	\$137.86	
51772	00	\$201.11	
51772	26	\$63.25	
51784	TC	\$101.77	
51784	00	\$161.81	
51784	26	\$60.03	
51785	TC	\$114.72	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
51785	00	\$174.62	
51785	26	\$59.90	
51792	TC	\$148.99	
51792	00	\$192.47	
51792	26	\$43.47	
51795	TC	\$187.42	
51795	00	\$247.46	
51795	26	\$60.03	
51797	TC	\$107.08	
51797	00	\$142.88	
51797	26	\$35.79	
51798	00	\$14.58	
51800	00	\$794.00	
51820	00	\$829.54	
51840	00	\$494.63	
51841	00	\$590.23	
51845	00	\$447.04	
51860	00	\$547.16	
51865	00	\$674.27	
51880	00	\$354.55	
51900	00	\$625.96	
51920	00	\$586.15	
51925	00	\$818.35	
51940	00	\$1,229.93	
51960	00	\$1,055.82	
51980	00	\$540.70	
51990	00	\$565.94	
51992	00	\$617.96	
51999	00	M	
52000	00	\$164.67	\$94.20
52001	00	\$303.99	\$222.30
52005	00	\$231.64	\$101.63
52007	00	\$478.62	\$127.73
52010	00	\$358.84	\$127.60
52204	00	\$403.38	\$108.00
52214	00	\$942.14	\$153.21
52224	00	\$890.27	\$131.25
52234	00	\$190.99	
52235	00	\$224.31	
52240	00	\$392.62	
52250	00	\$187.30	
52260	00	\$161.83	
52265	00	\$385.49	\$122.90
52270	00	\$357.62	\$140.76
52275	00	\$494.05	\$192.91
52276	00	\$205.81	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
52277	00	\$252.90	
52281	00	\$259.73	\$119.37
52282	00	\$260.90	
52283	00	\$223.46	\$155.00
52285	00	\$224.83	\$150.33
52290	00	\$189.29	
52300	00	\$218.62	
52301	00	\$228.00	
52305	00	\$216.89	
52310	00	\$206.81	\$117.07
52315	00	\$371.49	\$213.30
52317	00	\$857.29	\$271.41
52318	00	\$369.85	
52320	00	\$191.76	
52325	00	\$249.74	
52327	00	\$638.05	\$206.34
52330	00	\$998.74	\$205.50
52332	00	\$343.62	\$119.85
52334	00	\$198.71	
52341	00	\$253.50	
52342	00	\$272.87	
52343	00	\$300.27	
52344	00	\$323.80	
52345	00	\$343.46	
52346	00	\$383.83	
52351	00	\$243.57	
52352	00	\$285.80	
52353	00	\$329.09	
52354	00	\$304.18	
52355	00	\$362.80	
52400	00	\$423.69	
52402	00	\$209.01	
52450	00	\$353.93	
52500	00	\$417.83	
52601	00	\$632.18	
52630	00	\$337.19	
52640	00	\$306.60	
52647	00	\$1,991.23	\$488.14
52648	00	\$2,023.80	\$521.28
52649	00	\$766.28	
52700	00	\$330.88	
53000	00	\$114.83	
53010	00	\$222.66	
53020	00	\$74.94	
53025	00	\$52.05	
53040	00	\$301.75	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
53060	00	\$138.39	\$119.99
53080	00	\$356.25	
53085	00	\$493.55	
53200	00	\$119.04	\$108.40
53210	00	\$590.41	
53215	00	\$712.25	
53220	00	\$343.76	
53230	00	\$459.57	
53235	00	\$485.44	
53240	00	\$324.49	
53250	00	\$297.75	
53260	00	\$155.38	\$134.68
53265	00	\$172.93	\$140.72
53270	00	\$158.68	\$140.27
53275	00	\$204.43	
53400	00	\$611.12	
53405	00	\$667.41	
53410	00	\$749.89	
53415	00	\$856.50	
53420	00	\$629.10	
53425	00	\$720.78	
53430	00	\$729.82	
53431	00	\$885.13	
53440	00	\$663.05	
53442	00	\$583.72	
53444	00	\$608.51	
53445	00	\$669.39	
53446	00	\$492.16	
53447	00	\$624.15	
53448	00	\$982.69	
53449	00	\$465.56	
53450	00	\$309.16	
53460	00	\$348.00	
53500	00	\$570.36	
53502	00	\$368.88	
53505	00	\$370.11	
53510	00	\$487.65	
53515	00	\$610.94	
53520	00	\$425.03	
53600	00	\$68.22	\$49.81
53601	00	\$66.41	\$41.10
53605	00	\$50.58	
53620	00	\$100.43	\$67.64
53621	00	\$95.21	\$56.09
53660	00	\$58.50	\$31.75
53661	00	\$58.21	\$30.89

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
53665	00	\$29.71	
53850	00	\$2,351.80	\$431.09
53852	00	\$2,254.37	\$468.55
53899	00	M	
54000	00	\$125.83	\$79.81
54001	00	\$154.12	\$104.37
54015	00	\$237.96	
54050	00	\$90.65	\$71.38
54055	00	\$86.53	\$64.96
54056	00	\$94.70	\$74.57
54057	00	\$106.32	\$68.35
54060	00	\$145.92	\$95.59
54065	00	\$155.95	\$116.83
54100	00	\$143.35	\$86.12
54105	00	\$220.98	\$164.89
54110	00	\$478.63	
54111	00	\$613.74	
54112	00	\$720.48	
54115	00	\$343.84	\$318.81
54120	00	\$479.51	
54125	00	\$619.20	
54130	00	\$914.26	
54135	00	\$1,162.88	
54150	00	\$145.59	\$76.56
54160	00	\$187.10	\$109.74
54161	00	\$149.92	
54162	00	\$219.48	\$148.15
54163	00	\$164.83	
54164	00	\$145.18	
54200	00	\$86.39	\$64.25
54205	00	\$410.83	
54220	00	\$173.38	\$103.49
54230	00	\$74.62	\$61.10
54231	00	\$107.76	\$90.21
54235	00	\$68.31	\$55.66
54240	TC	\$24.10	
54240	00	\$75.30	
54240	26	\$51.21	
54250	TC	\$8.32	
54250	00	\$95.27	
54250	26	\$86.96	
54300	00	\$498.67	
54304	00	\$585.28	
54308	00	\$517.30	
54312	00	\$649.34	
54316	00	\$777.49	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
54318	00	\$517.11	
54322	00	\$609.67	
54324	00	\$759.88	
54326	00	\$733.84	
54328	00	\$725.10	
54332	00	\$785.29	
54336	00	\$886.62	
54340	00	\$442.37	
54344	00	\$745.42	
54348	00	\$793.77	
54352	00	\$1,123.17	
54360	00	\$561.46	
54380	00	\$618.06	
54385	00	\$754.10	
54390	00	\$899.06	
54400	00	\$409.73	
54401	00	\$498.25	
54405	00	\$619.94	
54406	00	\$558.31	
54408	00	\$599.84	
54410	00	\$708.41	
54411	00	\$776.81	
54415	00	\$401.09	
54416	00	\$535.58	
54417	00	\$681.98	
54420	00	\$542.71	
54430	00	\$490.81	
54435	00	\$318.49	
54440	00	\$770.91	\$668.82
54450	00	\$58.62	\$45.97
54500	00	\$57.11	
54505	00	\$164.20	
54512	00	\$409.98	
54520	00	\$247.95	
54522	00	\$448.03	
54530	00	\$419.27	
54535	00	\$559.49	
54550	00	\$371.78	
54560	00	\$522.07	
54600	00	\$343.78	
54620	00	\$231.58	
54640	00	\$352.25	
54650	00	\$519.41	
54670	00	\$311.16	
54680	00	\$606.42	
54690	00	\$491.54	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
54692	00	\$588.24	
54699	00	M	
54700	00	\$162.80	
54800	00	\$99.15	
54830	00	\$278.83	
54840	00	\$246.73	
54860	00	\$316.55	
54861	00	\$429.97	
54865	00	\$268.52	
54900	00	\$566.92	
54901	00	\$816.56	
55000	00	\$98.15	\$64.21
55040	00	\$256.07	
55041	00	\$383.70	
55060	00	\$284.80	
55100	00	\$172.74	\$122.40
55110	00	\$290.67	
55120	00	\$266.53	
55150	00	\$366.48	
55175	00	\$273.02	
55180	00	\$521.39	
55200	00	\$423.60	\$212.78
55250	00	\$374.30	\$172.69
55300	00	\$145.88	
55450	00	\$306.55	\$191.21
55500	00	\$284.47	
55520	00	\$296.45	
55530	00	\$268.40	
55535	00	\$324.11	
55540	00	\$359.15	
55550	00	\$320.31	
55559	00	M	
55600	00	\$321.00	
55605	00	\$379.67	
55650	00	\$547.22	
55680	00	\$262.90	
55700	00	\$187.70	\$102.28
55705	00	\$207.12	
55706	00	\$312.09	
55720	00	\$353.74	
55725	00	\$443.06	
55801	00	\$828.71	
55810	00	\$1,007.55	
55812	00	\$1,226.08	
55815	00	\$1,355.16	
55821	00	\$667.40	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
55831	00	\$723.58	
55840	00	\$1,026.09	
55842	00	\$1,099.43	
55845	00	\$1,257.80	
55860	00	\$670.92	
55862	00	\$847.02	
55865	00	\$1,020.45	
55866	00	\$1,335.33	
55873	00	\$879.63	
55875	00	\$583.56	
55876	00	\$111.90	\$82.56
55899	00	M	
55920	00	\$332.24	
56405	00	\$79.49	\$76.62
56420	00	\$96.46	\$67.98
56440	00	\$132.04	
56441	00	\$109.28	\$101.22
56442	00	\$34.94	
56501	00	\$95.10	\$81.29
56515	00	\$160.87	\$141.02
56605	00	\$61.53	\$44.28
56606	00	\$28.66	\$21.76
56620	00	\$381.73	
56625	00	\$428.21	
56630	00	\$621.90	
56631	00	\$794.67	
56632	00	\$911.36	
56633	00	\$810.94	
56634	00	\$859.18	
56637	00	\$1,020.23	
56640	00	\$1,012.98	
56700	00	\$134.48	
56740	00	\$213.91	
56800	00	\$175.43	
56805	00	\$830.95	
56810	00	\$188.92	
56820	00	\$80.58	\$61.61
56821	00	\$108.70	\$84.25
57000	00	\$138.04	
57010	00	\$308.81	
57020	00	\$69.37	\$59.59
57022	00	\$121.61	
57023	00	\$223.39	
57061	00	\$83.56	\$70.05
57065	00	\$140.48	\$123.80
57100	00	\$65.12	\$47.86

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
57105	00	\$99.58	\$90.38
57106	00	\$338.39	
57107	00	\$1,005.18	
57109	00	\$1,148.14	
57110	00	\$649.97	
57111	00	\$1,170.04	
57112	00	\$1,223.32	
57120	00	\$368.78	
57130	00	\$131.91	\$115.79
57135	00	\$141.48	\$125.37
57150	00	\$40.45	\$21.47
57155	00	\$312.97	
57160	00	\$55.91	\$34.92
57170	FP	\$56.40	\$35.41
57170	00	\$56.40	\$35.41
57180	00	\$105.45	\$78.99
57200	00	\$212.91	
57210	00	\$263.31	
57220	00	\$229.19	
57230	00	\$283.77	
57240	00	\$463.86	
57250	00	\$454.48	
57260	00	\$571.24	
57265	00	\$642.30	
57267	00	\$196.16	
57268	00	\$343.58	
57270	00	\$574.98	
57280	00	\$697.02	
57282	00	\$363.79	
57283	00	\$498.70	
57284	00	\$609.29	
57285	00	\$481.23	
57287	00	\$506.05	
57288	00	\$595.53	
57289	00	\$556.72	
57291	00	\$394.21	
57292	00	\$597.64	
57295	00	\$352.86	
57296	00	\$677.84	
57300	00	\$378.87	
57305	00	\$631.61	
57307	00	\$706.42	
57308	00	\$455.18	
57310	00	\$347.37	
57311	00	\$395.28	
57320	00	\$395.14	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
57330	00	\$569.14	
57335	00	\$827.95	
57400	00	\$97.66	
57410	00	\$77.56	
57415	00	\$113.98	
57420	00	\$84.75	\$65.19
57421	00	\$115.14	\$89.83
57423	00	\$660.32	
57425	00	\$695.22	
57452	00	\$80.01	\$66.20
57454	00	\$113.04	\$99.52
57455	00	\$105.50	\$81.05
57456	00	\$99.67	\$75.79
57460	00	\$229.73	\$119.57
57461	00	\$255.68	\$138.33
57500	00	\$101.09	\$53.92
57505	00	\$74.48	\$65.56
57510	00	\$97.62	\$84.39
57511	00	\$106.32	\$95.10
57513	00	\$104.30	\$95.68
57520	00	\$226.34	\$198.44
57522	00	\$192.66	\$175.11
57530	00	\$247.14	
57531	00	\$1,229.26	
57540	00	\$559.61	
57545	00	\$593.07	
57550	00	\$291.57	
57555	00	\$433.43	
57556	00	\$409.06	
57558	00	\$90.89	\$81.69
57700	00	\$216.23	
57720	00	\$221.05	
57800	00	\$44.24	\$35.61
58100	00	\$80.97	\$64.29
58110	00	\$36.47	\$30.43
58120	00	\$176.93	\$155.93
58140	00	\$657.40	
58145	00	\$390.92	
58146	00	\$836.47	
58150	00	\$711.61	
58152	00	\$902.85	
58180	00	\$684.91	
58200	00	\$942.75	
58210	00	\$1,255.77	
58240	00	\$1,944.64	
58260	00	\$595.53	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
58262	00	\$665.22	
58263	00	\$716.64	
58267	00	\$761.71	
58270	00	\$638.55	
58275	00	\$708.47	
58280	00	\$759.06	
58285	00	\$949.78	
58290	00	\$835.88	
58291	00	\$907.04	
58292	00	\$957.85	
58293	00	\$995.78	
58294	00	\$881.71	
58300	FP	\$59.69	\$38.99
58300	00	\$59.69	\$38.99
58301	FP	\$71.77	\$49.63
58301	00	\$71.77	\$49.63
58340	FP	\$102.35	\$43.38
58340	00	\$102.35	\$43.38
58346	00	\$328.47	
58353	00	\$947.76	\$160.26
58356	00	\$1,698.09	\$255.39
58400	00	\$321.17	
58410	00	\$577.47	
58520	00	\$562.16	
58540	00	\$652.18	
58541	00	\$609.19	
58542	00	\$676.46	
58543	00	\$687.65	
58544	00	\$743.52	
58545	00	\$646.70	
58546	00	\$819.55	
58548	00	\$1,291.51	
58550	00	\$637.74	
58552	00	\$705.61	
58553	00	\$823.35	
58554	00	\$946.02	
58555	00	\$170.40	\$139.05
58558	00	\$224.42	\$195.95
58559	00	\$252.02	
58560	00	\$285.94	
58561	00	\$404.10	
58562	00	\$239.49	\$213.90
58563	00	\$1,527.60	\$252.30
58565	FP	\$1,531.87	\$319.57
58565	00	\$1,531.87	\$319.57
58570	00	\$653.82	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
58571	00	\$718.65	
58572	00	\$811.84	
58573	00	\$920.14	
58578	00	M	
58579	00	M	
58600	FP	\$263.91	
58600	00	\$263.91	
58605	FP	\$239.37	
58605	00	\$239.37	
58611	FP	\$57.16	
58611	00	\$57.16	
58615	FP	\$184.49	
58615	00	\$184.49	
58660	00	\$484.08	
58661	FP	\$467.07	
58661	00	\$467.07	
58662	00	\$511.06	
58670	FP	\$263.47	
58670	00	\$263.47	
58671	FP	\$263.61	
58671	00	\$263.61	
58673	00	\$585.09	
58679	00	M	
58700	00	\$547.08	
58720	00	\$515.13	
58740	00	\$629.03	
58800	00	\$232.36	\$214.24
58805	00	\$288.39	
58820	00	\$226.31	
58822	00	\$494.60	
58823	00	\$692.73	\$131.01
58900	00	\$294.92	
58920	00	\$506.13	
58925	00	\$523.58	
58940	00	\$357.95	
58943	00	\$804.34	
58950	00	\$766.07	
58951	00	\$989.53	
58952	00	\$1,115.72	
58953	00	\$1,384.63	
58954	00	\$1,503.57	
58956	00	\$963.56	
58957	00	\$1,048.85	
58958	00	\$1,160.57	
58960	00	\$661.42	
58999	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
59000	00	\$95.54	\$58.15
59001	00	\$129.60	
59012	00	\$146.42	
59015	00	\$111.57	\$95.47
59020	TC	\$21.47	
59020	00	\$48.48	
59020	26	\$27.01	
59025	TC	\$10.62	
59025	00	\$32.57	
59025	26	\$21.95	
59025	99	\$21.95	
59030	00	\$79.80	
59050	00	\$36.67	
59051	00	\$30.26	
59070	00	\$288.41	\$209.90
59072	00	\$334.90	
59074	00	\$268.86	\$206.45
59076	00	\$334.90	
59100	00	\$585.61	
59120	00	\$557.66	
59121	00	\$561.27	
59130	00	\$632.88	
59135	00	\$638.85	
59136	00	\$606.48	
59140	00	\$261.68	
59150	00	\$541.86	
59151	00	\$532.08	
59160	00	\$161.25	\$132.78
59200	00	\$55.41	\$32.41
59300	00	\$138.13	\$103.61
59320	00	\$109.83	
59325	00	\$174.31	
59350	00	\$199.07	
59409	00	\$1,000.00	
59412	00	\$74.36	
59414	00	\$66.03	
59430	00	\$99.89	\$90.40
59514	00	\$1,000.00	
59525	00	\$346.24	
59612	00	\$1,000.00	
59620	00	\$1,000.00	
59812	00	\$217.59	\$206.95
59820	00	\$266.73	\$245.44
59821	00	\$271.91	\$249.76
59830	00	\$309.24	
59840	00	\$153.50	\$150.34

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
59841	00	\$268.22	\$252.69
59850	00	\$265.70	
59851	00	\$284.72	
59852	00	\$383.51	
59855	00	\$294.34	
59856	00	\$348.21	
59857	00	\$409.20	
59870	00	\$326.80	
59871	00	\$96.15	
59897	00	M	
59898	00	M	
59899	00	M	
60000	00	\$110.04	\$101.13
60100	00	\$84.28	\$60.12
60200	00	\$457.87	
60210	00	\$486.75	
60212	00	\$696.01	
60220	00	\$533.76	
60225	00	\$641.16	
60240	00	\$681.76	
60252	00	\$919.28	
60254	00	\$1,196.76	
60260	00	\$769.05	
60270	00	\$965.64	
60271	00	\$744.00	
60280	00	\$309.17	
60281	00	\$415.62	
60300	00	\$76.16	\$37.33
60500	00	\$702.18	
60502	00	\$884.33	
60505	00	\$972.87	
60512	00	\$172.72	
60520	00	\$730.24	
60521	00	\$830.32	
60522	00	\$1,002.31	
60540	00	\$755.67	
60545	00	\$865.56	
60600	00	\$1,018.26	
60605	00	\$1,281.97	
60650	00	\$843.11	
60659	00	M	
60699	00	M	
61000	00	\$77.56	
61001	00	\$74.82	
61020	00	\$89.65	
61026	00	\$90.61	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
61050	00	\$78.82	
61055	00	\$100.86	
61070	00	\$58.29	
61105	00	\$297.02	
61107	00	\$220.36	
61108	00	\$582.53	
61120	00	\$479.91	
61140	00	\$828.71	
61150	00	\$890.30	
61151	00	\$651.83	
61154	00	\$825.08	
61156	00	\$827.22	
61210	00	\$256.91	
61215	00	\$315.09	
61250	00	\$563.27	
61253	00	\$631.67	
61304	00	\$1,096.91	
61305	00	\$1,320.04	
61312	00	\$1,367.48	
61313	00	\$1,307.10	
61314	00	\$1,200.86	
61315	00	\$1,380.92	
61316	00	\$59.81	
61320	00	\$1,275.12	
61321	00	\$1,414.78	
61322	00	\$1,538.78	
61323	00	\$1,571.56	
61330	00	\$1,103.18	
61332	00	\$1,278.19	
61333	00	\$1,283.76	
61334	00	\$855.40	
61340	00	\$956.17	
61343	00	\$1,466.64	
61345	00	\$1,349.07	
61440	00	\$1,319.09	
61450	00	\$1,262.52	
61458	00	\$1,339.75	
61460	00	\$1,374.53	
61470	00	\$1,255.42	
61480	00	\$1,213.93	
61490	00	\$1,267.03	
61500	00	\$900.87	
61501	00	\$768.16	
61510	00	\$1,444.97	
61512	00	\$1,711.93	
61514	00	\$1,265.64	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Rate	Facility Rate
61516	00	\$1,237.10	
61517	00	\$60.38	
61518	00	\$1,842.56	
61519	00	\$1,984.05	
61520	00	\$2,562.05	
61521	00	\$2,138.66	
61522	00	\$1,449.66	
61524	00	\$1,385.34	
61526	00	\$2,361.10	
61530	00	\$2,002.90	
61531	00	\$791.21	
61533	00	\$1,005.45	
61534	00	\$1,079.92	
61535	00	\$641.73	
61536	00	\$1,733.21	
61537	00	\$1,573.71	
61538	00	\$1,685.49	
61539	00	\$1,570.61	
61540	00	\$1,475.35	
61541	00	\$1,420.52	
61542	00	\$1,535.67	
61543	00	\$1,414.55	
61544	00	\$1,252.19	
61545	00	\$2,121.02	
61546	00	\$1,533.08	
61548	00	\$1,052.19	
61550	00	\$629.09	
61552	00	\$891.24	
61556	00	\$1,092.68	
61557	00	\$1,121.74	
61558	00	\$1,175.99	
61559	00	\$1,608.45	
61563	00	\$1,275.40	
61564	00	\$1,612.23	
61566	00	\$1,498.10	
61567	00	\$1,696.89	
61570	00	\$1,223.44	
61571	00	\$1,315.79	
61575	00	\$1,611.55	
61576	00	\$2,530.76	
61580	00	\$1,709.04	
61581	00	\$1,885.48	
61582	00	\$1,911.51	
61583	00	\$1,938.59	
61584	00	\$1,896.12	
61585	00	\$2,032.64	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Rate	Facility Rate
61586	00	\$1,477.37	
61590	00	\$2,160.00	
61591	00	\$2,174.45	
61592	00	\$2,112.07	
61595	00	\$1,624.38	
61596	00	\$1,805.85	
61597	00	\$1,931.08	
61598	00	\$1,754.63	
61600	00	\$1,459.96	
61601	00	\$1,579.48	
61605	00	\$1,546.86	
61606	00	\$2,004.97	
61607	00	\$1,886.47	
61608	00	\$2,184.81	
61609	00	\$428.98	
61610	00	\$1,285.46	
61611	00	\$313.51	
61612	00	\$1,125.56	
61613	00	\$2,150.09	
61615	00	\$1,700.38	
61616	00	\$2,227.37	
61618	00	\$873.31	
61619	00	\$1,016.71	
61623	00	\$406.44	
61624	00	\$796.98	
61626	00	\$649.66	
61680	00	\$1,510.36	
61682	00	\$2,855.43	
61684	00	\$1,916.04	
61686	00	\$3,057.40	
61690	00	\$1,449.43	
61692	00	\$2,458.11	
61697	00	\$2,767.31	
61698	00	\$2,948.02	
61700	00	\$2,340.34	
61702	00	\$2,600.55	
61703	00	\$876.47	
61705	00	\$1,728.62	
61708	00	\$1,509.74	
61710	00	\$1,333.76	
61711	00	\$1,751.55	
61720	00	\$787.72	
61735	00	\$969.41	
61750	00	\$929.03	
61751	00	\$905.10	
61760	00	\$997.57	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
61770	00	\$1,016.46	
61790	00	\$557.58	
61791	00	\$723.11	
61795	00	\$173.87	
61796	00	\$550.59	
61797	00	\$151.91	
61798	00	\$550.59	
61799	00	\$210.02	
61800	00	\$106.34	
61863	00	\$999.85	
61864	00	\$255.76	
61867	00	\$1,493.34	
61868	00	\$395.52	
61885	00	\$406.88	
61886	00	\$514.45	
61888	00	\$266.95	
62000	00	\$592.78	
62005	00	\$810.21	
62010	00	\$1,007.00	
62100	00	\$1,081.74	
62115	00	\$1,080.66	
62116	00	\$1,167.38	
62117	00	\$1,261.13	
62120	00	\$1,242.36	
62121	00	\$1,128.68	
62140	00	\$697.15	
62141	00	\$764.31	
62142	00	\$579.46	
62143	00	\$682.02	
62145	00	\$927.41	
62146	00	\$807.89	
62147	00	\$957.73	
62148	00	\$85.72	
62160	00	\$132.70	
62161	00	\$1,012.55	
62162	00	\$1,254.60	
62163	00	\$791.31	
62164	00	\$1,340.64	
62165	00	\$1,052.72	
62180	00	\$1,053.58	
62190	00	\$585.39	
62192	00	\$638.57	
62194	00	\$252.49	
62200	00	\$912.48	
62201	00	\$781.42	
62220	00	\$677.89	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
62223	00	\$686.59	
62225	00	\$328.44	
62230	00	\$552.79	
62252	TC	\$37.66	
62252	00	\$70.19	
62252	26	\$32.53	
62256	00	\$381.10	
62258	00	\$746.70	
62263	00	\$504.59	\$274.78
62264	00	\$320.18	\$166.31
62267	00	\$186.77	\$125.56
62268	00	\$401.45	\$196.10
62269	00	\$447.17	\$195.79
62270	00	\$117.15	\$56.17
62272	00	\$137.40	\$59.46
62273	00	\$125.19	\$80.61
62280	00	\$244.47	\$109.29
62281	00	\$217.47	\$105.01
62282	00	\$246.75	\$97.19
62284	00	\$171.23	\$65.38
62287	00	\$399.72	
62290	00	\$254.92	\$123.77
62291	00	\$231.76	\$118.45
62292	00	\$374.04	
62294	00	\$550.18	
62310	00	\$167.52	\$72.61
62311	00	\$153.72	\$60.82
62318	00	\$186.03	\$74.72
62319	00	\$166.14	\$69.22
62350	00	\$354.02	
62351	00	\$567.61	
62355	00	\$291.41	
62360	00	\$192.47	
62361	00	\$310.99	
62362	00	\$387.32	
62365	00	\$301.69	
62367	00	\$28.80	\$17.00
62368	00	\$40.03	\$26.80
63001	00	\$820.89	
63003	00	\$828.48	
63005	00	\$787.06	
63011	00	\$738.30	
63012	00	\$803.68	
63015	00	\$987.85	
63016	00	\$1,015.47	
63017	00	\$830.88	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
63020	00	\$782.98	
63030	00	\$651.88	
63035	00	\$139.14	
63040	00	\$955.10	
63042	00	\$896.72	
63043	00	\$135.00	
63044	00	\$116.64	
63045	00	\$852.89	
63046	00	\$817.28	
63047	00	\$748.62	
63048	00	\$150.36	
63050	00	\$1,019.06	
63051	00	\$1,159.30	
63055	00	\$1,098.43	
63056	00	\$1,020.42	
63057	00	\$230.52	
63064	00	\$1,208.55	
63066	00	\$142.15	
63075	00	\$942.65	
63076	00	\$178.19	
63077	00	\$1,037.47	
63078	00	\$142.40	
63081	00	\$1,205.94	
63082	00	\$192.26	
63085	00	\$1,303.94	
63086	00	\$137.47	
63087	00	\$1,655.63	
63088	00	\$186.59	
63090	00	\$1,361.07	
63091	00	\$129.22	
63101	00	\$1,554.13	
63102	00	\$1,551.24	
63103	00	\$205.83	
63170	00	\$1,007.61	
63172	00	\$926.06	
63173	00	\$1,136.55	
63180	00	\$942.94	
63182	00	\$971.07	
63185	00	\$755.79	
63190	00	\$855.77	
63191	00	\$824.01	
63194	00	\$992.30	
63195	00	\$1,004.79	
63196	00	\$1,176.31	
63197	00	\$1,029.53	
63198	00	\$1,173.93	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
63199	00	\$1,250.79	
63200	00	\$1,003.33	
63250	00	\$1,939.97	
63251	00	\$2,027.54	
63252	00	\$2,015.62	
63265	00	\$1,110.54	
63266	00	\$1,144.95	
63267	00	\$921.89	
63268	00	\$920.80	
63270	00	\$1,370.45	
63271	00	\$1,375.87	
63272	00	\$1,270.51	
63273	00	\$1,227.79	
63275	00	\$1,198.37	
63276	00	\$1,189.37	
63277	00	\$1,048.51	
63278	00	\$1,029.97	
63280	00	\$1,409.42	
63281	00	\$1,397.47	
63282	00	\$1,315.72	
63283	00	\$1,255.31	
63285	00	\$1,737.53	
63286	00	\$1,734.43	
63287	00	\$1,826.36	
63290	00	\$1,839.92	
63295	00	\$220.51	
63300	00	\$1,235.53	
63301	00	\$1,385.40	
63302	00	\$1,373.70	
63303	00	\$1,463.16	
63304	00	\$1,536.65	
63305	00	\$1,597.09	
63306	00	\$1,603.90	
63307	00	\$1,495.23	
63308	00	\$230.28	
63600	00	\$579.31	
63610	00	\$1,316.47	\$310.97
63615	00	\$779.02	
63620	00	\$550.59	
63621	00	\$174.67	
63650	00	\$308.19	
63655	00	\$563.53	
63660	00	\$305.21	
63685	00	\$347.89	
63688	00	\$285.49	
63700	00	\$826.34	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
63702	00	\$899.98	
63704	00	\$1,041.01	
63706	00	\$1,192.97	
63707	00	\$609.98	
63709	00	\$743.02	
63710	00	\$738.11	
63740	00	\$616.10	
63741	00	\$415.38	
63744	00	\$433.37	
63746	00	\$360.57	
64400	00	\$80.04	\$44.94
64402	00	\$79.83	\$52.21
64405	00	\$75.86	\$51.99
64408	00	\$84.44	\$63.44
64410	00	\$105.08	\$56.18
64412	00	\$103.08	\$49.01
64413	00	\$85.86	\$54.52
64415	00	\$103.48	\$53.72
64416	00	\$130.71	
64417	00	\$106.23	\$53.60
64418	00	\$103.05	\$51.85
64420	00	\$124.66	\$46.70
64421	00	\$187.45	\$63.77
64425	00	\$93.28	\$66.25
64430	00	\$113.07	\$61.59
64435	00	\$108.09	\$60.92
64445	00	\$104.76	\$57.30
64446	00	\$125.69	
64447	00	\$52.06	
64448	00	\$114.36	
64449	00	\$113.03	
64450	00	\$73.80	\$51.37
64455	00	\$38.21	\$30.53
64470	00	\$212.67	\$73.75
64472	00	\$88.74	\$47.03
64475	00	\$192.29	\$58.26
64476	00	\$74.75	\$35.06
64479	00	\$225.30	\$88.12
64480	00	\$108.12	\$57.21
64483	00	\$223.44	\$77.62
64484	00	\$108.96	\$48.57
64505	00	\$73.67	\$59.86
64508	00	\$109.69	\$51.30
64510	00	\$112.25	\$48.69
64517	00	\$127.39	\$85.97
64520	00	\$150.16	\$54.38

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
64530	00	\$149.92	\$64.50
64561	00	\$920.56	\$300.17
64573	00	\$400.91	
64581	00	\$584.93	
64585	00	\$308.57	\$124.78
64590	00	\$265.40	\$138.84
64595	00	\$293.97	\$110.76
64600	00	\$314.66	\$149.28
64605	00	\$410.21	\$233.04
64610	00	\$482.39	\$325.63
64612	00	\$115.53	\$95.39
64613	00	\$118.97	\$91.07
64614	00	\$133.01	\$101.08
64620	00	\$203.52	\$118.38
64622	00	\$257.49	\$125.18
64623	00	\$95.37	\$34.96
64626	00	\$290.21	\$165.39
64627	00	\$132.80	\$41.04
64630	00	\$167.13	\$134.63
64632	00	\$63.11	
64640	00	\$177.16	\$129.13
64650	00	\$43.36	\$27.25
64653	00	\$49.58	\$34.05
64680	00	\$234.24	\$114.31
64702	00	\$310.23	
64704	00	\$232.94	
64708	00	\$318.42	
64712	00	\$371.90	
64713	00	\$513.84	
64714	00	\$433.28	
64716	00	\$366.16	
64718	00	\$388.45	
64719	00	\$272.70	
64721	00	\$290.99	\$290.13
64722	00	\$226.67	
64726	00	\$206.43	
64727	00	\$132.28	
64732	00	\$251.69	
64734	00	\$287.39	
64736	00	\$262.85	
64738	00	\$323.85	
64740	00	\$326.89	
64742	00	\$328.92	
64744	00	\$286.94	
64746	00	\$313.20	
64752	00	\$342.32	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
64755	00	\$606.42	
64760	00	\$326.08	
64761	00	\$315.29	
64763	00	\$353.60	
64766	00	\$420.65	
64771	00	\$403.34	
64772	00	\$381.25	
64774	00	\$283.51	
64776	00	\$272.04	
64778	00	\$132.63	
64782	00	\$316.88	
64783	00	\$157.44	
64784	00	\$500.98	
64786	00	\$752.00	
64787	00	\$182.74	
64788	00	\$262.81	
64790	00	\$569.28	
64792	00	\$722.17	
64795	00	\$134.58	
64802	00	\$430.04	
64804	00	\$662.35	
64809	00	\$615.84	
64818	00	\$472.53	
64820	00	\$521.85	
64821	00	\$474.97	
64822	00	\$472.61	
64823	00	\$535.16	
64831	00	\$504.08	
64832	00	\$246.02	
64834	00	\$516.96	
64835	00	\$559.83	
64836	00	\$561.04	
64837	00	\$272.31	
64840	00	\$635.85	
64856	00	\$703.70	
64857	00	\$736.37	
64858	00	\$835.52	
64859	00	\$185.25	
64861	00	\$951.97	
64862	00	\$964.83	
64864	00	\$625.31	
64865	00	\$829.90	
64866	00	\$847.13	
64868	00	\$741.11	
64870	00	\$736.60	
64872	00	\$86.60	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
64874	00	\$129.40	
64876	00	\$147.02	
64885	00	\$810.43	
64886	00	\$955.74	
64890	00	\$757.61	
64891	00	\$754.69	
64892	00	\$731.85	
64893	00	\$786.96	
64895	00	\$902.86	
64896	00	\$982.75	
64897	00	\$881.18	
64898	00	\$958.02	
64901	00	\$433.57	
64902	00	\$506.13	
64905	00	\$671.71	
64907	00	\$874.32	
64910	00	\$473.01	
64911	00	\$578.73	
64999	00	M	
65091	00	\$422.05	
65093	00	\$422.88	
65101	00	\$484.44	
65103	00	\$505.24	
65105	00	\$555.51	
65110	00	\$806.23	
65112	00	\$952.93	
65114	00	\$988.08	
65125	00	\$315.31	\$189.33
65130	00	\$478.47	
65135	00	\$486.89	
65140	00	\$528.03	
65150	00	\$387.41	
65155	00	\$561.67	
65175	00	\$430.80	
65205	00	\$37.82	\$29.18
65210	00	\$46.07	\$35.14
65220	00	\$38.66	\$28.88
65222	00	\$50.64	\$38.27
65235	00	\$446.67	
65260	00	\$618.37	
65265	00	\$695.13	
65270	00	\$185.27	\$92.37
65272	00	\$330.24	\$221.52
65273	00	\$244.47	
65275	00	\$358.04	\$289.30
65280	00	\$428.37	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
65285	00	\$668.27	
65286	00	\$470.64	\$314.75
65290	00	\$314.99	
65400	00	\$435.40	\$380.76
65410	00	\$96.57	\$68.38
65420	00	\$348.21	\$242.94
65426	00	\$432.94	\$305.81
65430	00	\$76.43	\$68.66
65435	00	\$53.20	\$46.01
65436	00	\$248.64	\$238.00
65450	00	\$207.82	\$204.94
65710	00	\$712.06	
65730	00	\$790.27	
65750	00	\$802.33	
65755	00	\$797.56	
65756	00	\$791.24	
65757	00	M	
65760	00	\$901.00	
65765	00	\$901.00	
65767	00	\$901.00	
65770	00	\$915.88	
65772	00	\$291.88	\$258.23
65775	00	\$355.39	
65800	00	\$100.97	\$86.59
65805	00	\$110.75	\$86.87
65810	00	\$297.45	
65815	00	\$425.80	\$303.00
65820	00	\$489.19	
65850	00	\$550.31	
65855	00	\$224.44	\$194.53
65860	00	\$207.52	\$168.40
65865	00	\$311.47	
65870	00	\$381.59	
65875	00	\$404.43	
65880	00	\$426.54	
65900	00	\$628.27	
65920	00	\$504.89	
65930	00	\$418.40	
66020	00	\$126.17	\$85.61
66030	00	\$112.27	\$71.43
66130	00	\$469.75	\$373.98
66150	00	\$554.81	
66155	00	\$553.28	
66160	00	\$628.52	
66165	00	\$543.14	
66170	00	\$760.45	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
66172	00	\$953.45	
66180	00	\$755.13	
66185	00	\$476.01	
66220	00	\$463.47	
66225	00	\$598.53	
66250	00	\$499.98	\$353.29
66500	00	\$231.37	
66505	00	\$252.87	
66600	00	\$521.40	
66605	00	\$684.57	
66625	00	\$278.24	
66630	00	\$363.15	
66635	00	\$366.57	
66680	00	\$327.94	
66682	00	\$397.24	
66700	00	\$289.98	\$254.03
66710	00	\$286.11	\$252.75
66711	00	\$404.42	
66720	00	\$300.89	\$270.40
66740	00	\$284.10	\$254.76
66761	00	\$292.65	\$262.16
66761	54	\$234.12	\$209.73
66761	55	\$58.53	\$52.43
66762	00	\$305.62	\$271.10
66770	00	\$339.18	\$306.96
66820	00	\$263.37	
66821	00	\$208.78	\$196.13
66825	00	\$496.10	
66830	00	\$457.42	
66840	00	\$447.52	
66850	00	\$508.22	
66852	00	\$544.29	
66920	00	\$485.96	
66930	00	\$551.45	
66940	00	\$501.40	
66982	00	\$696.88	
66983	00	\$470.65	
66984	00	\$496.30	
66984	54	\$397.04	\$415.71
66984	55	\$99.26	\$103.93
66985	00	\$488.65	
66986	00	\$601.46	
66990	00	\$61.03	
66999	00	M	
67005	00	\$302.01	
67010	00	\$349.86	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
67015	00	\$376.49	
67025	00	\$473.16	\$402.11
67027	00	\$550.27	
67028	00	\$142.51	\$111.45
67030	00	\$334.37	
67031	00	\$249.73	\$226.14
67036	00	\$623.68	
67039	00	\$800.17	
67040	00	\$922.29	
67041	00	\$844.98	
67042	00	\$967.36	
67043	00	\$1,015.34	
67101	00	\$500.51	\$429.76
67105	00	\$462.99	\$411.79
67107	00	\$781.93	
67108	00	\$1,040.53	
67110	00	\$563.59	\$494.56
67112	00	\$856.83	
67113	00	\$1,115.04	
67115	00	\$314.15	
67120	00	\$427.94	\$354.31
67121	00	\$582.24	
67141	00	\$334.32	\$309.30
67145	00	\$336.38	\$315.96
67208	00	\$384.96	\$369.72
67210	00	\$448.64	\$431.96
67218	00	\$909.67	
67220	00	\$691.03	\$655.65
67221	00	\$204.04	\$145.66
67225	00	\$20.29	\$18.85
67227	00	\$393.27	\$365.95
67228	00	\$754.28	\$663.10
67229	00	\$734.07	
67250	00	\$514.95	
67255	00	\$550.23	
67299	00	M	
67311	00	\$384.32	
67312	00	\$458.97	
67314	00	\$429.71	
67316	00	\$516.25	
67318	00	\$449.90	
67320	00	\$211.02	
67331	00	\$199.76	
67332	00	\$217.36	
67334	00	\$196.81	
67335	00	\$100.56	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
67340	00	\$234.67	
67343	00	\$419.40	
67345	00	\$154.54	\$139.30
67346	00	\$133.27	
67399	00	M	
67400	00	\$613.92	
67405	00	\$520.15	
67412	00	\$572.91	
67413	00	\$571.23	
67414	00	\$850.22	
67415	00	\$70.64	
67420	00	\$1,079.50	
67430	00	\$818.61	
67440	00	\$795.40	
67445	00	\$921.06	
67450	00	\$823.18	
67500	00	\$59.13	\$51.94
67505	00	\$55.77	\$48.29
67515	00	\$59.31	\$54.13
67550	00	\$638.03	
67560	00	\$648.56	
67570	00	\$763.07	
67599	00	M	
67700	00	\$188.34	\$74.73
67710	00	\$160.68	\$62.89
67715	00	\$168.27	\$70.76
67800	00	\$83.11	\$67.86
67801	00	\$106.65	\$87.96
67805	00	\$132.08	\$108.50
67808	00	\$234.72	
67810	00	\$147.08	\$61.95
67820	00	\$35.65	\$35.94
67825	00	\$85.44	\$78.54
67830	00	\$186.29	\$89.93
67835	00	\$287.47	
67840	00	\$194.13	\$103.82
67850	00	\$145.02	\$91.23
67875	00	\$120.69	\$64.60
67880	00	\$302.02	\$234.72
67882	00	\$369.78	\$301.90
67900	00	\$429.93	\$335.30
67901	00	\$424.80	\$371.59
67902	00	\$450.28	
67903	00	\$420.00	\$328.83
67904	00	\$482.20	\$378.66
67906	00	\$335.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
67908	00	\$325.11	\$286.27
67909	00	\$362.52	\$289.18
67911	00	\$353.31	
67912	00	\$640.72	\$327.21
67914	00	\$266.46	\$189.09
67915	00	\$240.79	\$168.03
67916	00	\$362.43	\$283.05
67917	00	\$394.27	\$312.30
67921	00	\$254.17	\$177.09
67922	00	\$233.98	\$162.08
67923	00	\$380.71	\$305.07
67924	00	\$396.24	\$294.13
67930	00	\$249.56	\$161.54
67935	00	\$401.55	\$296.86
67938	00	\$171.46	\$74.53
67950	00	\$390.56	\$308.58
67961	00	\$389.19	\$300.60
67966	00	\$500.91	\$416.63
67971	00	\$478.66	
67973	00	\$620.10	
67974	00	\$617.73	
67975	00	\$451.65	
67999	00	M	
68020	00	\$77.80	\$72.33
68040	00	\$43.51	\$35.74
68100	00	\$119.83	\$64.89
68110	00	\$155.01	\$96.62
68115	00	\$216.91	\$120.56
68130	00	\$364.54	\$267.62
68135	00	\$102.56	\$98.54
68200	00	\$28.11	\$22.94
68320	00	\$478.95	\$340.89
68325	00	\$425.03	
68326	00	\$413.76	
68328	00	\$464.68	
68330	00	\$404.07	\$293.61
68335	00	\$414.28	
68340	00	\$365.74	\$253.56
68360	00	\$353.22	\$262.05
68362	00	\$419.91	
68399	00	M	
68400	00	\$197.79	\$93.10
68420	00	\$221.76	\$117.36
68440	00	\$75.89	\$63.24
68500	00	\$636.24	
68505	00	\$638.60	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
68510	00	\$312.98	\$191.89
68520	00	\$446.99	
68525	00	\$179.16	
68530	00	\$303.90	\$173.62
68540	00	\$600.31	
68550	00	\$732.03	
68700	00	\$386.18	
68705	00	\$163.42	\$108.49
68720	00	\$493.31	
68745	00	\$493.57	
68750	00	\$509.54	
68760	00	\$138.48	\$94.76
68761	00	\$98.79	\$76.65
68770	00	\$361.02	
68801	00	\$81.35	\$69.57
68810	00	\$177.09	\$152.64
68811	00	\$134.21	
68815	00	\$304.27	\$168.81
68816	00	\$453.31	\$158.79
68840	00	\$81.21	\$71.15
68850	00	\$45.94	\$41.34
68899	00	M	
69000	00	\$125.71	\$81.70
69005	00	\$147.55	\$112.17
69020	00	\$160.03	\$100.78
69100	00	\$74.31	\$34.33
69105	00	\$96.55	\$46.21
69110	00	\$311.57	\$230.18
69120	00	\$285.88	
69140	00	\$616.24	
69145	00	\$261.71	\$173.41
69150	00	\$754.15	
69155	00	\$1,201.29	
69200	00	\$87.85	\$39.24
69205	00	\$72.63	
69210	00	\$35.20	\$23.70
69220	00	\$95.05	\$44.42
69222	00	\$154.05	\$98.54
69300	00	\$412.89	\$333.23
69310	00	\$774.19	
69320	00	\$1,101.02	
69399	00	M	
69400	00	\$95.90	\$43.56
69401	00	\$57.95	\$36.09
69405	00	\$180.31	\$138.89
69420	00	\$132.73	\$84.70

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
69421	00	\$109.08	
69424	00	\$89.93	\$44.49
69433	00	\$137.57	\$91.84
69436	00	\$118.60	
69440	00	\$480.23	
69450	00	\$374.88	
69501	00	\$520.90	
69502	00	\$689.25	
69505	00	\$861.35	
69511	00	\$883.54	
69530	00	\$1,184.88	
69535	00	\$1,934.13	
69540	00	\$145.44	\$90.79
69550	00	\$742.19	
69552	00	\$1,135.10	
69554	00	\$1,826.88	
69601	00	\$743.29	
69602	00	\$773.68	
69603	00	\$912.67	
69604	00	\$792.73	
69605	00	\$1,121.75	
69610	00	\$280.61	\$214.17
69620	00	\$490.69	\$348.31
69631	00	\$617.32	
69632	00	\$760.35	
69633	00	\$732.24	
69635	00	\$867.04	
69636	00	\$986.61	
69637	00	\$981.30	
69641	00	\$737.21	
69642	00	\$952.41	
69643	00	\$869.01	
69644	00	\$1,062.93	
69645	00	\$1,040.20	
69646	00	\$1,106.77	
69650	00	\$563.80	
69660	00	\$661.12	
69661	00	\$867.22	
69662	00	\$830.70	
69666	00	\$571.09	
69667	00	\$572.28	
69670	00	\$669.88	
69676	00	\$588.29	
69700	00	\$500.16	
69710	00	\$821.50	
69711	00	\$612.18	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
69714	00	\$769.94	
69715	00	\$957.68	
69717	00	\$822.86	
69718	00	\$992.82	
69720	00	\$836.67	
69725	00	\$1,354.70	
69740	00	\$832.66	
69745	00	\$849.95	
69799	00	M	
69801	00	\$526.39	
69801	52	\$263.19	
69802	00	\$739.36	
69805	00	\$752.37	
69806	00	\$674.55	
69820	00	\$613.96	
69840	00	\$654.55	
69905	00	\$648.31	
69910	00	\$731.16	
69915	00	\$1,111.06	
69930	00	\$914.98	
69949	00	M	
69950	00	\$1,318.05	
69955	00	\$1,443.15	
69960	00	\$1,398.45	
69970	00	\$1,555.40	
69979	00	M	
69990	00	\$153.46	
70010	TC	\$99.86	
70010	00	\$145.63	
70010	26	\$45.76	
70010	99	\$45.76	
70015	TC	\$56.29	
70015	00	\$102.74	
70015	26	\$46.45	
70015	99	\$46.45	
70030	TC	\$14.07	
70030	00	\$20.73	
70030	26	\$6.66	
70030	99	\$6.66	
70100	TC	\$16.09	
70100	00	\$23.07	
70100	26	\$6.98	
70100	99	\$6.98	
70110	TC	\$19.81	
70110	00	\$29.27	
70110	26	\$9.48	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
70110	99	\$9.48	
70120	TC	\$18.66	
70120	00	\$25.63	
70120	26	\$6.98	
70120	99	\$6.98	
70130	TC	\$26.84	
70130	00	\$39.87	
70130	26	\$13.03	
70130	99	\$13.03	
70134	TC	\$22.53	
70134	00	\$35.56	
70134	26	\$13.03	
70134	99	\$13.03	
70140	TC	\$16.64	
70140	00	\$23.94	
70140	26	\$7.30	
70140	99	\$7.30	
70150	TC	\$22.81	
70150	00	\$32.61	
70150	26	\$9.79	
70150	99	\$9.79	
70160	TC	\$16.95	
70160	00	\$23.60	
70160	26	\$6.66	
70160	99	\$6.66	
70170	TC	\$26.25	
70170	00	\$38.25	
70170	26	\$11.33	
70170	99	\$11.33	
70190	TC	\$18.94	
70190	00	\$26.85	
70190	26	\$7.90	
70190	99	\$7.90	
70200	TC	\$23.10	
70200	00	\$33.82	
70200	26	\$10.72	
70200	99	\$10.72	
70210	TC	\$16.93	
70210	00	\$23.30	
70210	26	\$6.37	
70210	99	\$6.37	
70220	TC	\$21.38	
70220	00	\$30.84	
70220	26	\$9.48	
70220	99	\$9.48	
70240	TC	\$14.07	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
70240	00	\$21.37	
70240	26	\$7.30	
70240	99	\$7.30	
70250	TC	\$18.36	
70250	00	\$27.23	
70250	26	\$8.86	
70250	99	\$8.86	
70260	TC	\$24.67	
70260	00	\$37.70	
70260	26	\$13.03	
70260	99	\$13.03	
70300	TC	\$6.88	
70300	00	\$11.05	
70300	26	\$4.17	
70300	99	\$4.17	
70310	TC	\$17.24	
70310	00	\$23.57	
70310	26	\$6.34	
70310	99	\$6.34	
70320	TC	\$26.27	
70320	00	\$34.78	
70320	26	\$8.51	
70320	99	\$8.51	
70328	TC	\$15.51	
70328	00	\$22.49	
70328	26	\$6.98	
70328	99	\$6.98	
70330	TC	\$25.98	
70330	00	\$35.13	
70330	26	\$9.16	
70330	99	\$9.16	
70332	TC	\$50.49	
70332	00	\$71.30	
70332	26	\$20.80	
70332	99	\$20.80	
70336	TC	\$228.82	
70336	00	\$285.72	
70336	26	\$56.90	
70336	99	\$56.90	
70350	TC	\$9.76	
70350	00	\$16.41	
70350	26	\$6.66	
70350	99	\$6.66	
70355	TC	\$12.04	
70355	00	\$19.94	
70355	26	\$7.90	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
70355	99	\$7.90	
70360	TC	\$13.50	
70360	00	\$20.15	
70360	26	\$6.66	
70360	99	\$6.66	
70370	TC	\$42.07	
70370	00	\$54.03	
70370	26	\$11.97	
70370	99	\$11.97	
70371	TC	\$49.34	
70371	00	\$81.32	
70371	26	\$31.97	
70371	99	\$31.97	
70373	TC	\$48.35	
70373	00	\$64.83	
70373	26	\$16.48	
70373	99	\$16.48	
70380	TC	\$21.24	
70380	00	\$27.90	
70380	26	\$6.66	
70380	99	\$6.66	
70390	TC	\$58.99	
70390	00	\$73.56	
70390	26	\$14.57	
70390	99	\$14.57	
70450	TC	\$137.65	
70450	00	\$170.52	
70450	26	\$32.87	
70450	99	\$32.87	
70460	TC	\$173.41	
70460	00	\$217.28	
70460	26	\$43.87	
70460	99	\$43.87	
70470	TC	\$214.33	
70470	00	\$263.32	
70470	26	\$49.00	
70470	99	\$49.00	
70480	TC	\$142.03	
70480	00	\$191.35	
70480	26	\$49.32	
70480	99	\$49.32	
70481	TC	\$205.35	
70481	00	\$258.70	
70481	26	\$53.35	
70481	99	\$53.35	
70482	TC	\$240.67	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
70482	00	\$296.51	
70482	26	\$55.84	
70482	99	\$55.84	
70486	TC	\$141.57	
70486	00	\$185.15	
70486	26	\$43.59	
70486	99	\$43.59	
70487	TC	\$199.00	
70487	00	\$249.22	
70487	26	\$50.22	
70487	99	\$50.22	
70488	TC	\$240.36	
70488	00	\$294.96	
70488	26	\$54.60	
70488	99	\$54.60	
70490	TC	\$141.28	
70490	00	\$190.89	
70490	26	\$49.61	
70490	99	\$49.61	
70491	TC	\$194.12	
70491	00	\$247.46	
70491	26	\$53.35	
70491	99	\$53.35	
70492	TC	\$240.36	
70492	00	\$296.21	
70492	26	\$55.84	
70492	99	\$55.84	
70496	TC	\$242.82	
70496	00	\$310.41	
70496	26	\$67.59	
70496	99	\$67.59	
70498	TC	\$242.82	
70498	00	\$310.70	
70498	26	\$67.88	
70498	99	\$67.88	
70540	TC	\$255.27	
70540	00	\$307.08	
70540	26	\$51.81	
70540	99	\$51.81	
70542	TC	\$294.74	
70542	00	\$357.24	
70542	26	\$62.50	
70542	99	\$62.50	
70543	TC	\$388.61	
70543	00	\$471.11	
70543	26	\$82.51	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
70543	99	\$82.51	
70544	TC	\$253.57	
70544	00	\$299.95	
70544	26	\$46.37	
70544	99	\$46.37	
70545	TC	\$292.92	
70545	00	\$339.28	
70545	26	\$46.37	
70545	99	\$46.37	
70546	TC	\$391.23	
70546	00	\$460.71	
70546	26	\$69.48	
70546	99	\$69.48	
70547	TC	\$253.57	
70547	00	\$299.65	
70547	26	\$46.08	
70547	99	\$46.08	
70548	TC	\$293.35	
70548	00	\$339.73	
70548	26	\$46.37	
70548	99	\$46.37	
70549	TC	\$391.23	
70549	00	\$460.71	
70549	26	\$69.48	
70549	99	\$69.48	
70551	TC	\$252.97	
70551	00	\$309.88	
70551	26	\$56.90	
70551	99	\$56.90	
70552	TC	\$292.43	
70552	00	\$361.27	
70552	26	\$68.84	
70552	99	\$68.84	
70553	TC	\$384.13	
70553	00	\$475.02	
70553	26	\$90.89	
70553	99	\$90.89	
70554	TC	\$434.60	
70554	00	\$515.29	
70554	26	\$80.69	
70555	26	\$99.02	
70557	26	\$113.71	
70558	26	\$125.20	
70559	26	\$126.05	
71010	TC	\$12.35	
71010	00	\$19.33	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
71010	26	\$6.98	
71010	99	\$6.98	
71015	TC	\$14.94	
71015	00	\$22.84	
71015	26	\$7.90	
71015	99	\$7.90	
71020	TC	\$16.64	
71020	00	\$24.86	
71020	26	\$8.22	
71020	99	\$8.22	
71021	TC	\$20.23	
71021	00	\$30.63	
71021	26	\$10.40	
71021	99	\$10.40	
71022	TC	\$22.53	
71022	00	\$34.17	
71022	26	\$11.65	
71022	99	\$11.65	
71023	TC	\$32.02	
71023	00	\$46.74	
71023	26	\$14.72	
71023	99	\$14.72	
71030	TC	\$23.68	
71030	00	\$35.32	
71030	26	\$11.65	
71030	99	\$11.65	
71034	TC	\$49.10	
71034	00	\$67.66	
71034	26	\$18.56	
71034	99	\$18.56	
71035	TC	\$18.10	
71035	00	\$25.07	
71035	26	\$6.98	
71035	99	\$6.98	
71040	TC	\$49.10	
71040	00	\$71.00	
71040	26	\$21.89	
71040	99	\$21.89	
71060	TC	\$74.50	
71060	00	\$102.89	
71060	26	\$28.38	
71060	99	\$28.38	
71090	TC	\$37.50	
71090	00	\$69.00	
71090	26	\$22.53	
71090	99	\$22.53	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
71100	TC	\$16.64	
71100	00	\$24.86	
71100	26	\$8.22	
71100	99	\$8.22	
71101	TC	\$19.81	
71101	00	\$30.21	
71101	26	\$10.40	
71101	99	\$10.40	
71110	TC	\$21.66	
71110	00	\$32.06	
71110	26	\$10.40	
71110	99	\$10.40	
71111	TC	\$27.55	
71111	00	\$39.51	
71111	26	\$11.97	
71111	99	\$11.97	
71120	TC	\$18.08	
71120	00	\$25.98	
71120	26	\$7.90	
71120	99	\$7.90	
71130	TC	\$20.38	
71130	00	\$28.60	
71130	26	\$8.22	
71130	99	\$8.22	
71250	TC	\$141.10	
71250	00	\$185.62	
71250	26	\$44.52	
71250	99	\$44.52	
71260	TC	\$203.99	
71260	00	\$251.61	
71260	26	\$47.62	
71260	99	\$47.62	
71270	TC	\$239.59	
71270	00	\$292.94	
71270	26	\$53.35	
71270	99	\$53.35	
71275	TC	\$244.19	
71275	00	\$318.44	
71275	26	\$74.25	
71275	99	\$74.25	
71550	TC	\$254.96	
71550	00	\$311.13	
71550	26	\$56.16	
71550	99	\$56.16	
71551	TC	\$294.74	
71551	00	\$361.12	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
71551	26	\$66.38	
71551	99	\$66.38	
71552	TC	\$390.61	
71552	00	\$477.76	
71552	26	\$87.15	
71552	99	\$87.15	
71555	TC	\$292.89	
71555	00	\$362.95	
71555	26	\$70.06	
71555	99	\$70.06	
72010	TC	\$32.73	
72010	00	\$49.82	
72010	26	\$17.09	
72010	99	\$17.09	
72020	TC	\$12.35	
72020	00	\$18.08	
72020	26	\$5.73	
72020	99	\$5.73	
72040	TC	\$19.23	
72040	00	\$27.45	
72040	26	\$8.22	
72040	99	\$8.22	
72050	TC	\$27.55	
72050	00	\$39.19	
72050	26	\$11.65	
72050	99	\$11.65	
72052	TC	\$35.31	
72052	00	\$49.27	
72052	26	\$13.95	
72052	99	\$13.95	
72069	TC	\$16.95	
72069	00	\$25.46	
72069	26	\$8.51	
72069	99	\$8.51	
72070	TC	\$18.08	
72070	00	\$26.30	
72070	26	\$8.22	
72070	99	\$8.22	
72072	TC	\$21.08	
72072	00	\$29.32	
72072	26	\$8.22	
72072	99	\$8.22	
72074	TC	\$26.40	
72074	00	\$34.62	
72074	26	\$8.22	
72074	99	\$8.22	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
72080	TC	\$18.94	
72080	00	\$27.17	
72080	26	\$8.22	
72080	99	\$8.22	
72090	TC	\$23.26	
72090	00	\$34.26	
72090	26	\$11.00	
72090	99	\$11.00	
72100	TC	\$20.66	
72100	00	\$28.90	
72100	26	\$8.22	
72100	99	\$8.22	
72110	TC	\$28.70	
72110	00	\$40.35	
72110	26	\$11.65	
72110	99	\$11.65	
72114	TC	\$38.48	
72114	00	\$52.43	
72114	26	\$13.95	
72114	99	\$13.95	
72120	TC	\$27.84	
72120	00	\$36.06	
72120	26	\$8.22	
72120	99	\$8.22	
72125	TC	\$141.10	
72125	00	\$185.62	
72125	26	\$44.52	
72125	99	\$44.52	
72126	TC	\$203.99	
72126	00	\$250.68	
72126	26	\$46.70	
72126	99	\$46.70	
72127	TC	\$239.59	
72127	00	\$288.59	
72127	26	\$49.00	
72127	99	\$49.00	
72128	TC	\$141.10	
72128	00	\$185.62	
72128	26	\$44.52	
72128	99	\$44.52	
72129	TC	\$203.99	
72129	00	\$250.97	
72129	26	\$46.98	
72129	99	\$46.98	
72130	TC	\$239.59	
72130	00	\$288.59	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
72130	26	\$49.00	
72130	99	\$49.00	
72131	TC	\$141.10	
72131	00	\$185.62	
72131	26	\$44.52	
72131	99	\$44.52	
72132	TC	\$203.99	
72132	00	\$250.68	
72132	26	\$46.70	
72132	99	\$46.70	
72133	TC	\$239.59	
72133	00	\$288.59	
72133	26	\$49.00	
72133	99	\$49.00	
72141	TC	\$252.65	
72141	00	\$314.22	
72141	26	\$61.57	
72141	99	\$61.57	
72142	TC	\$292.43	
72142	00	\$366.39	
72142	26	\$73.96	
72142	99	\$73.96	
72146	TC	\$252.50	
72146	00	\$314.07	
72146	26	\$61.57	
72146	99	\$61.57	
72147	TC	\$291.82	
72147	00	\$365.78	
72147	26	\$73.96	
72147	99	\$73.96	
72148	TC	\$252.50	
72148	00	\$309.40	
72148	26	\$56.90	
72148	99	\$56.90	
72149	TC	\$292.43	
72149	00	\$361.27	
72149	26	\$68.84	
72149	99	\$68.84	
72156	TC	\$384.13	
72156	00	\$482.93	
72156	26	\$98.79	
72156	99	\$98.79	
72157	TC	\$383.67	
72157	00	\$482.46	
72157	26	\$98.79	
72157	99	\$98.79	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
72158	TC	\$384.13	
72158	00	\$475.02	
72158	26	\$90.89	
72158	99	\$90.89	
72159	TC	\$389.63	
72159	00	\$457.65	
72159	26	\$68.02	
72159	99	\$68.02	
72170	TC	\$14.07	
72170	00	\$20.73	
72170	26	\$6.66	
72170	99	\$6.66	
72190	TC	\$21.24	
72190	00	\$29.15	
72190	26	\$7.90	
72190	99	\$7.90	
72191	TC	\$244.03	
72191	00	\$314.08	
72191	26	\$70.06	
72191	99	\$70.06	
72192	TC	\$140.95	
72192	00	\$182.97	
72192	26	\$42.03	
72192	99	\$42.03	
72193	TC	\$204.12	
72193	00	\$248.93	
72193	26	\$44.81	
72193	99	\$44.81	
72194	TC	\$239.90	
72194	00	\$286.59	
72194	26	\$46.70	
72194	99	\$46.70	
72195	TC	\$254.65	
72195	00	\$310.82	
72195	26	\$56.16	
72195	99	\$56.16	
72196	TC	\$294.28	
72196	00	\$360.95	
72196	26	\$66.66	
72196	99	\$66.66	
72197	TC	\$387.99	
72197	00	\$474.85	
72197	26	\$86.86	
72197	99	\$86.86	
72198	TC	\$292.89	
72198	00	\$362.38	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
72198	26	\$69.48	
72198	99	\$69.48	
72200	TC	\$15.51	
72200	00	\$22.17	
72200	26	\$6.66	
72200	99	\$6.66	
72202	TC	\$19.23	
72202	00	\$26.53	
72202	26	\$7.30	
72202	99	\$7.30	
72220	TC	\$16.35	
72220	00	\$23.01	
72220	26	\$6.66	
72220	99	\$6.66	
72240	TC	\$104.00	
72240	00	\$138.76	
72240	26	\$34.76	
72240	99	\$34.76	
72255	TC	\$93.53	
72255	00	\$127.71	
72255	26	\$34.18	
72255	99	\$34.18	
72265	TC	\$93.82	
72265	00	\$125.48	
72265	26	\$31.65	
72265	99	\$31.65	
72270	TC	\$143.04	
72270	00	\$194.21	
72270	26	\$51.17	
72270	99	\$51.17	
72275	TC	\$55.28	
72275	00	\$83.00	
72275	26	\$27.72	
72275	99	\$27.72	
72285	TC	\$142.64	
72285	00	\$185.70	
72285	26	\$43.06	
72285	99	\$43.06	
72291	26	\$51.64	
72292	26	\$54.06	
72295	TC	\$135.91	
72295	00	\$167.55	
72295	26	\$31.63	
72295	99	\$31.63	
73000	TC	\$14.94	
73000	00	\$20.98	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73000	26	\$6.05	
73000	99	\$6.05	
73010	TC	\$15.22	
73010	00	\$21.88	
73010	26	\$6.66	
73010	99	\$6.66	
73020	TC	\$12.63	
73020	00	\$18.36	
73020	26	\$5.73	
73020	99	\$5.73	
73030	TC	\$16.07	
73030	00	\$23.04	
73030	26	\$6.98	
73030	99	\$6.98	
73040	TC	\$61.43	
73040	00	\$82.51	
73040	26	\$21.09	
73040	99	\$21.09	
73050	TC	\$19.51	
73050	00	\$27.43	
73050	26	\$7.90	
73050	99	\$7.90	
73060	TC	\$16.07	
73060	00	\$22.72	
73060	26	\$6.66	
73060	99	\$6.66	
73070	TC	\$14.94	
73070	00	\$20.66	
73070	26	\$5.73	
73070	99	\$5.73	
73080	TC	\$18.66	
73080	00	\$25.31	
73080	26	\$6.66	
73080	99	\$6.66	
73085	TC	\$55.68	
73085	00	\$76.76	
73085	26	\$21.09	
73085	99	\$21.09	
73090	TC	\$14.94	
73090	00	\$20.98	
73090	26	\$6.05	
73090	99	\$6.05	
73092	TC	\$14.94	
73092	00	\$20.98	
73092	26	\$6.05	
73092	99	\$6.05	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73100	TC	\$15.22	
73100	00	\$21.28	
73100	26	\$6.05	
73100	99	\$6.05	
73110	TC	\$18.10	
73110	00	\$24.75	
73110	26	\$6.66	
73110	99	\$6.66	
73115	TC	\$54.84	
73115	00	\$75.63	
73115	26	\$20.80	
73115	99	\$20.80	
73120	TC	\$14.65	
73120	00	\$20.70	
73120	26	\$6.05	
73120	99	\$6.05	
73130	TC	\$16.66	
73130	00	\$23.32	
73130	26	\$6.66	
73130	99	\$6.66	
73140	TC	\$15.51	
73140	00	\$20.31	
73140	26	\$4.80	
73140	99	\$4.80	
73200	TC	\$141.57	
73200	00	\$183.59	
73200	26	\$42.03	
73200	99	\$42.03	
73201	TC	\$197.13	
73201	00	\$241.64	
73201	26	\$44.52	
73201	99	\$44.52	
73202	TC	\$240.36	
73202	00	\$287.05	
73202	26	\$46.70	
73202	99	\$46.70	
73206	TC	\$243.72	
73206	00	\$313.77	
73206	26	\$70.06	
73206	99	\$70.06	
73218	TC	\$255.27	
73218	00	\$307.08	
73218	26	\$51.81	
73218	99	\$51.81	
73219	TC	\$294.74	
73219	00	\$357.24	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73219	26	\$62.50	
73219	99	\$62.50	
73220	TC	\$388.61	
73220	00	\$471.40	
73220	26	\$82.80	
73220	99	\$82.80	
73221	TC	\$255.12	
73221	00	\$306.93	
73221	26	\$51.81	
73221	99	\$51.81	
73222	TC	\$294.59	
73222	00	\$357.09	
73222	26	\$62.50	
73222	99	\$62.50	
73223	TC	\$388.45	
73223	00	\$470.96	
73223	26	\$82.51	
73223	99	\$82.51	
73225	TC	\$371.12	
73225	00	\$436.33	
73225	26	\$65.20	
73225	99	\$65.20	
73500	TC	\$13.21	
73500	00	\$19.87	
73500	26	\$6.66	
73500	99	\$6.66	
73510	TC	\$18.94	
73510	00	\$26.85	
73510	26	\$7.90	
73510	99	\$7.90	
73520	TC	\$20.09	
73520	00	\$30.17	
73520	26	\$10.08	
73520	99	\$10.08	
73525	TC	\$55.68	
73525	00	\$76.61	
73525	26	\$20.93	
73525	99	\$20.93	
73530	TC	\$3.00	
73530	00	\$26.25	
73530	26	\$11.33	
73530	99	\$11.33	
73540	TC	\$19.23	
73540	00	\$27.13	
73540	26	\$7.90	
73540	99	\$7.90	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73542	TC	\$46.18	
73542	00	\$67.54	
73542	26	\$21.35	
73542	99	\$21.35	
73550	TC	\$15.78	
73550	00	\$22.44	
73550	26	\$6.66	
73550	99	\$6.66	
73560	TC	\$15.22	
73560	00	\$21.88	
73560	26	\$6.66	
73560	99	\$6.66	
73562	TC	\$18.36	
73562	00	\$25.34	
73562	26	\$6.98	
73562	99	\$6.98	
73564	TC	\$20.66	
73564	00	\$28.90	
73564	26	\$8.22	
73564	99	\$8.22	
73565	TC	\$15.80	
73565	00	\$22.45	
73565	26	\$6.66	
73565	99	\$6.66	
73580	TC	\$73.77	
73580	00	\$94.71	
73580	26	\$20.93	
73580	99	\$20.93	
73590	TC	\$14.65	
73590	00	\$21.30	
73590	26	\$6.66	
73590	99	\$6.66	
73592	TC	\$14.94	
73592	00	\$20.98	
73592	26	\$6.05	
73592	99	\$6.05	
73600	TC	\$14.65	
73600	00	\$20.70	
73600	26	\$6.05	
73600	99	\$6.05	
73610	TC	\$16.66	
73610	00	\$23.32	
73610	26	\$6.66	
73610	99	\$6.66	
73615	TC	\$57.98	
73615	00	\$78.91	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73615	26	\$20.93	
73615	99	\$20.93	
73620	TC	\$14.36	
73620	00	\$20.41	
73620	26	\$6.05	
73620	99	\$6.05	
73630	TC	\$16.66	
73630	00	\$23.32	
73630	26	\$6.66	
73630	99	\$6.66	
73650	TC	\$14.07	
73650	00	\$20.13	
73650	26	\$6.05	
73650	99	\$6.05	
73660	TC	\$14.94	
73660	00	\$19.74	
73660	26	\$4.80	
73660	99	\$4.80	
73700	TC	\$141.57	
73700	00	\$183.59	
73700	26	\$42.03	
73700	99	\$42.03	
73701	TC	\$197.99	
73701	00	\$242.79	
73701	26	\$44.81	
73701	99	\$44.81	
73702	TC	\$240.36	
73702	00	\$287.34	
73702	26	\$46.98	
73702	99	\$46.98	
73706	TC	\$244.03	
73706	00	\$317.80	
73706	26	\$73.77	
73706	99	\$73.77	
73718	TC	\$255.27	
73718	00	\$307.08	
73718	26	\$51.81	
73718	99	\$51.81	
73719	TC	\$294.74	
73719	00	\$357.24	
73719	26	\$62.50	
73719	99	\$62.50	
73720	TC	\$388.61	
73720	00	\$471.11	
73720	26	\$82.51	
73720	99	\$82.51	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
73721	TC	\$255.12	
73721	00	\$306.93	
73721	26	\$51.81	
73721	99	\$51.81	
73722	TC	\$294.59	
73722	00	\$357.09	
73722	26	\$62.50	
73722	99	\$62.50	
73723	TC	\$388.45	
73723	00	\$471.25	
73723	26	\$82.80	
73723	99	\$82.80	
73725	TC	\$292.89	
73725	00	\$362.98	
73725	26	\$70.09	
73725	99	\$70.09	
74000	TC	\$13.50	
74000	00	\$20.48	
74000	26	\$6.98	
74000	99	\$6.98	
74010	TC	\$18.94	
74010	00	\$27.77	
74010	26	\$8.84	
74010	99	\$8.84	
74020	TC	\$19.81	
74020	00	\$30.21	
74020	26	\$10.40	
74020	99	\$10.40	
74022	TC	\$23.68	
74022	00	\$35.94	
74022	26	\$12.26	
74022	99	\$12.26	
74150	TC	\$140.82	
74150	00	\$186.87	
74150	26	\$46.05	
74150	99	\$46.05	
74160	TC	\$204.58	
74160	00	\$253.87	
74160	26	\$49.29	
74160	99	\$49.29	
74170	TC	\$240.52	
74170	00	\$294.47	
74170	26	\$53.96	
74170	99	\$53.96	
74175	TC	\$244.19	
74175	00	\$317.38	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
74175	26	\$73.19	
74175	99	\$73.19	
74181	TC	\$254.19	
74181	00	\$310.64	
74181	26	\$56.46	
74181	99	\$56.46	
74182	TC	\$294.59	
74182	00	\$361.25	
74182	26	\$66.66	
74182	99	\$66.66	
74183	TC	\$387.99	
74183	00	\$474.85	
74183	26	\$86.86	
74183	99	\$86.86	
74185	TC	\$292.89	
74185	00	\$362.38	
74185	26	\$69.48	
74185	99	\$69.48	
74190	TC	\$36.00	
74190	00	\$54.75	
74190	26	\$18.30	
74190	99	\$18.30	
74210	TC	\$41.64	
74210	00	\$55.60	
74210	26	\$13.95	
74210	99	\$13.95	
74220	TC	\$44.52	
74220	00	\$62.50	
74220	26	\$17.98	
74220	99	\$17.98	
74230	TC	\$45.23	
74230	00	\$65.70	
74230	26	\$20.48	
74230	99	\$20.48	
74235	26	\$46.63	
74235	99	\$46.63	
74240	TC	\$51.69	
74240	00	\$78.51	
74240	26	\$26.82	
74240	99	\$26.82	
74241	TC	\$56.00	
74241	00	\$82.53	
74241	26	\$26.53	
74241	99	\$26.53	
74245	TC	\$88.31	
74245	00	\$123.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
74245	26	\$35.04	
74245	99	\$35.04	
74246	TC	\$61.73	
74246	00	\$88.55	
74246	26	\$26.82	
74246	99	\$26.82	
74247	TC	\$64.90	
74247	00	\$91.72	
74247	26	\$26.82	
74247	99	\$26.82	
74249	TC	\$96.78	
74249	00	\$131.83	
74249	26	\$35.04	
74249	99	\$35.04	
74250	TC	\$53.00	
74250	00	\$70.98	
74250	26	\$17.98	
74250	99	\$17.98	
74251	TC	\$106.23	
74251	00	\$133.04	
74251	26	\$26.82	
74251	99	\$26.82	
74260	TC	\$66.11	
74260	00	\$85.34	
74260	26	\$19.24	
74260	99	\$19.24	
74270	TC	\$65.18	
74270	00	\$92.01	
74270	26	\$26.82	
74270	99	\$26.82	
74280	TC	\$100.10	
74280	00	\$137.96	
74280	26	\$37.86	
74280	99	\$37.86	
74283	TC	\$64.75	
74283	00	\$142.16	
74283	26	\$77.42	
74283	99	\$77.42	
74290	TC	\$32.31	
74290	00	\$44.56	
74290	26	\$12.26	
74290	99	\$12.26	
74291	TC	\$27.59	
74291	00	\$35.50	
74291	26	\$7.90	
74291	99	\$7.90	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
74300	TC	\$41.25	
74300	00	\$70.50	
74300	26	\$13.95	
74300	99	\$13.95	
74301	26	\$7.90	
74301	99	\$7.90	
74305	TC	\$29.25	
74305	00	\$63.75	
74305	26	\$16.42	
74305	99	\$16.42	
74320	TC	\$75.32	
74320	00	\$96.42	
74320	26	\$21.09	
74320	99	\$21.09	
74327	TC	\$65.90	
74327	00	\$93.03	
74327	26	\$27.14	
74327	99	\$27.14	
74328	TC	\$69.75	
74328	00	\$115.50	
74328	26	\$27.43	
74328	99	\$27.43	
74329	26	\$27.43	
74329	99	\$27.43	
74330	TC	\$69.00	
74330	00	\$123.00	
74330	26	\$34.73	
74330	99	\$34.73	
74340	TC	\$48.75	
74340	00	\$94.50	
74340	26	\$21.09	
74340	99	\$21.09	
74355	TC	\$72.75	
74355	00	\$103.50	
74355	26	\$29.32	
74355	99	\$29.32	
74360	TC	\$66.75	
74360	00	\$108.75	
74360	26	\$21.66	
74360	99	\$21.66	
74363	26	\$33.79	
74363	99	\$33.79	
74400	TC	\$60.43	
74400	00	\$79.35	
74400	26	\$18.92	
74400	99	\$18.92	

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 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
74410	TC	\$65.60	
74410	00	\$84.52	
74410	26	\$18.92	
74410	99	\$18.92	
74415	TC	\$76.67	
74415	00	\$95.58	
74415	26	\$18.92	
74415	99	\$18.92	
74420	TC	\$57.75	
74420	00	\$87.00	
74420	26	\$14.25	
74420	99	\$14.25	
74425	TC	\$21.75	
74425	00	\$50.25	
74425	26	\$14.25	
74425	99	\$14.25	
74430	TC	\$42.50	
74430	00	\$54.89	
74430	26	\$12.39	
74430	99	\$12.39	
74440	TC	\$45.39	
74440	00	\$59.94	
74440	26	\$14.57	
74440	99	\$14.57	
74445	TC	\$31.50	
74445	00	\$77.25	
74445	26	\$44.72	
74445	99	\$44.72	
74450	TC	\$36.00	
74450	00	\$63.00	
74450	26	\$12.99	
74450	99	\$12.99	
74455	TC	\$53.68	
74455	00	\$66.68	
74455	26	\$12.99	
74455	99	\$12.99	
74470	TC	\$24.75	
74470	00	\$56.25	
74470	26	\$20.80	
74470	99	\$20.80	
74475	TC	\$89.22	
74475	00	\$110.31	
74475	26	\$21.09	
74475	99	\$21.09	
74480	TC	\$89.22	
74480	00	\$110.31	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
74480	26	\$21.09	
74480	99	\$21.09	
74485	TC	\$77.34	
74485	00	\$98.56	
74485	26	\$21.22	
74485	99	\$21.22	
74710	TC	\$23.52	
74710	00	\$36.55	
74710	26	\$13.03	
74710	99	\$13.03	
74740	FP	\$57.78	
74740	TC	\$43.21	
74740	00	\$57.78	
74740	26	\$14.57	
74740	99	\$14.57	
74775	TC	\$40.50	
74775	00	\$65.25	
74775	26	\$24.03	
74775	99	\$24.03	
75557	00	\$343.23	
75559	00	\$373.23	
75561	00	\$488.47	
75563	00	\$512.05	
75600	TC	\$279.03	
75600	00	\$299.38	
75600	26	\$20.35	
75600	99	\$20.35	
75605	TC	\$234.17	
75605	00	\$279.48	
75605	26	\$45.32	
75605	99	\$45.32	
75625	TC	\$232.15	
75625	00	\$276.45	
75625	26	\$44.30	
75625	99	\$44.30	
75630	TC	\$242.17	
75630	00	\$313.18	
75630	26	\$71.00	
75630	99	\$71.00	
75635	TC	\$244.67	
75635	00	\$338.09	
75635	26	\$93.42	
75635	99	\$93.42	
75650	TC	\$232.44	
75650	00	\$290.53	
75650	26	\$58.09	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75650	99	\$58.09	
75658	TC	\$237.33	
75658	00	\$288.29	
75658	26	\$50.95	
75658	99	\$50.95	
75660	TC	\$238.77	
75660	00	\$289.88	
75660	26	\$51.11	
75660	99	\$51.11	
75662	TC	\$252.00	
75662	00	\$318.20	
75662	26	\$66.21	
75662	99	\$66.21	
75665	TC	\$242.21	
75665	00	\$293.44	
75665	26	\$51.22	
75665	99	\$51.22	
75671	TC	\$254.29	
75671	00	\$318.91	
75671	26	\$64.61	
75671	99	\$64.61	
75676	TC	\$238.77	
75676	00	\$289.72	
75676	26	\$50.95	
75676	99	\$50.95	
75680	TC	\$246.82	
75680	00	\$311.72	
75680	26	\$64.90	
75680	99	\$64.90	
75685	TC	\$238.77	
75685	00	\$289.88	
75685	26	\$51.11	
75685	99	\$51.11	
75705	TC	\$238.48	
75705	00	\$323.50	
75705	26	\$85.02	
75705	99	\$85.02	
75710	TC	\$240.78	
75710	00	\$285.50	
75710	26	\$44.72	
75710	99	\$44.72	
75716	TC	\$253.72	
75716	00	\$304.68	
75716	26	\$50.95	
75716	99	\$50.95	
75722	TC	\$238.48	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75722	00	\$283.79	
75722	26	\$45.32	
75722	99	\$45.32	
75724	TC	\$253.15	
75724	00	\$314.42	
75724	26	\$61.27	
75724	99	\$61.27	
75726	TC	\$238.19	
75726	00	\$282.07	
75726	26	\$43.87	
75726	99	\$43.87	
75731	TC	\$241.64	
75731	00	\$287.09	
75731	26	\$45.45	
75731	99	\$45.45	
75733	TC	\$259.19	
75733	00	\$312.60	
75733	26	\$53.42	
75733	99	\$53.42	
75736	TC	\$239.63	
75736	00	\$284.21	
75736	26	\$44.59	
75736	99	\$44.59	
75741	TC	\$228.70	
75741	00	\$279.52	
75741	26	\$50.82	
75741	99	\$50.82	
75743	TC	\$232.44	
75743	00	\$296.76	
75743	26	\$64.33	
75743	99	\$64.33	
75746	TC	\$235.02	
75746	00	\$278.91	
75746	26	\$43.87	
75746	99	\$43.87	
75756	TC	\$244.23	
75756	00	\$291.43	
75756	26	\$47.19	
75756	99	\$47.19	
75774	TC	\$224.10	
75774	00	\$238.34	
75774	26	\$14.25	
75774	99	\$14.25	
75790	TC	\$56.87	
75790	00	\$127.15	
75790	26	\$70.28	

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 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75790	99	\$70.28	
75801	TC	\$150.00	
75801	00	\$183.00	
75801	26	\$30.97	
75801	99	\$30.97	
75803	TC	\$101.25	
75803	00	\$197.25	
75803	26	\$44.84	
75803	99	\$44.84	
75805	TC	\$134.25	
75805	00	\$201.75	
75805	26	\$31.15	
75805	99	\$31.15	
75807	26	\$44.84	
75807	99	\$44.84	
75809	TC	\$40.65	
75809	00	\$58.35	
75809	26	\$17.70	
75809	99	\$17.70	
75810	TC	\$349.50	
75810	00	\$395.25	
75810	26	\$43.59	
75810	99	\$43.59	
75820	TC	\$53.43	
75820	00	\$81.15	
75820	26	\$27.71	
75820	99	\$27.71	
75822	TC	\$62.61	
75822	00	\$103.40	
75822	26	\$40.77	
75822	99	\$40.77	
75825	TC	\$226.68	
75825	00	\$270.54	
75825	26	\$43.86	
75825	99	\$43.86	
75827	TC	\$227.26	
75827	00	\$270.56	
75827	26	\$43.30	
75827	99	\$43.30	
75831	TC	\$228.41	
75831	00	\$271.85	
75831	26	\$43.44	
75831	99	\$43.44	
75833	TC	\$235.60	
75833	00	\$293.09	
75833	26	\$57.49	

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 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75833	99	\$57.49	
75840	TC	\$227.55	
75840	00	\$271.12	
75840	26	\$43.57	
75840	99	\$43.57	
75842	TC	\$236.17	
75842	00	\$293.69	
75842	26	\$57.51	
75842	99	\$57.51	
75860	TC	\$231.87	
75860	00	\$277.05	
75860	26	\$45.18	
75860	99	\$45.18	
75870	TC	\$231.58	
75870	00	\$275.74	
75870	26	\$44.17	
75870	99	\$44.17	
75872	TC	\$241.93	
75872	00	\$287.58	
75872	26	\$45.65	
75872	99	\$45.65	
75880	TC	\$56.88	
75880	00	\$84.31	
75880	26	\$27.43	
75880	99	\$27.43	
75885	TC	\$228.41	
75885	00	\$283.94	
75885	26	\$55.52	
75885	99	\$55.52	
75887	TC	\$231.00	
75887	00	\$287.39	
75887	26	\$56.39	
75887	99	\$56.39	
75889	TC	\$228.41	
75889	00	\$272.29	
75889	26	\$43.87	
75889	99	\$43.87	
75891	TC	\$228.13	
75891	00	\$272.00	
75891	26	\$43.87	
75891	99	\$43.87	
75893	TC	\$228.41	
75893	00	\$249.50	
75893	26	\$21.09	
75893	99	\$21.09	
75894	TC	\$613.50	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75894	00	\$721.50	
75894	26	\$50.52	
75894	99	\$50.52	
75896	TC	\$540.00	
75896	00	\$634.50	
75896	26	\$51.27	
75896	99	\$51.27	
75898	TC	\$7.50	
75898	00	\$121.50	
75898	26	\$64.29	
75898	99	\$64.29	
75900	26	\$18.76	
75900	99	\$18.76	
75901	TC	\$87.01	
75901	00	\$105.92	
75901	26	\$18.92	
75901	99	\$18.92	
75902	TC	\$51.34	
75902	00	\$66.23	
75902	26	\$14.88	
75902	99	\$14.88	
75940	TC	\$326.25	
75940	00	\$370.50	
75940	26	\$21.07	
75940	99	\$21.07	
75945	26	\$15.76	
75946	26	\$15.61	
75946	99	\$15.61	
75952	26	\$172.09	
75953	26	\$52.21	
75954	26	\$85.48	
75954	99	\$85.48	
75957	26	\$233.45	
75958	26	\$155.21	
75959	26	\$135.86	
75960	TC	\$259.06	
75960	00	\$291.40	
75960	26	\$32.33	
75960	99	\$32.33	
75961	TC	\$204.36	
75961	00	\$367.51	
75961	26	\$163.15	
75961	99	\$163.15	
75962	TC	\$285.17	
75962	00	\$306.40	
75962	26	\$21.22	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
75962	99	\$21.22	
75964	TC	\$158.46	
75964	00	\$172.55	
75964	26	\$14.09	
75964	99	\$14.09	
75966	TC	\$289.49	
75966	00	\$341.75	
75966	26	\$52.26	
75966	99	\$52.26	
75968	TC	\$158.75	
75968	00	\$173.28	
75968	26	\$14.53	
75968	99	\$14.53	
75970	TC	\$319.50	
75970	00	\$353.25	
75970	26	\$32.23	
75970	99	\$32.23	
75978	00	\$302.81	
75978	26	\$20.80	
75978	99	\$20.80	
75980	TC	\$117.75	
75980	00	\$207.75	
75980	26	\$55.81	
75980	99	\$55.81	
75982	26	\$55.81	
75982	99	\$55.81	
75984	TC	\$58.99	
75984	00	\$86.45	
75984	26	\$27.46	
75984	99	\$27.46	
75989	TC	\$73.89	
75989	00	\$119.94	
75989	26	\$46.05	
75989	99	\$46.05	
75992	TC	\$436.50	
75992	00	\$458.25	
75992	26	\$21.80	
75992	99	\$21.80	
75993	26	\$14.25	
75993	99	\$14.25	
75994	26	\$52.11	
75994	99	\$52.11	
75995	26	\$50.98	
75995	99	\$50.98	
75996	26	\$13.95	
75996	99	\$13.95	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76000	TC	\$58.74	
76000	00	\$65.12	
76000	26	\$6.37	
76000	99	\$6.37	
76001	00	\$99.75	
76001	26	\$26.16	
76001	99	\$26.16	
76010	TC	\$14.65	
76010	00	\$21.62	
76010	26	\$6.98	
76010	99	\$6.98	
76080	TC	\$28.70	
76080	00	\$49.79	
76080	26	\$21.09	
76080	99	\$21.09	
76098	TC	\$10.05	
76098	00	\$16.09	
76098	26	\$6.05	
76098	99	\$6.05	
76100	TC	\$54.87	
76100	00	\$77.34	
76100	26	\$22.47	
76100	99	\$22.47	
76101	TC	\$97.42	
76101	00	\$119.60	
76101	26	\$22.18	
76101	99	\$22.18	
76102	TC	\$127.31	
76102	00	\$149.20	
76102	26	\$21.89	
76102	99	\$21.89	
76120	TC	\$41.07	
76120	00	\$55.63	
76120	26	\$14.57	
76120	99	\$14.57	
76125	TC	\$22.50	
76125	00	\$33.00	
76125	26	\$10.98	
76125	99	\$10.98	
76150	00	\$16.09	
76350	00	\$165.00	
76376	TC	\$69.52	
76376	00	\$77.56	
76376	26	\$8.04	
76377	TC	\$69.43	
76377	00	\$100.66	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76377	26	\$31.23	
76380	TC	\$74.37	
76380	00	\$111.90	
76380	26	\$37.54	
76380	99	\$37.54	
76496	00	M	
76497	TC	M	
76497	00	M	
76497	26	M	
76498	00	M	
76499	TC	M	
76499	00	M	
76499	26	M	
76499	99	M	
76506	TC	\$45.09	
76506	00	\$69.82	
76506	26	\$24.72	
76506	99	\$24.72	
76510	TC	\$56.73	
76510	00	\$118.19	
76510	26	\$61.45	
76510	99	\$61.45	
76511	TC	\$44.94	
76511	00	\$82.24	
76511	26	\$37.31	
76511	99	\$37.31	
76512	TC	\$39.30	
76512	00	\$76.76	
76512	26	\$37.46	
76512	99	\$37.46	
76513	TC	\$41.89	
76513	00	\$68.19	
76513	26	\$26.30	
76513	99	\$26.30	
76514	TC	\$2.44	
76514	00	\$9.38	
76514	26	\$6.95	
76516	TC	\$32.58	
76516	00	\$54.10	
76516	26	\$21.53	
76516	99	\$21.53	
76519	TC	\$35.45	
76519	00	\$57.26	
76519	26	\$21.81	
76519	99	\$21.81	
76529	TC	\$30.98	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76529	00	\$53.57	
76529	26	\$22.59	
76529	99	\$22.59	
76536	TC	\$57.44	
76536	00	\$78.56	
76536	26	\$21.12	
76536	99	\$21.12	
76604	TC	\$43.21	
76604	00	\$64.30	
76604	26	\$21.09	
76604	99	\$21.09	
76645	TC	\$43.65	
76645	00	\$64.45	
76645	26	\$20.80	
76645	99	\$20.80	
76700	TC	\$69.34	
76700	00	\$100.36	
76700	26	\$31.01	
76700	99	\$31.01	
76705	TC	\$52.26	
76705	00	\$75.05	
76705	26	\$22.79	
76705	99	\$22.79	
76770	TC	\$68.19	
76770	00	\$96.58	
76770	26	\$28.38	
76770	99	\$28.38	
76775	TC	\$53.13	
76775	00	\$75.59	
76775	26	\$22.47	
76775	99	\$22.47	
76776	TC	\$75.38	
76776	00	\$104.70	
76776	26	\$29.32	
76800	TC	\$50.53	
76800	00	\$92.11	
76800	26	\$41.58	
76800	99	\$41.58	
76801	TC	\$62.87	
76801	00	\$100.44	
76801	26	\$37.57	
76801	99	\$37.57	
76802	TC	\$26.91	
76802	00	\$58.85	
76802	26	\$31.95	
76802	99	\$31.95	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76805	TC	\$70.63	
76805	00	\$108.20	
76805	26	\$37.57	
76805	99	\$37.57	
76810	TC	\$37.45	
76810	00	\$74.70	
76810	26	\$37.25	
76810	99	\$37.25	
76811	TC	\$92.59	
76811	00	\$165.06	
76811	26	\$72.46	
76811	99	\$72.46	
76812	TC	\$42.16	
76812	00	\$110.14	
76812	26	\$67.98	
76812	99	\$67.98	
76813	TC	\$53.93	
76813	00	\$99.37	
76813	26	\$45.44	
76814	TC	\$26.60	
76814	00	\$63.45	
76814	26	\$36.84	
76815	TC	\$44.49	
76815	00	\$69.17	
76815	26	\$24.68	
76815	99	\$24.68	
76816	TC	\$45.09	
76816	00	\$77.67	
76816	26	\$32.58	
76816	99	\$32.58	
76817	TC	\$45.09	
76817	00	\$73.51	
76817	26	\$28.42	
76817	99	\$28.42	
76818	TC	\$51.95	
76818	00	\$92.12	
76818	26	\$40.17	
76818	99	\$40.17	
76819	TC	\$44.48	
76819	00	\$74.11	
76819	26	\$29.64	
76819	99	\$29.64	
76820	TC	\$30.65	
76820	00	\$50.01	
76820	26	\$19.37	
76820	99	\$19.37	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76821	TC	\$48.77	
76821	00	\$75.91	
76821	26	\$27.14	
76821	99	\$27.14	
76825	TC	\$71.09	
76825	00	\$134.87	
76825	26	\$63.78	
76825	99	\$63.78	
76826	TC	\$45.25	
76826	00	\$76.77	
76826	26	\$31.52	
76826	99	\$31.52	
76827	TC	\$39.28	
76827	00	\$61.33	
76827	26	\$22.05	
76827	99	\$22.05	
76828	TC	\$23.79	
76828	00	\$45.33	
76828	26	\$21.54	
76828	99	\$21.54	
76830	TC	\$59.72	
76830	00	\$86.25	
76830	26	\$26.53	
76830	99	\$26.53	
76831	TC	\$59.43	
76831	00	\$86.60	
76831	26	\$27.17	
76831	99	\$27.17	
76856	TC	\$60.01	
76856	00	\$86.54	
76856	26	\$26.53	
76856	99	\$26.53	
76857	FP	\$59.81	
76857	TC	\$45.25	
76857	00	\$59.81	
76857	26	\$14.57	
76857	99	\$14.57	
76870	TC	\$60.58	
76870	00	\$85.23	
76870	26	\$24.65	
76870	99	\$24.65	
76872	TC	\$71.09	
76872	00	\$98.04	
76872	26	\$26.96	
76872	99	\$26.96	
76873	TC	\$70.17	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76873	00	\$129.83	
76873	26	\$59.67	
76873	99	\$59.67	
76880	TC	\$64.63	
76880	00	\$87.13	
76880	26	\$22.50	
76880	99	\$22.50	
76885	TC	\$44.94	
76885	00	\$73.04	
76885	26	\$28.10	
76885	99	\$28.10	
76886	TC	\$44.94	
76886	00	\$68.97	
76886	26	\$24.03	
76886	99	\$24.03	
76930	TC	\$48.22	
76930	00	\$75.70	
76930	26	\$27.48	
76930	99	\$27.48	
76932	TC	\$42.75	
76932	00	\$70.50	
76932	26	\$27.77	
76932	99	\$27.77	
76936	TC	\$173.08	
76936	00	\$250.65	
76936	26	\$77.57	
76936	99	\$77.57	
76937	TC	\$14.28	
76937	00	\$25.87	
76937	26	\$11.59	
76940	TC	\$69.75	
76940	00	\$143.25	
76940	26	\$79.14	
76941	TC	\$42.00	
76941	00	\$96.75	
76941	26	\$51.06	
76941	99	\$51.06	
76942	TC	\$107.18	
76942	00	\$133.07	
76942	26	\$25.89	
76942	99	\$25.89	
76945	TC	\$51.00	
76945	00	\$86.25	
76945	26	\$25.32	
76945	99	\$25.32	
76946	TC	\$28.08	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
76946	00	\$42.36	
76946	26	\$14.28	
76946	99	\$14.28	
76950	TC	\$34.30	
76950	00	\$56.48	
76950	26	\$22.18	
76950	99	\$22.18	
76965	TC	\$94.18	
76965	00	\$146.23	
76965	26	\$52.05	
76965	99	\$52.05	
76970	TC	\$42.79	
76970	00	\$57.71	
76970	26	\$14.92	
76970	99	\$14.92	
76975	TC	\$42.75	
76975	00	\$75.00	
76975	26	\$31.59	
76975	99	\$31.59	
76977	TC	\$13.89	
76977	00	\$15.88	
76977	26	\$1.99	
76977	99	\$1.99	
76998	26	\$46.58	
76999	TC	M	
76999	00	M	
76999	26	M	
76999	99	M	
77001	TC	\$57.42	
77001	00	\$71.85	
77001	26	\$14.43	
77002	TC	\$35.16	
77002	00	\$55.39	
77002	26	\$20.23	
77003	TC	\$28.54	
77003	00	\$50.22	
77003	26	\$21.67	
77011	TC	\$410.28	
77011	00	\$456.68	
77011	26	\$46.40	
77012	TC	\$152.00	
77012	00	\$196.80	
77012	26	\$44.81	
77013	26	\$153.81	
77014	TC	\$105.10	
77014	00	\$137.68	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
77014	26	\$32.58	
77021	TC	\$300.71	
77021	00	\$358.81	
77021	26	\$58.10	
77022	26	\$164.24	
77031	TC	\$127.18	
77031	00	\$188.41	
77031	26	\$61.24	
77032	TC	\$29.12	
77032	00	\$50.53	
77032	26	\$21.41	
77051	TC	\$8.76	
77051	00	\$11.07	
77051	26	\$2.31	
77052	TC	\$8.76	
77052	00	\$11.07	
77052	26	\$2.31	
77053	TC	\$55.65	
77053	00	\$69.61	
77053	26	\$13.95	
77054	TC	\$77.03	
77054	00	\$94.41	
77054	26	\$17.38	
77055	TC	\$35.89	
77055	00	\$63.03	
77055	26	\$27.14	
77056	TC	\$46.09	
77056	00	\$79.60	
77056	26	\$33.51	
77057	TC	\$36.02	
77057	00	\$63.16	
77057	26	\$27.14	
77058	TC	\$569.10	
77058	00	\$631.92	
77058	26	\$62.82	
77059	TC	\$662.82	
77059	00	\$725.64	
77059	26	\$62.82	
77071	00	\$26.12	
77072	TC	\$10.62	
77072	00	\$17.92	
77072	26	\$7.30	
77073	TC	\$20.23	
77073	00	\$30.91	
77073	26	\$10.68	
77074	TC	\$33.59	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
77074	00	\$51.26	
77074	26	\$17.67	
77075	TC	\$51.98	
77075	00	\$73.06	
77075	26	\$21.09	
77076	TC	\$32.74	
77076	00	\$59.60	
77076	26	\$26.85	
77077	TC	\$24.67	
77077	00	\$36.46	
77077	26	\$11.79	
77078	TC	\$53.70	
77078	00	\$63.18	
77078	26	\$9.48	
77079	TC	\$53.88	
77079	00	\$62.10	
77079	26	\$8.22	
77080	TC	\$52.49	
77080	00	\$60.68	
77080	26	\$8.19	
77081	TC	\$17.35	
77081	00	\$25.58	
77081	26	\$8.22	
77082	TC	\$18.21	
77082	00	\$24.58	
77082	26	\$6.37	
77084	TC	\$229.13	
77084	00	\$290.13	
77084	26	\$61.00	
77261	00	\$54.06	
77262	00	\$81.68	
77263	00	\$121.53	
77280	TC	\$112.85	
77280	00	\$139.83	
77280	26	\$26.98	
77280	99	\$26.98	
77285	TC	\$194.70	
77285	00	\$234.57	
77285	26	\$39.88	
77285	99	\$39.88	
77290	TC	\$284.23	
77290	00	\$343.51	
77290	26	\$59.28	
77290	99	\$59.28	
77295	TC	\$507.26	
77295	00	\$681.51	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
77295	26	\$174.25	
77295	99	\$174.25	
77299	TC	M	
77299	00	M	
77299	26	M	
77299	99	M	
77300	TC	\$34.30	
77300	00	\$58.04	
77300	26	\$23.75	
77300	99	\$23.75	
77301	TC	\$1,210.48	
77301	00	\$1,515.54	
77301	26	\$305.06	
77301	99	\$305.06	
77305	TC	\$37.99	
77305	00	\$64.98	
77305	26	\$26.98	
77305	99	\$26.98	
77310	TC	\$48.33	
77310	00	\$88.21	
77310	26	\$39.88	
77310	99	\$39.88	
77315	TC	\$62.84	
77315	00	\$122.12	
77315	26	\$59.28	
77315	99	\$59.28	
77321	TC	\$78.15	
77321	00	\$114.62	
77321	26	\$36.46	
77321	99	\$36.46	
77326	TC	\$74.21	
77326	00	\$109.75	
77326	26	\$35.53	
77326	99	\$35.53	
77327	TC	\$104.79	
77327	00	\$157.70	
77327	26	\$52.91	
77327	99	\$52.91	
77328	TC	\$140.24	
77328	00	\$220.13	
77328	26	\$79.89	
77328	99	\$79.89	
77331	TC	\$14.94	
77331	00	\$48.16	
77331	26	\$33.22	
77331	99	\$33.22	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
77332	TC	\$40.05	
77332	00	\$60.70	
77332	26	\$20.65	
77332	99	\$20.65	
77333	TC	\$32.24	
77333	00	\$64.22	
77333	26	\$31.97	
77333	99	\$31.97	
77334	TC	\$82.23	
77334	00	\$129.40	
77334	26	\$47.17	
77334	99	\$47.17	
77336	00	\$61.39	
77370	00	\$96.45	
77371	00	\$867.75	
77372	00	\$658.37	
77373	00	\$1,229.00	
77399	TC	M	
77399	00	M	
77399	26	M	
77399	99	M	
77401	00	\$33.68	
77402	00	\$89.48	
77403	00	\$81.14	
77404	00	\$87.47	
77406	00	\$88.04	
77407	00	\$114.92	
77408	00	\$106.29	
77409	00	\$114.63	
77411	00	\$114.35	
77412	00	\$132.89	
77413	00	\$134.04	
77414	00	\$146.40	
77416	00	\$146.40	
77417	00	\$14.34	
77418	00	\$450.42	
77421	TC	\$81.87	
77421	00	\$96.75	
77421	26	\$14.88	
77427	00	\$141.66	
77431	00	\$73.06	
77432	00	\$307.56	
77435	00	\$512.16	
77470	TC	\$186.19	
77470	00	\$266.09	
77470	26	\$79.89	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
77470	99	\$79.89	
77499	TC	M	
77499	00	M	
77499	26	M	
77499	99	M	
77600	TC	\$186.21	
77600	00	\$245.49	
77600	26	\$59.28	
77600	99	\$59.28	
77605	TC	\$319.32	
77605	00	\$397.57	
77605	26	\$78.26	
77605	99	\$78.26	
77610	TC	\$298.96	
77610	00	\$356.22	
77610	26	\$57.26	
77610	99	\$57.26	
77615	TC	\$424.87	
77615	00	\$503.90	
77615	26	\$79.03	
77615	99	\$79.03	
77620	TC	\$191.39	
77620	00	\$251.12	
77620	26	\$59.73	
77620	99	\$59.73	
77750	TC	\$62.19	
77750	00	\$250.72	
77750	26	\$188.52	
77750	99	\$188.52	
77761	TC	\$111.17	
77761	00	\$254.85	
77761	26	\$143.68	
77761	99	\$143.68	
77762	TC	\$137.14	
77762	00	\$356.07	
77762	26	\$218.93	
77762	99	\$218.93	
77763	TC	\$175.93	
77763	00	\$503.81	
77763	26	\$327.89	
77763	99	\$327.89	
77776	TC	\$116.49	
77776	00	\$291.53	
77776	26	\$175.04	
77776	99	\$175.04	
77777	TC	\$142.43	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
77777	00	\$428.11	
77777	26	\$285.68	
77777	99	\$285.68	
77778	TC	\$187.10	
77778	00	\$615.53	
77778	26	\$428.43	
77778	99	\$428.43	
77785	00	\$142.89	
77786	TC	\$298.15	
77786	00	\$427.47	
77786	26	\$129.30	
77787	TC	\$436.88	
77787	00	\$635.34	
77787	26	\$198.46	
77789	TC	\$30.18	
77789	00	\$73.90	
77789	26	\$43.72	
77789	99	\$43.72	
77790	TC	\$23.56	
77790	00	\$63.45	
77790	26	\$39.88	
77790	99	\$39.88	
77799	TC	M	
77799	00	M	
77799	26	M	
77799	99	M	
78000	TC	\$40.49	
78000	00	\$47.79	
78000	26	\$7.30	
78000	99	\$7.30	
78001	TC	\$51.55	
78001	00	\$61.63	
78001	26	\$10.08	
78001	99	\$10.08	
78003	TC	\$40.78	
78003	00	\$53.36	
78003	26	\$12.57	
78003	99	\$12.57	
78006	TC	\$123.11	
78006	00	\$141.73	
78006	26	\$18.62	
78006	99	\$18.62	
78007	TC	\$80.39	
78007	00	\$99.62	
78007	26	\$19.24	
78007	99	\$19.24	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78010	TC	\$86.02	
78010	00	\$100.91	
78010	26	\$14.88	
78010	99	\$14.88	
78011	TC	\$96.65	
78011	00	\$114.03	
78011	26	\$17.38	
78011	99	\$17.38	
78015	TC	\$112.60	
78015	00	\$138.49	
78015	26	\$25.89	
78015	99	\$25.89	
78016	TC	\$171.23	
78016	00	\$202.73	
78016	26	\$31.49	
78016	99	\$31.49	
78018	TC	\$191.68	
78018	00	\$225.16	
78018	26	\$33.47	
78018	99	\$33.47	
78020	00	\$66.84	
78070	TC	\$109.04	
78070	00	\$140.66	
78070	26	\$31.63	
78070	99	\$31.63	
78075	TC	\$245.46	
78075	00	\$273.86	
78075	26	\$28.38	
78075	99	\$28.38	
78099	TC	M	
78099	00	M	
78099	26	M	
78099	99	M	
78102	TC	\$88.46	
78102	00	\$109.55	
78102	26	\$21.09	
78102	99	\$21.09	
78103	TC	\$122.49	
78103	00	\$151.49	
78103	26	\$29.00	
78103	99	\$29.00	
78104	TC	\$147.03	
78104	00	\$177.88	
78104	26	\$30.84	
78104	99	\$30.84	
78110	TC	\$44.23	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78110	00	\$51.82	
78110	26	\$7.59	
78110	99	\$7.59	
78111	TC	\$68.59	
78111	00	\$77.11	
78111	26	\$8.51	
78111	99	\$8.51	
78120	TC	\$55.54	
78120	00	\$64.37	
78120	26	\$8.84	
78120	99	\$8.84	
78121	TC	\$74.06	
78121	00	\$86.32	
78121	26	\$12.26	
78121	99	\$12.26	
78122	TC	\$99.56	
78122	00	\$117.22	
78122	26	\$17.67	
78122	99	\$17.67	
78130	TC	\$90.17	
78130	00	\$113.88	
78130	26	\$23.71	
78130	99	\$23.71	
78135	TC	\$195.17	
78135	00	\$219.82	
78135	26	\$24.65	
78135	99	\$24.65	
78140	TC	\$98.58	
78140	00	\$122.30	
78140	26	\$23.71	
78140	99	\$23.71	
78185	TC	\$108.44	
78185	00	\$123.93	
78185	26	\$15.49	
78185	99	\$15.49	
78190	TC	\$136.41	
78190	00	\$177.39	
78190	26	\$40.98	
78190	99	\$40.98	
78191	TC	\$157.95	
78191	00	\$181.67	
78191	26	\$23.71	
78191	99	\$23.71	
78195	TC	\$180.40	
78195	00	\$226.90	
78195	26	\$46.50	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78195	99	\$46.50	
78201	TC	\$100.10	
78201	00	\$116.87	
78201	26	\$16.77	
78201	99	\$16.77	
78202	TC	\$117.78	
78202	00	\$137.33	
78202	26	\$19.56	
78202	99	\$19.56	
78205	TC	\$161.46	
78205	00	\$188.92	
78205	26	\$27.46	
78205	99	\$27.46	
78206	TC	\$205.39	
78206	00	\$242.61	
78206	26	\$37.22	
78206	99	\$37.22	
78215	TC	\$111.17	
78215	00	\$130.07	
78215	26	\$18.92	
78215	99	\$18.92	
78216	TC	\$90.70	
78216	00	\$112.43	
78216	26	\$21.73	
78216	99	\$21.73	
78220	TC	\$98.03	
78220	00	\$116.65	
78220	26	\$18.62	
78220	99	\$18.62	
78223	TC	\$173.38	
78223	00	\$205.93	
78223	26	\$32.55	
78223	99	\$32.55	
78230	TC	\$90.90	
78230	00	\$108.28	
78230	26	\$17.38	
78230	99	\$17.38	
78231	TC	\$85.68	
78231	00	\$105.55	
78231	26	\$19.87	
78231	99	\$19.87	
78232	TC	\$90.99	
78232	00	\$108.97	
78232	26	\$17.98	
78232	99	\$17.98	
78258	TC	\$118.93	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78258	00	\$147.60	
78258	26	\$28.68	
78258	99	\$28.68	
78261	TC	\$144.73	
78261	00	\$171.55	
78261	26	\$26.82	
78261	99	\$26.82	
78262	TC	\$146.75	
78262	00	\$172.67	
78262	26	\$25.92	
78262	99	\$25.92	
78264	TC	\$161.41	
78264	00	\$191.65	
78264	26	\$30.24	
78264	99	\$30.24	
78267	TC	M	
78267	00	\$7.74	
78267	99	M	
78268	TC	M	
78268	00	\$42.80	
78268	26	M	
78268	99	M	
78270	TC	\$50.52	
78270	00	\$58.42	
78270	26	\$7.90	
78270	99	\$7.90	
78271	TC	\$51.38	
78271	00	\$59.00	
78271	26	\$7.62	
78271	99	\$7.62	
78272	TC	\$63.86	
78272	00	\$73.97	
78272	26	\$10.11	
78272	99	\$10.11	
78278	TC	\$178.80	
78278	00	\$216.95	
78278	26	\$38.14	
78278	99	\$38.14	
78282	TC	\$149.00	
78282	00	\$162.03	
78282	26	\$14.57	
78282	99	\$14.57	
78290	TC	\$165.21	
78290	00	\$191.71	
78290	26	\$26.50	
78290	99	\$26.50	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78291	TC	\$130.41	
78291	00	\$164.21	
78291	26	\$33.79	
78291	99	\$33.79	
78299	TC	M	
78299	00	M	
78299	26	M	
78299	99	M	
78300	TC	\$95.34	
78300	00	\$119.38	
78300	26	\$24.03	
78300	99	\$24.03	
78305	TC	\$129.95	
78305	00	\$161.89	
78305	26	\$31.95	
78305	99	\$31.95	
78306	TC	\$147.32	
78306	00	\$180.79	
78306	26	\$33.47	
78306	99	\$33.47	
78315	TC	\$179.51	
78315	00	\$218.90	
78315	26	\$39.40	
78315	99	\$39.40	
78320	TC	\$161.18	
78320	00	\$201.50	
78320	26	\$40.32	
78320	99	\$40.32	
78350	TC	\$18.21	
78350	00	\$26.24	
78350	26	\$7.93	
78350	99	\$7.93	
78399	TC	M	
78399	00	M	
78399	26	M	
78399	99	M	
78414	TC	\$43.92	
78414	00	\$59.68	
78414	26	\$17.95	
78414	99	\$17.95	
78428	TC	\$104.70	
78428	00	\$136.38	
78428	26	\$31.68	
78428	99	\$31.68	
78445	TC	\$90.34	
78445	00	\$109.26	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78445	26	\$18.92	
78445	99	\$18.92	
78456	TC	\$147.45	
78456	00	\$186.50	
78456	26	\$39.04	
78456	99	\$39.04	
78457	TC	\$103.68	
78457	00	\$133.03	
78457	26	\$29.35	
78457	99	\$29.35	
78458	TC	\$121.30	
78458	00	\$156.02	
78458	26	\$34.73	
78458	99	\$34.73	
78460	TC	\$98.09	
78460	00	\$131.56	
78460	26	\$33.47	
78460	99	\$33.47	
78461	TC	\$123.27	
78461	00	\$171.15	
78461	26	\$47.87	
78461	99	\$47.87	
78464	TC	\$183.83	
78464	00	\$227.74	
78464	26	\$43.90	
78464	99	\$43.90	
78465	TC	\$332.41	
78465	00	\$391.90	
78465	26	\$59.48	
78465	99	\$59.48	
78466	TC	\$101.38	
78466	00	\$128.78	
78466	26	\$27.39	
78466	99	\$27.39	
78468	TC	\$133.98	
78468	00	\$166.26	
78468	26	\$32.29	
78468	99	\$32.29	
78469	TC	\$163.08	
78469	00	\$200.32	
78469	26	\$37.25	
78469	99	\$37.25	
78472	TC	\$164.20	
78472	00	\$202.89	
78472	26	\$38.69	
78472	99	\$38.69	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78473	TC	\$226.78	
78473	00	\$285.53	
78473	26	\$58.75	
78473	99	\$58.75	
78478	TC	\$31.82	
78478	00	\$53.07	
78478	26	\$21.24	
78478	99	\$21.24	
78480	TC	\$31.82	
78480	00	\$45.59	
78480	26	\$13.76	
78480	99	\$13.76	
78481	TC	\$144.66	
78481	00	\$184.95	
78481	26	\$40.28	
78481	99	\$40.28	
78483	TC	\$206.23	
78483	00	\$267.15	
78483	26	\$60.92	
78483	99	\$60.92	
78494	TC	\$187.50	
78494	00	\$235.57	
78494	26	\$48.06	
78494	99	\$48.06	
78496	TC	\$115.02	
78496	00	\$135.12	
78496	26	\$20.09	
78496	99	\$20.09	
78499	TC	M	
78499	00	M	
78499	26	M	
78499	99	M	
78580	TC	\$121.77	
78580	00	\$150.44	
78580	26	\$28.68	
78580	99	\$28.68	
78584	TC	\$86.83	
78584	00	\$124.98	
78584	26	\$38.14	
78584	99	\$38.14	
78585	TC	\$203.89	
78585	00	\$245.92	
78585	26	\$42.03	
78585	99	\$42.03	
78586	TC	\$97.07	
78586	00	\$112.27	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78586	26	\$15.20	
78586	99	\$15.20	
78587	TC	\$118.06	
78587	00	\$136.98	
78587	26	\$18.92	
78587	99	\$18.92	
78588	TC	\$167.50	
78588	00	\$209.51	
78588	26	\$42.03	
78588	99	\$42.03	
78591	TC	\$100.81	
78591	00	\$116.30	
78591	26	\$15.49	
78591	99	\$15.49	
78593	TC	\$118.89	
78593	00	\$137.52	
78593	26	\$18.62	
78593	99	\$18.62	
78594	TC	\$148.58	
78594	00	\$169.07	
78594	26	\$20.48	
78594	99	\$20.48	
78596	TC	\$225.83	
78596	00	\$274.12	
78596	26	\$48.29	
78596	99	\$48.29	
78599	TC	M	
78599	00	M	
78599	26	M	
78599	99	M	
78600	TC	\$104.26	
78600	00	\$121.32	
78600	26	\$17.06	
78600	99	\$17.06	
78601	TC	\$126.08	
78601	00	\$145.63	
78601	26	\$19.56	
78601	99	\$19.56	
78605	TC	\$118.31	
78605	00	\$139.08	
78605	26	\$20.76	
78605	99	\$20.76	
78606	TC	\$178.25	
78606	00	\$202.61	
78606	26	\$24.36	
78606	99	\$24.36	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78607	TC	\$217.22	
78607	00	\$264.52	
78607	26	\$47.30	
78607	99	\$47.30	
78608	TC	\$554.58	
78608	00	\$606.41	
78608	26	\$57.41	
78609	TC	\$681.73	
78609	00	\$741.14	
78609	26	\$59.04	
78610	TC	\$119.55	
78610	00	\$131.74	
78610	26	\$12.19	
78610	99	\$12.19	
78630	TC	\$197.16	
78630	00	\$223.38	
78630	26	\$26.21	
78630	99	\$26.21	
78635	TC	\$162.07	
78635	00	\$185.94	
78635	26	\$23.87	
78635	99	\$23.87	
78645	TC	\$152.85	
78645	00	\$174.58	
78645	26	\$21.73	
78645	99	\$21.73	
78647	TC	\$207.77	
78647	00	\$242.21	
78647	26	\$34.44	
78647	99	\$34.44	
78650	TC	\$190.15	
78650	00	\$213.87	
78650	26	\$23.71	
78650	99	\$23.71	
78660	TC	\$90.76	
78660	00	\$111.24	
78660	26	\$20.48	
78660	99	\$20.48	
78699	TC	M	
78699	00	M	
78699	26	M	
78699	99	M	
78700	TC	\$106.83	
78700	00	\$124.50	
78700	26	\$17.67	
78700	99	\$17.67	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78701	TC	\$128.66	
78701	00	\$147.58	
78701	26	\$18.92	
78701	99	\$18.92	
78707	TC	\$141.41	
78707	00	\$178.63	
78707	26	\$37.22	
78707	99	\$37.22	
78708	TC	\$111.22	
78708	00	\$158.19	
78708	26	\$46.98	
78708	99	\$46.98	
78709	TC	\$188.01	
78709	00	\$242.28	
78709	26	\$54.28	
78709	99	\$54.28	
78710	TC	\$162.04	
78710	00	\$187.32	
78710	26	\$25.28	
78710	99	\$25.28	
78725	TC	\$59.28	
78725	00	\$73.84	
78725	26	\$14.57	
78725	99	\$14.57	
78730	TC	\$49.68	
78730	00	\$56.69	
78730	26	\$7.01	
78730	99	\$7.01	
78740	TC	\$110.61	
78740	00	\$132.47	
78740	26	\$21.87	
78740	99	\$21.87	
78761	TC	\$117.31	
78761	00	\$144.77	
78761	26	\$27.46	
78761	99	\$27.46	
78799	TC	M	
78799	00	M	
78799	26	M	
78799	99	M	
78800	TC	\$110.83	
78800	00	\$136.25	
78800	26	\$25.42	
78800	99	\$25.42	
78801	TC	\$146.75	
78801	00	\$177.58	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78801	26	\$30.83	
78801	99	\$30.83	
78802	TC	\$196.42	
78802	00	\$229.61	
78802	26	\$33.19	
78802	99	\$33.19	
78803	TC	\$216.36	
78803	00	\$258.67	
78803	26	\$42.31	
78803	99	\$42.31	
78804	TC	\$371.29	
78804	00	\$412.54	
78804	26	\$41.25	
78805	TC	\$108.54	
78805	00	\$136.60	
78805	26	\$28.06	
78805	99	\$28.06	
78806	TC	\$213.19	
78806	00	\$246.38	
78806	26	\$33.19	
78806	99	\$33.19	
78807	TC	\$216.06	
78807	00	\$258.24	
78807	26	\$42.18	
78807	99	\$42.18	
78808	00	\$33.72	
78811	TC	\$554.58	
78811	00	\$608.63	
78811	26	\$60.22	
78812	TC	\$554.58	
78812	00	\$621.96	
78812	26	\$74.84	
78813	TC	\$554.58	
78813	00	\$624.13	
78813	26	\$77.62	
78814	TC	\$615.93	
78814	00	\$692.50	\$629.50
78814	26	\$85.11	
78815	TC	\$615.93	
78815	00	\$700.55	
78815	26	\$94.42	
78816	TC	\$615.93	
78816	00	\$702.79	
78816	26	\$96.59	
78999	TC	M	
78999	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
78999	26	M	
78999	99	M	
79005	TC		\$57.95
79005	00		\$126.86
79005	26		\$68.91
79101	TC		\$60.25
79101	00		\$136.80
79101	26		\$76.55
79101	99		\$76.55
79200	TC		\$62.27
79200	00		\$138.73
79200	26		\$76.46
79200	99		\$76.46
79300	26		\$62.66
79300	99		\$62.66
79403	TC		\$94.48
79403	00		\$182.74
79403	26		\$88.27
79440	TC		\$56.23
79440	00		\$133.42
79440	26		\$77.19
79440	99		\$77.19
79445	26		\$92.98
79445	99		\$92.98
79999	TC	M	
79999	00	M	
79999	26	M	
79999	99	M	
80047	00		\$21.53
80048	00		\$8.35
80051	00		\$6.91
80053	FP		\$9.42
80053	00		\$9.42
80055	00		\$32.25
80061	FP		\$9.66
80061	00		\$9.66
80069	00		\$8.56
80074	00		\$43.65
80076	00		\$8.06
80100	00		\$14.34
80101	00		\$13.57
80102	00		\$13.06
80103	00	M	
80150	00		\$14.86
80152	00		\$17.65
80154	00		\$18.24

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
80156	00	\$14.36	
80157	00	\$13.07	
80158	00	\$17.80	
80160	00	\$16.97	
80162	00	\$13.09	
80164	00	\$11.47	
80166	00	\$15.28	
80168	00	\$10.65	
80170	00	\$14.22	
80172	00	\$16.06	
80173	00	\$14.36	
80174	00	\$16.97	
80176	00	\$14.48	
80178	00	\$6.52	
80182	00	\$11.47	
80184	00	\$11.30	
80185	00	\$13.07	
80186	00	\$13.57	
80188	00	\$16.35	
80190	00	\$16.51	
80192	00	\$16.51	
80194	00	\$14.39	
80195	00	\$13.52	
80196	00	\$7.00	
80197	00	\$13.52	
80198	00	\$13.95	
80200	00	\$14.77	
80201	00	\$11.75	
80202	00	\$11.47	
80299	00	\$12.15	
80400	00	\$32.15	
80402	00	\$85.71	
80406	00	\$77.15	
80408	00	\$121.41	
80410	00	\$79.19	
80412	00	\$301.69	
80414	00	\$50.91	
80415	00	\$55.10	
80416	00	\$130.10	
80417	00	\$43.37	
80418	00	\$555.87	
80420	00	\$71.01	
80422	00	\$45.43	
80424	00	\$49.79	
80426	00	\$146.34	
80428	00	\$65.73	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
80430	00	\$77.33	
80432	00	\$101.46	
80434	00	\$99.70	
80435	00	\$101.50	
80436	00	\$89.86	
80438	00	\$49.68	
80439	00	\$66.24	
80440	00	\$57.32	
81000	FP	\$3.11	
81000	00	\$3.11	
81001	FP	\$3.11	
81001	00	\$3.11	
81002	FP	\$2.52	
81002	00	\$2.52	
81003	FP	\$2.22	
81003	00	\$2.22	
81005	00	\$2.14	
81007	00	\$2.54	
81015	00	\$2.84	
81020	00	\$1.74	
81025	FP	\$6.24	
81025	00	\$6.24	
81050	00	\$2.96	
81099	00	M	
82000	00	\$2.84	
82003	00	\$19.96	
82009	00	\$4.35	
82010	00	\$6.59	
82013	00	\$11.01	
82016	00	\$13.67	
82017	00	\$14.45	
82024	00	\$34.20	
82030	00	\$17.79	
82040	00	\$4.88	
82042	00	\$5.10	
82043	00	\$5.71	
82044	00	\$4.51	
82045	00	\$33.47	
82055	00	\$9.76	
82075	00	\$11.89	
82085	00	\$9.21	
82088	00	\$39.02	
82101	00	\$29.59	
82103	00	\$7.53	
82104	00	\$14.25	
82105	00	\$5.88	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
82106	00	\$5.88	
82107	00	\$58.76	
82108	00	\$16.52	
82120	FP	\$2.39	
82120	00	\$2.39	
82127	00	\$13.67	
82128	00	\$13.67	
82131	00	\$16.63	
82135	00	\$16.23	
82136	00	\$14.45	
82139	00	\$14.45	
82140	00	\$14.36	
82143	00	\$6.78	
82145	00	\$15.32	
82150	00	\$6.39	
82154	00	\$28.43	
82157	00	\$28.86	
82160	00	\$24.65	
82163	00	\$20.24	
82164	00	\$11.19	
82172	00	\$10.63	
82175	00	\$11.84	
82180	00	\$4.77	
82190	00	\$13.20	
82205	00	\$11.30	
82232	00	\$11.84	
82239	00	\$16.89	
82240	00	\$26.20	
82247	00	\$4.96	
82248	00	\$4.96	
82252	00	\$4.48	
82270	00	\$3.20	
82271	00	\$3.20	
82272	00	\$3.20	
82274	00	\$8.90	
82286	00	\$6.79	
82300	00	\$22.81	
82306	00	\$29.18	
82307	00	\$31.77	
82308	00	\$26.39	
82310	00	\$5.08	
82330	00	\$13.47	
82331	00	\$5.10	
82340	00	\$5.95	
82355	00	\$9.46	
82360	00	\$12.69	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
82365	00	\$12.71	
82370	00	\$12.36	
82373	00	\$17.80	
82374	00	\$4.59	
82375	00	\$5.88	
82376	00	\$5.88	
82378	00	\$18.71	
82379	00	\$14.45	
82380	00	\$9.10	
82382	00	\$15.50	
82383	00	\$24.70	
82384	00	\$24.90	
82387	00	\$20.51	
82390	00	\$10.59	
82397	00	\$13.93	
82415	00	\$11.84	
82435	00	\$4.04	
82436	00	\$4.96	
82438	00	\$4.82	
82441	00	\$5.32	
82465	00	\$4.29	
82480	00	\$7.77	
82482	00	\$7.58	
82485	00	\$20.35	
82486	00	\$17.80	
82487	00	\$15.73	
82488	00	\$21.06	
82489	00	\$18.24	
82491	00	\$17.80	
82492	00	\$17.80	
82495	00	\$4.77	
82507	00	\$27.41	
82520	00	\$9.46	
82525	00	\$12.22	
82528	00	\$15.31	
82530	00	\$16.47	
82533	00	\$16.08	
82540	00	\$4.57	
82550	00	\$6.08	
82552	00	\$4.04	
82553	00	\$11.38	
82554	00	\$11.70	
82565	00	\$5.05	
82570	00	\$5.10	
82575	00	\$9.32	
82585	00	\$8.45	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
82595	00	\$4.86	
82600	00	\$19.13	
82607	00	\$14.86	
82608	00	\$14.12	
82610	00	\$13.41	
82615	00	\$8.05	
82626	00	\$24.91	
82627	00	\$21.92	
82633	00	\$30.54	
82634	00	\$28.86	
82638	00	\$11.84	
82646	00	\$17.69	
82649	00	\$25.33	
82651	00	\$25.45	
82652	00	\$37.95	
82654	00	\$13.65	
82656	00	\$11.37	
82657	00	\$17.80	
82658	00	\$17.80	
82664	00	\$5.88	
82666	00	\$21.18	
82668	00	\$17.69	
82670	00	\$27.54	
82671	00	\$25.23	
82672	00	\$21.38	
82677	00	\$23.84	
82679	00	\$24.61	
82690	00	\$17.04	
82693	00	\$14.69	
82696	00	\$23.25	
82705	00	\$5.01	
82710	00	\$2.84	
82715	00	\$16.97	
82725	00	\$2.32	
82726	00	\$17.80	
82728	00	\$13.43	
82731	00	\$58.76	
82735	00	\$18.28	
82742	00	\$19.51	
82746	00	\$14.49	
82747	00	\$17.08	
82757	00	\$11.84	
82759	00	\$21.18	
82760	00	\$11.04	
82775	00	\$17.69	
82776	00	\$8.27	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
82784	00	\$9.16	
82785	00	\$14.31	
82787	00	\$7.90	
82800	00	\$8.35	
82803	00	\$19.08	
82805	00	\$27.98	
82810	00	\$8.61	
82820	00	\$9.85	
82926	00	\$5.37	
82928	00	\$6.46	
82938	00	\$17.44	
82941	00	\$17.39	
82943	00	\$14.09	
82945	00	\$3.86	
82946	00	\$4.59	
82947	FP	\$3.86	
82947	00	\$3.86	
82948	00	\$3.12	
82950	00	\$4.69	
82951	00	\$12.69	
82952	00	\$3.41	
82953	00	\$14.93	
82955	00	\$9.56	
82960	00	\$4.59	
82962	00	\$2.31	
82963	00	\$21.18	
82965	00	\$5.41	
82975	00	\$15.62	
82977	00	\$7.10	
82978	00	\$14.04	
82979	00	\$5.88	
82980	00	\$18.06	
82985	00	\$14.86	
83001	00	\$18.32	
83002	00	\$18.26	
83003	00	\$16.43	
83008	00	\$16.55	
83009	00	\$42.80	
83010	00	\$11.99	
83012	00	\$11.84	
83013	00	\$42.80	
83014	00	\$7.74	
83015	00	\$18.56	
83018	00	\$5.18	
83020	26	\$14.43	
83021	00	\$17.80	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
83026	00	\$2.33	
83030	00	\$6.90	
83033	00	\$5.88	
83036	00	\$9.57	
83045	00	\$4.89	
83050	00	\$1.77	
83051	00	\$3.41	
83055	00	\$4.85	
83060	00	\$2.84	
83065	00	\$2.39	
83068	00	\$2.84	
83069	00	\$3.89	
83070	00	\$2.39	
83071	00	\$2.93	
83088	00	\$29.11	
83090	00	\$16.63	
83150	00	\$19.08	
83491	00	\$15.56	
83497	00	\$12.71	
83498	00	\$26.78	
83499	00	\$18.35	
83500	00	\$22.34	
83505	00	\$23.97	
83516	00	\$11.37	
83518	00	\$8.36	
83519	00	\$13.32	
83520	00	\$12.77	
83525	00	\$11.27	
83527	00	\$12.77	
83528	00	\$13.57	
83540	00	\$6.38	
83550	00	\$8.62	
83570	00	\$8.72	
83582	00	\$13.97	
83586	00	\$12.63	
83593	00	\$25.93	
83605	00	\$10.53	
83615	00	\$5.96	
83625	00	\$5.86	
83632	00	\$19.92	
83633	00	\$5.43	
83634	00	\$11.36	
83655	00	\$11.93	
83661	00	\$21.67	
83662	00	\$18.65	
83663	00	\$18.65	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
83670	00	\$9.03	
83690	00	\$6.79	
83695	00	\$12.77	
83701	00	\$24.47	
83704	00	\$31.11	
83718	00	\$8.07	
83719	00	\$8.27	
83721	00	\$8.25	
83727	00	\$15.97	
83735	00	\$6.60	
83775	00	\$7.27	
83785	00	\$17.69	
83805	00	\$17.38	
83825	00	\$16.03	
83835	00	\$16.70	
83840	00	\$16.09	
83857	00	\$9.46	
83858	00	\$14.62	
83864	00	\$17.35	
83866	00	\$9.71	
83872	00	\$5.78	
83873	00	\$16.96	
83874	00	\$11.84	
83876	00	\$15.88	
83880	00	\$33.47	
83883	00	\$13.41	
83885	00	\$24.15	
83887	00	\$23.35	
83890	00	\$3.95	
83891	00	\$3.95	
83892	00	\$3.95	
83893	00	\$3.95	
83894	00	\$3.95	
83896	00	\$3.95	
83897	00	\$3.95	
83898	00	\$16.52	
83900	00	\$33.05	
83901	00	\$16.52	
83902	00	\$13.99	
83903	00	\$16.52	
83904	00	\$16.52	
83905	00	\$16.52	
83906	00	\$16.52	
83907	00	\$13.16	
83908	00	\$16.52	
83909	00	\$16.52	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
83912	00	\$3.95	
83912	26	\$14.15	
83913	00	\$13.16	
83914	00	\$16.52	
83915	00	\$11.00	
83916	00	\$19.82	
83918	00	\$14.77	
83919	00	\$14.77	
83921	00	\$14.77	
83925	00	\$19.19	
83930	00	\$5.88	
83935	00	\$5.88	
83937	00	\$29.43	
83945	00	\$12.69	
83950	00	\$58.76	
83951	00	\$73.10	
83970	00	\$40.69	
83986	00	\$2.93	
83992	00	\$14.49	
83993	00	\$19.35	
84022	00	\$10.56	
84030	00	\$5.43	
84035	00	\$3.60	
84060	00	\$7.28	
84061	00	\$7.80	
84066	00	\$8.90	
84075	00	\$5.10	
84078	00	\$5.32	
84080	00	\$14.57	
84081	00	\$16.30	
84085	00	\$6.64	
84087	00	\$10.17	
84100	00	\$4.68	
84105	00	\$5.10	
84106	00	\$4.23	
84110	00	\$3.57	
84119	00	\$8.49	
84120	00	\$14.50	
84126	00	\$25.12	
84127	00	\$5.69	
84132	00	\$4.53	
84133	00	\$4.24	
84134	00	\$14.38	
84135	00	\$16.73	
84138	00	\$13.26	
84140	00	\$17.43	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
84143	00	\$22.50	
84144	00	\$20.57	
84146	00	\$19.11	
84150	00	\$3.57	
84152	00	\$18.14	
84153	00	\$18.14	
84154	00	\$18.14	
84155	00	\$3.61	
84156	00	\$3.61	
84157	00	\$3.61	
84160	00	\$3.57	
84163	00	\$10.03	
84165	00	\$10.59	
84165	26	\$14.43	
84166	00	\$17.58	
84166	26	\$14.43	
84181	00	\$16.79	
84182	00	\$17.75	
84202	00	\$14.15	
84203	00	\$7.06	
84206	00	\$17.56	
84207	00	\$27.69	
84210	00	\$8.90	
84220	00	\$8.90	
84228	00	\$11.47	
84233	00	\$58.76	
84234	00	\$57.38	
84235	00	\$51.59	
84238	00	\$36.05	
84244	00	\$21.68	
84252	00	\$2.93	
84255	00	\$25.17	
84260	00	\$23.62	
84270	00	\$21.42	
84275	00	\$13.25	
84285	00	\$23.22	
84295	00	\$4.59	
84300	00	\$4.79	
84302	00	\$4.79	
84305	00	\$20.96	
84307	00	\$18.02	
84311	00	\$6.90	
84315	00	\$2.47	
84375	00	\$5.69	
84376	00	\$5.43	
84377	00	\$5.43	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
84378	00	\$11.36	
84379	00	\$11.36	
84392	00	\$4.69	
84402	00	\$25.10	
84403	00	\$25.46	
84425	00	\$20.93	
84430	00	\$6.06	
84432	00	\$8.85	
84436	00	\$6.78	
84437	00	\$4.68	
84439	00	\$6.06	
84442	00	\$12.57	
84443	00	\$16.56	
84445	00	\$23.62	
84446	00	\$13.98	
84449	00	\$17.75	
84450	00	\$5.05	
84460	00	\$5.22	
84466	00	\$12.59	
84478	00	\$5.67	
84479	00	\$6.38	
84480	00	\$13.98	
84481	00	\$16.70	
84482	00	\$15.54	
84484	00	\$9.70	
84485	00	\$7.40	
84488	00	\$5.88	
84490	00	\$5.88	
84510	00	\$5.88	
84512	00	\$7.59	
84520	00	\$3.89	
84525	00	\$2.39	
84540	00	\$4.69	
84545	00	\$5.69	
84550	00	\$4.45	
84560	00	\$4.69	
84577	00	\$12.30	
84578	00	\$2.93	
84580	00	\$5.88	
84583	00	\$4.96	
84585	00	\$15.28	
84586	00	\$14.70	
84588	00	\$33.47	
84590	00	\$11.09	
84591	00	\$11.09	
84597	00	\$13.52	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
84600	00	\$15.84	
84620	00	\$11.68	
84630	00	\$5.62	
84681	00	\$14.17	
84702	FP	\$10.03	
84702	00	\$10.03	
84703	FP	\$7.40	
84703	00	\$7.40	
84704	00	\$10.03	
84999	00	M	
85002	00	\$4.44	
85004	00	\$5.88	
85007	00	\$3.39	
85008	00	\$3.39	
85009	00	\$3.41	
85013	FP	\$2.34	
85013	00	\$2.34	
85014	FP	\$2.34	
85014	00	\$2.34	
85018	FP	\$2.34	
85018	00	\$2.34	
85025	00	\$7.31	
85027	00	\$5.88	
85032	00	\$4.24	
85041	00	\$2.84	
85044	00	\$4.24	
85045	00	\$3.95	
85046	00	\$5.50	
85048	00	\$2.50	
85049	00	\$4.41	
85055	00	\$26.39	
85060	00	\$17.67	\$14.13
85097	00	\$72.53	\$29.49
85130	00	\$7.11	
85170	00	\$3.56	
85175	00	\$4.12	
85210	00	\$6.90	
85220	00	\$11.84	
85230	00	\$11.84	
85240	00	\$11.84	
85244	00	\$11.84	
85245	00	\$8.27	
85246	00	\$8.27	
85247	00	\$8.27	
85250	00	\$11.84	
85260	00	\$11.84	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
85270	00	\$11.84	
85280	00	\$11.84	
85290	00	\$11.84	
85291	00	\$8.76	
85292	00	\$18.67	
85293	00	\$18.67	
85300	00	\$11.68	
85301	00	\$10.66	
85302	00	\$11.85	
85303	00	\$13.63	
85305	00	\$11.43	
85306	00	\$14.88	
85307	00	\$14.88	
85335	00	\$11.84	
85337	00	\$10.27	
85345	00	\$4.24	
85347	00	\$2.39	
85348	00	\$2.39	
85360	00	\$8.28	
85362	00	\$4.68	
85366	00	\$4.12	
85370	00	\$11.20	
85378	00	\$4.70	
85379	00	\$10.03	
85380	00	\$10.03	
85384	00	\$7.73	
85385	00	\$7.73	
85390	00	\$5.09	
85396	00	\$14.83	\$11.87
85397	00	\$10.28	
85400	00	\$8.27	
85410	00	\$4.12	
85415	00	\$16.95	
85420	00	\$4.59	
85421	00	\$10.04	
85441	00	\$2.93	
85445	00	\$6.72	
85460	00	\$2.32	
85461	00	\$6.54	
85475	00	\$5.88	
85520	00	\$12.90	
85525	00	\$11.68	
85530	00	\$13.98	
85536	00	\$6.38	
85540	00	\$5.69	
85547	00	\$5.88	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
85549	00	\$18.50	
85555	00	\$5.88	
85557	00	\$13.16	
85576	00	\$14.77	
85597	00	\$4.58	
85610	00	\$3.87	
85611	00	\$3.89	
85612	00	\$9.43	
85613	00	\$9.43	
85635	00	\$9.71	
85651	00	\$3.50	
85652	00	\$2.66	
85660	00	\$5.44	
85670	00	\$5.70	
85675	00	\$5.88	
85705	00	\$9.49	
85730	00	\$5.91	
85732	00	\$6.38	
85810	00	\$11.52	
85999	00	M	
86000	00	\$6.88	
86001	00	\$5.15	
86003	00	\$5.15	
86005	00	\$3.51	
86021	00	\$5.88	
86022	00	\$5.80	
86023	00	\$12.28	
86038	00	\$11.92	
86039	00	\$11.00	
86060	00	\$7.20	
86063	00	\$4.59	
86077	00	\$38.17	\$29.39
86078	00	\$39.03	\$29.62
86079	00	\$39.03	\$29.85
86140	00	\$5.10	
86141	00	\$12.77	
86146	00	\$25.07	
86147	00	\$25.07	
86148	00	\$15.83	
86155	00	\$15.76	
86156	00	\$5.90	
86157	00	\$7.95	
86160	00	\$11.84	
86161	00	\$11.84	
86162	00	\$20.03	
86171	00	\$8.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
86185	00	\$8.82	
86200	00	\$12.77	
86215	00	\$13.06	
86225	00	\$13.55	
86226	00	\$11.94	
86235	00	\$17.68	
86243	00	\$20.24	
86255	00	\$11.89	
86256	00	\$11.89	
86277	00	\$14.77	
86280	00	\$2.67	
86294	00	\$17.18	M
86300	00	\$20.51	
86301	00	\$20.51	
86304	00	\$20.51	
86308	00	\$5.10	
86309	00	\$6.38	
86310	00	\$7.27	
86316	00	\$20.51	
86317	00	\$14.78	
86318	00	\$12.77	
86320	00	\$22.10	
86325	00	\$22.04	
86327	00	\$22.37	
86329	00	\$12.02	
86331	00	\$11.19	
86332	00	\$24.02	
86334	00	\$22.02	
86336	00	\$15.36	
86337	00	\$21.11	
86340	00	\$13.57	
86341	00	\$15.15	
86343	00	\$12.28	
86344	00	\$7.87	
86353	00	\$47.24	
86355	00	\$37.19	
86356	00	\$26.39	
86357	00	\$37.19	
86359	00	\$37.19	
86360	00	\$35.00	
86361	00	\$26.39	
86367	00	\$37.19	
86376	00	\$12.85	
86378	00	\$19.41	
86382	00	\$7.69	
86384	00	\$9.46	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
86403	00	\$10.05	
86406	00	\$10.49	
86430	00	\$5.59	
86431	00	\$5.59	
86480	00	\$61.10	
86485	00	\$20.25	
86486	00	\$4.01	\$3.21
86490	00	\$6.31	\$5.05
86510	00	\$6.59	\$5.28
86580	00	\$6.02	\$4.82
86590	00	\$10.87	
86592	FP	\$4.21	
86592	00	\$4.21	
86593	00	\$4.34	
86602	00	\$10.03	
86603	00	\$12.68	
86606	00	\$14.84	
86609	00	\$12.70	
86611	00	\$10.03	
86612	00	\$12.73	
86615	00	\$13.00	
86617	00	\$15.27	
86618	00	\$16.79	
86619	00	\$13.19	
86622	00	\$8.80	
86625	00	\$12.94	
86628	00	\$11.84	
86631	00	\$11.66	
86632	00	\$12.52	
86635	00	\$11.31	
86638	00	\$11.95	
86641	00	\$14.21	
86644	00	\$14.19	
86645	00	\$16.61	
86648	00	\$14.99	
86651	00	\$13.00	
86652	00	\$13.00	
86653	00	\$13.00	
86654	00	\$13.00	
86658	00	\$12.84	
86663	00	\$12.94	
86664	00	\$15.09	
86665	00	\$17.88	
86666	00	\$10.03	
86668	00	\$10.26	
86671	00	\$12.09	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
86674	00	\$14.51	
86677	00	\$14.31	
86682	00	\$12.05	
86684	00	\$15.62	
86687	00	\$8.27	
86688	00	\$13.81	
86689	00	\$19.08	
86692	00	\$16.92	
86694	00	\$14.19	
86695	00	\$13.00	
86696	00	\$19.08	
86698	00	\$12.32	
86701	00	\$8.75	
86702	00	\$13.32	
86703	00	\$13.52	
86704	00	\$9.46	
86705	00	\$11.60	
86706	00	\$10.59	
86707	00	\$9.46	
86708	00	\$12.21	
86709	00	\$8.27	
86710	00	\$13.36	
86713	00	\$15.09	
86717	00	\$5.73	
86720	00	\$13.00	
86723	00	\$13.00	
86727	00	\$12.68	
86729	00	\$11.78	
86732	00	\$13.00	
86735	00	\$12.86	
86738	00	\$13.06	
86741	00	\$13.00	
86744	00	\$13.00	
86747	00	\$14.82	
86750	00	\$13.00	
86753	00	\$12.22	
86756	00	\$12.71	
86757	00	\$19.08	
86759	00	\$13.00	
86762	00	\$14.19	
86765	00	\$12.70	
86768	00	\$13.00	
86771	00	\$13.00	
86774	00	\$14.59	
86777	00	\$14.19	
86778	00	\$14.20	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
86781	00	\$13.05	
86784	00	\$12.38	
86787	00	\$12.70	
86788	00	\$16.61	
86789	00	\$14.19	
86790	00	\$12.70	
86793	00	\$13.00	
86800	00	\$8.90	
86803	00	\$14.07	
86804	00	\$15.27	
86805	00	\$51.54	
86806	00	\$46.91	
86807	00	\$39.01	
86808	00	\$29.26	
86812	00	\$25.44	
86813	00	\$57.17	
86816	00	\$27.46	
86817	00	\$63.47	
86821	00	\$55.66	
86822	00	\$36.04	
86849	00	M	
86850	00	\$13.50	
86860	00	\$13.50	
86870	00	\$11.25	
86880	00	\$5.29	
86885	00	\$5.64	
86886	00	\$5.10	
86890	00	M	
86891	00	M	
86900	00	\$2.94	
86901	00	\$2.94	
86903	00	\$9.31	
86904	00	\$9.37	
86905	00	\$2.93	
86906	00	\$7.64	
86920	00	M	
86921	00	M	
86922	00	M	
86927	00	M	
86930	00	M	
86931	00	M	
86932	00	M	
86940	00	\$5.80	
86941	00	\$8.59	
86945	00	M	
86950	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
86960	00	M	
86965	00	M	
86970	00	M	
86971	00	M	
86972	00	M	
86975	00	M	
86976	00	M	
86977	00	M	
86978	00	M	
86985	00	M	
86999	00	M	
87001	00		\$13.03
87003	00		\$16.60
87015	00		\$6.59
87040	00		\$10.17
87045	00		\$9.30
87046	00		\$9.30
87070	00		\$8.49
87071	00		\$9.30
87073	00		\$9.30
87075	00		\$9.32
87076	00		\$7.96
87077	00		\$7.96
87081	00		\$6.54
87084	00		\$8.49
87086	00		\$7.96
87088	00		\$7.98
87101	00		\$4.59
87102	00		\$8.28
87103	00		\$8.89
87106	00		\$10.17
87109	00		\$15.17
87110	00		\$9.46
87116	00		\$10.65
87118	00		\$10.79
87140	00		\$5.49
87143	00		\$4.12
87147	00		\$5.10
87149	00		\$19.77
87152	00		\$4.12
87158	00		\$4.12
87164	00		\$4.59
87166	00		\$4.12
87168	00		\$4.04
87169	00		\$4.04
87172	00		\$4.04

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
87176	00	\$5.80	
87177	00	\$8.77	
87181	00	\$4.69	
87184	00	\$6.80	
87185	00	\$4.69	
87186	00	\$8.53	
87187	00	\$10.21	
87188	00	\$6.54	
87190	00	\$5.58	
87197	00	\$14.81	
87205	00	\$4.21	
87206	00	\$5.29	
87207	00	\$4.68	
87209	00	\$14.04	
87210	FP	\$4.04	
87210	00	\$4.04	
87220	00	\$4.21	
87230	00	\$16.51	
87250	00	\$19.28	
87252	00	\$13.57	
87253	00	\$16.06	
87254	00	\$19.28	
87255	00	\$21.60	
87260	00	\$11.83	
87265	00	\$11.83	
87267	00	\$11.83	
87269	00	\$11.83	
87270	00	\$11.83	
87271	00	\$11.83	
87272	00	\$11.83	
87273	00	\$11.83	
87274	00	\$11.83	
87275	00	\$11.83	
87276	00	\$11.83	
87277	00	\$11.83	
87278	00	\$11.83	
87279	00	\$11.83	
87280	00	\$11.83	
87281	00	\$11.83	
87283	00	\$11.83	
87285	00	\$11.83	
87290	00	\$11.83	
87299	00	\$11.83	
87300	00	\$11.83	
87301	00	\$11.83	
87305	00	\$11.83	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
87320	00	\$11.83	
87324	00	\$11.83	
87327	00	\$11.83	
87328	00	\$11.83	
87329	00	\$11.83	
87332	00	\$11.83	
87335	00	\$11.83	
87336	00	\$11.83	
87338	00	\$14.18	
87339	00	\$11.83	
87340	00	\$9.73	
87341	00	\$9.73	
87350	00	\$8.90	
87380	00	\$16.19	
87385	00	\$11.83	
87390	00	\$17.40	
87391	00	\$17.40	
87400	00	\$11.83	
87420	00	\$11.83	
87425	00	\$11.83	
87427	00	\$11.83	
87430	00	\$11.83	
87449	00	\$11.83	
87450	00	\$9.45	
87451	00	\$9.45	
87470	00	\$19.77	
87471	00	\$34.60	
87472	00	\$42.23	
87475	00	\$19.77	
87476	00	\$34.60	
87477	00	\$42.23	
87480	FP	\$19.77	
87480	00	\$19.77	
87481	00	\$34.60	
87482	00	\$41.16	
87485	00	\$19.77	
87486	00	\$34.60	
87487	00	\$42.23	
87490	00	\$19.77	
87491	FP	\$34.60	
87491	00	\$34.60	
87492	00	\$34.47	
87495	00	\$19.77	
87496	00	\$34.60	
87497	00	\$42.23	
87498	00	\$34.60	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
87500	00	\$34.60	
87510	FP	\$19.77	
87510	00	\$19.77	
87511	00	\$34.60	
87512	00	\$41.16	
87515	00	\$19.77	
87516	00	\$34.60	
87517	00	\$42.23	
87520	00	\$19.77	
87521	00	\$34.60	
87522	00	\$42.23	
87525	00	\$19.77	
87526	00	\$34.60	
87527	00	\$41.16	
87528	00	\$19.77	
87529	00	\$34.60	
87530	00	\$42.23	
87531	00	\$19.77	
87532	00	\$34.60	
87533	00	\$41.16	
87534	00	\$19.77	
87535	00	\$34.60	
87536	00	\$83.89	
87537	00	\$19.77	
87538	00	\$34.60	
87539	00	\$42.23	
87540	00	\$19.77	
87541	00	\$34.60	
87542	00	\$41.16	
87550	00	\$19.77	
87551	00	\$34.60	
87552	00	\$42.23	
87555	00	\$19.77	
87556	00	\$34.60	
87557	00	\$42.23	
87560	00	\$19.77	
87561	00	\$34.60	
87562	00	\$42.23	
87580	00	\$19.77	
87581	00	\$34.60	
87582	00	\$41.16	
87590	00	\$19.77	
87591	FP	\$34.60	
87591	00	\$34.60	
87592	00	\$42.23	
87620	00	\$19.77	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
87621	FP	\$34.60	
87621	00	\$34.60	
87622	00	\$41.16	
87640	00	\$34.60	
87641	00	\$34.60	
87650	00	\$19.77	
87651	00	\$34.60	
87652	00	\$41.16	
87653	00	\$34.60	
87660	00	\$19.77	
87797	FP	\$19.77	
87797	00	\$19.77	
87798	00	\$34.60	
87799	00	\$42.23	
87800	00	\$39.54	
87801	00	\$69.20	
87802	00	\$11.83	
87803	00	\$11.83	
87804	00	\$11.83	
87807	00	\$11.83	
87808	00	\$11.83	
87809	00	\$11.83	
87810	00	\$11.83	
87850	00	\$11.83	
87880	00	\$11.83	
87899	00	\$11.83	
87900	00	\$67.85	
87901	00	\$253.80	
87902	00	\$253.80	
87903	00	\$481.72	
87904	00	\$13.57	
87905	00	\$14.99	
87999	00	M	
88104	TC	\$23.85	\$4.77
88104	00	\$45.54	\$9.11
88104	26	\$21.70	\$4.34
88106	TC	\$35.94	\$7.19
88106	00	\$57.62	\$11.52
88106	26	\$21.70	\$4.34
88107	TC	\$43.13	\$8.63
88107	00	\$73.01	\$14.60
88107	26	\$29.89	\$5.98
88108	TC	\$33.05	\$6.61
88108	00	\$54.75	\$10.95
88108	26	\$21.70	\$4.34
88112	TC	\$38.23	\$7.65

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
88112	00	\$83.28	\$16.66
88112	26	\$45.04	\$9.01
88125	TC	\$4.74	\$0.95
88125	00	\$14.53	\$2.91
88125	26	\$9.79	\$1.96
88130	00	\$14.83	
88140	00	\$7.88	
88141	FP	\$19.58	\$3.92
88141	00	\$19.58	\$3.92
88142	FP	\$19.98	
88142	00	\$19.98	
88143	00	\$19.98	
88147	00	\$10.42	
88148	00	\$13.99	
88150	FP	\$10.42	
88150	00	\$10.42	
88152	00	\$10.42	
88153	00	\$10.42	
88154	00	\$10.42	
88155	00	\$5.69	
88160	TC	\$20.40	\$4.08
88160	00	\$39.63	\$7.93
88160	26	\$19.24	\$3.85
88161	TC	\$23.85	\$4.77
88161	00	\$43.37	\$8.67
88161	26	\$19.52	\$3.90
88162	TC	\$29.60	\$5.92
88162	00	\$59.49	\$11.90
88162	26	\$29.89	\$5.98
88164	FP	\$10.42	
88164	00	\$10.42	
88165	00	\$10.42	
88166	00	\$10.42	
88167	00	\$10.42	
88172	TC	\$16.09	\$3.22
88172	00	\$39.64	\$7.93
88172	26	\$23.55	\$4.71
88173	FP	\$102.09	\$20.42
88173	TC	\$48.59	\$9.72
88173	00	\$102.09	\$20.42
88173	26	\$53.51	\$10.70
88174	00	\$21.06	
88175	FP	\$26.12	
88175	00	\$26.12	
88182	TC	\$51.16	
88182	00	\$79.93	\$15.99

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
88182	26	\$28.77	\$5.75
88184	00	\$54.63	
88185	00	\$31.04	
88187	00	\$50.60	
88188	00	\$62.47	
88189	00	\$80.39	
88199	TC	M	
88199	00	M	
88199	26	M	
88230	00	\$114.85	
88233	00	\$138.74	
88235	00	\$145.17	
88237	00	\$124.51	
88239	00	\$145.44	
88245	00	\$146.75	
88248	00	\$170.73	
88249	00	\$170.73	
88261	00	\$166.05	
88262	00	\$122.88	
88263	00	\$148.15	
88264	00	\$122.88	
88267	00	\$177.22	
88269	00	\$163.97	
88271	00	\$21.12	
88272	00	\$26.39	
88273	00	\$31.68	
88274	00	\$34.31	
88275	00	\$39.59	
88280	00	\$24.75	
88283	00	\$67.63	
88285	00	\$5.32	
88289	00	\$33.94	
88291	00	\$21.31	
88299	TC	M	
88299	00	M	
88299	26	M	
88300	FP	\$17.18	
88300	TC	\$13.94	
88300	00	\$17.18	
88300	26	\$3.23	
88302	TC	\$32.19	
88302	00	\$37.28	
88302	26	\$5.09	
88304	TC	\$38.23	
88304	00	\$46.46	
88304	26	\$8.22	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
88305	TC	\$49.72	
88305	00	\$78.71	
88305	26	\$29.00	
88307	TC	\$93.12	
88307	00	\$155.40	
88307	26	\$62.27	
88309	TC	\$126.78	
88309	00	\$232.76	
88309	26	\$105.97	
88311	TC	\$4.44	
88311	00	\$13.60	
88311	26	\$9.16	
88312	TC	\$49.60	
88312	00	\$70.40	
88312	26	\$20.80	
88313	TC	\$43.85	
88313	00	\$53.00	
88313	26	\$9.16	
88314	TC	\$53.47	
88314	00	\$71.14	
88314	26	\$17.67	
88318	TC	\$61.98	
88318	00	\$78.39	
88318	26	\$16.42	
88319	TC	\$90.29	
88319	00	\$111.06	
88319	26	\$20.76	
88321	00	\$68.31	\$61.40
88323	TC	\$42.83	
88323	00	\$109.96	
88323	26	\$67.13	
88325	00	\$148.11	\$94.90
88329	00	\$38.13	\$26.05
88331	TC	\$21.24	
88331	00	\$68.02	
88331	26	\$46.78	
88332	TC	\$7.46	
88332	00	\$30.69	
88332	26	\$23.23	
88333	TC	\$22.11	
88333	00	\$69.49	
88333	26	\$47.39	
88334	00	\$40.86	
88342	TC	\$41.40	
88342	00	\$74.13	
88342	26	\$32.73	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
88346	TC	\$41.97	
88346	00	\$75.03	
88346	26	\$33.05	
88347	TC	\$29.60	
88347	00	\$62.08	
88347	26	\$32.48	
88348	TC	\$382.89	
88348	00	\$441.49	
88348	26	\$58.60	
88349	TC	\$179.12	
88349	00	\$209.01	
88349	26	\$29.89	
88355	TC	\$156.69	
88355	00	\$226.46	
88355	26	\$69.76	
88356	TC	\$111.67	
88356	00	\$224.83	
88356	26	\$113.16	
88358	TC	\$20.78	
88358	00	\$57.04	
88358	26	\$36.26	
88360	TC	\$46.57	
88360	00	\$89.05	
88360	26	\$42.48	
88361	TC	\$73.70	
88361	00	\$119.24	
88361	26	\$45.54	
88362	TC	\$118.73	
88362	00	\$202.60	
88362	26	\$83.88	
88365	TC	\$67.28	
88365	00	\$113.10	
88365	26	\$45.81	
88368	TC	\$94.57	
88368	00	\$147.08	
88368	26	\$52.52	
88371	26	\$14.15	
88372	26	\$14.72	
88380	00	\$122.20	
88381	00	\$162.90	
88384	00	M	
88385	00	\$369.42	
88386	00	\$378.81	
88399	TC	M	
88399	00	M	
88399	26	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
88720	00	\$6.16	
88740	00	\$6.16	
88741	00	\$6.16	
89049	00	\$142.55	\$46.77
89050	00	\$4.66	
89051	00	\$5.43	
89055	00	\$4.21	
89060	00	\$7.05	
89100	00	\$157.42	\$28.00
89105	00	\$159.31	\$23.55
89125	00	\$4.26	
89130	00	\$132.43	\$20.25
89132	00	\$148.52	\$11.90
89135	00	\$177.09	\$36.16
89136	00	\$116.34	\$11.07
89140	00	\$146.45	\$37.15
89141	00	\$156.12	\$36.19
89160	00	\$3.64	
89190	00	\$4.69	
89220	00	\$11.77	
89225	00	\$3.29	
89230	00	\$2.86	
89235	00	\$5.43	
89240	00	M	
89268	00	M	
89272	00	M	
89280	00	M	
89281	00	M	
89344	00	M	
89346	00	M	
89352	00	M	
89353	00	M	
89354	00	M	
90378	00	\$845.11	\$1,595.80
90471	00	\$13.00	
90472	00	\$13.00	
90473	00	\$13.00	
90474	00	\$13.00	
90585	00	\$138.66	
90586	00	\$155.28	
90632	00	\$59.60	
90636	00	\$84.81	
90656	00	\$7.86	
90658	00	\$7.86	
90675	00	\$158.88	
90703	00	\$20.94	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
90732	00	\$15.84	
90733	00	\$94.03	
90734	00	\$46.13	
90740	00	\$163.39	
90744	00	\$16.72	
90746	00	\$51.54	
90747	00	\$158.55	
90748	00	\$43.58	
90801	00	\$118.08	\$101.68
90802	00	\$125.12	\$109.59
90804	HN	\$52.06	\$45.43
90804	HO	\$52.06	\$45.43
90804	HP	\$52.06	\$45.43
90804	00	\$52.06	\$45.43
90805	00	\$57.67	\$51.03
90806	HN	\$74.07	\$69.54
90806	HO	\$74.07	\$69.54
90806	HP	\$74.07	\$69.54
90806	00	\$74.07	\$69.54
90807	00	\$81.64	\$75.30
90808	00	\$109.44	\$104.62
90809	00	\$116.41	\$110.07
90810	00	\$55.23	\$49.50
90811	00	\$63.55	\$55.10
90812	00	\$80.42	\$73.47
90813	00	\$88.02	\$79.56
90814	00	\$115.19	\$109.15
90815	00	\$122.14	\$113.69
90816	00	\$49.16	
90817	00	\$54.15	
90818	00	\$73.23	
90819	00	\$78.42	
90821	00	\$108.65	
90822	00	\$113.32	
90823	00	\$53.11	
90824	00	\$58.56	
90826	00	\$77.98	
90827	00	\$82.04	
90828	00	\$113.22	
90829	00	\$117.15	
90847	HN	\$85.49	\$81.18
90847	HO	\$85.49	\$81.18
90847	HP	\$85.49	\$81.18
90847	HQ	\$85.49	\$81.18
90847	00	\$85.49	\$81.18
90853	HN	\$24.25	\$22.81

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
90853	HO	\$24.25	\$22.81
90853	HP	\$24.25	\$22.81
90853	00	\$24.25	\$22.81
90853	52	\$12.13	\$11.40
90862	00	\$41.81	\$35.48
90870	00	\$109.15	\$67.74
90882	00	\$19.95	
90885	00	\$36.08	
90887	00	\$62.54	\$55.07
90899	00	M	
90901	00	\$27.89	\$15.24
90935	00	\$52.02	
90937	00	\$85.46	
90940	00	M	
90945	00	\$54.52	
90947	00	\$87.32	
90951	00	\$776.11	
90952	00	M	
90953	00	M	
90954	00	\$637.44	
90955	00	\$360.80	
90956	00	\$244.45	
90957	00	\$511.65	
90958	00	\$345.11	
90959	00	\$226.56	
90960	00	\$226.75	
90961	00	\$183.10	
90962	00	\$132.47	
90963	00	\$438.42	
90964	00	\$365.90	
90965	00	\$348.16	
90966	00	\$181.18	
90967	00	\$15.68	
90968	00	\$12.25	
90969	00	\$11.94	
90970	00	\$6.30	
90989	00	\$356.25	
90993	00	\$35.62	
90997	00	\$69.31	
90999	00	M	
91000	TC	\$28.61	
91000	00	\$56.39	
91000	26	\$27.78	
91010	TC	\$102.91	
91010	00	\$152.99	
91010	26	\$50.09	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
91011	TC	\$135.41	
91011	00	\$196.40	
91011	26	\$61.00	
91012	TC	\$144.74	
91012	00	\$204.07	
91012	26	\$59.33	
91020	TC	\$119.30	
91020	00	\$176.69	
91020	26	\$57.38	
91030	TC	\$66.42	
91030	00	\$103.19	
91030	26	\$36.77	
91034	TC	\$124.77	
91034	00	\$163.69	
91034	26	\$38.93	
91035	TC	\$301.94	
91035	00	\$365.64	
91035	26	\$63.71	
91037	TC	\$81.62	
91037	00	\$120.83	
91037	26	\$39.21	
91038	TC	\$60.34	
91038	00	\$105.12	
91038	26	\$44.78	
91040	TC	\$263.10	
91040	00	\$300.02	
91040	26	\$36.91	
91052	TC	\$68.14	
91052	00	\$100.14	
91052	26	\$32.00	
91055	TC	\$71.59	
91055	00	\$106.87	
91055	26	\$35.27	
91065	TC	\$38.52	
91065	00	\$46.43	
91065	26	\$7.90	
91105	00	\$65.32	\$13.26
91110	TC	\$574.73	
91110	00	\$720.91	
91110	26	\$146.18	
91120	TC	\$277.51	
91120	00	\$314.55	
91120	26	\$37.04	
91122	TC	\$118.70	
91122	00	\$187.89	
91122	26	\$69.19	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
91123	00	M	
91132	00	M	
91133	00	M	
91299	00	M	
92002	00		\$33.53
92004	00		\$69.55
92012	00		\$34.81
92014	00		\$53.63
92015	00		\$14.14
92018	00		
92019	00		
92020	00		\$14.72
92020	52		\$7.36
92025	TC		
92025	00		
92025	26		
92070	00		\$27.87
92081	TC		
92081	00		
92081	26		
92082	TC		
92082	00		
92082	26		
92083	TC		
92083	00		
92083	26		
92083	52		
92100	00		\$35.38
92120	00		\$31.04
92130	00		\$32.19
92135	TC		
92135	00		
92135	26		
92136	TC		
92136	00		
92136	26		
92140	00		\$19.39
92225	00		\$14.72
92226	00		\$13.15
92230	00		\$22.69
92235	TC		
92235	00		
92235	26		
92240	TC		
92240	00		
92250	TC		

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
92250	00	\$53.30	
92250	26	\$17.21	
92260	00	\$12.79	\$8.19
92265	TC	\$28.45	
92265	00	\$59.18	
92265	26	\$30.73	
92270	TC	\$33.05	
92270	00	\$64.23	
92270	26	\$31.17	
92275	TC	\$51.75	
92275	00	\$91.85	
92275	26	\$40.09	
92285	TC	\$23.43	
92285	00	\$31.63	
92285	26	\$8.19	
92286	TC	\$66.70	
92286	00	\$92.72	
92286	26	\$26.01	
92287	00	\$84.53	\$31.32
92310	00	\$64.83	\$43.83
92311	00	\$64.73	\$40.29
92312	00	\$72.44	\$47.99
92313	00	\$61.85	\$34.81
92340	00	\$27.08	\$13.85
92499	00	M	
92502	00	\$72.27	
92504	00	\$21.07	\$7.27
92506	00	\$112.44	\$34.49
92511	00	\$116.68	\$44.78
92512	00	\$46.40	\$20.80
92516	00	\$47.09	\$17.47
92520	00	\$42.23	\$30.43
92526	00	\$63.66	\$20.80
92541	TC	\$27.30	
92541	00	\$43.08	
92541	26	\$15.78	
92542	TC	\$31.62	
92542	00	\$44.76	
92542	26	\$13.15	
92543	TC	\$16.53	
92543	00	\$20.69	
92543	26	\$4.17	
92544	TC	\$25.29	
92544	00	\$35.66	
92544	26	\$10.37	
92545	TC	\$23.56	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
92545	00	\$32.68	
92545	26	\$9.12	
92546	TC	\$52.04	
92546	00	\$63.37	
92546	26	\$11.33	
92547	00	\$3.39	
92548	TC	\$52.93	
92548	00	\$73.03	
92548	26	\$20.09	
92551	00	\$7.32	
92552	00	\$15.49	
92552	52	\$7.74	
92553	00	\$21.22	
92553	52	\$10.61	
92555	00	\$12.04	
92555	52	\$6.02	
92556	00	\$16.33	
92556	52	\$8.16	
92557	00	\$39.84	\$38.40
92557	52	\$19.92	\$19.20
92559	00	\$8.20	
92560	00	\$13.50	
92561	00	\$21.22	
92562	00	\$15.20	
92563	00	\$13.77	
92564	00	\$14.19	
92565	00	\$10.02	
92565	52	\$5.01	
92567	00	\$16.05	\$14.90
92567	52	\$8.03	\$7.45
92568	00	\$15.76	
92568	52	\$7.88	
92569	00	\$13.20	
92569	52	\$6.60	
92571	00	\$12.32	
92572	00	\$9.91	
92575	00	\$21.26	
92576	00	\$15.34	
92577	00	\$15.03	
92579	00	\$36.17	\$34.44
92582	00	\$28.12	
92583	00	\$24.37	
92584	00	\$58.03	
92585	TC	\$56.52	
92585	00	\$76.17	
92585	26	\$19.66	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
92585	52	\$38.09	
92586	00	\$49.04	
92587	TC	\$29.08	
92587	00	\$34.17	
92587	26	\$5.09	
92587	52	\$17.09	
92588	TC	\$37.40	
92588	00	\$51.79	
92588	26	\$14.40	
92588	52	\$25.90	
92590	00	\$43.50	
92591	00	\$46.55	
92592	00	\$18.46	
92593	00	\$18.46	
92594	00	\$9.97	
92595	00	\$9.97	
92601	00	\$131.75	\$125.42
92602	00	\$83.71	\$77.38
92603	00	\$112.32	\$105.70
92604	00	\$66.61	\$61.44
92605	00	M	
92606	00	M	
92607	00	\$111.69	
92608	00	\$21.38	
92609	00	\$58.63	
92610	00	\$74.99	
92611	00	\$78.44	
92612	00	\$118.62	\$51.90
92613	00	\$30.03	\$29.74
92614	00	\$107.12	\$51.90
92615	00	\$26.32	
92616	00	\$148.25	\$76.92
92617	00	\$33.13	
92620	00	\$45.09	
92621	00	\$10.58	
92625	00	\$44.81	
92640	00	\$38.67	
92700	00	M	
92950	00	\$217.59	\$135.62
92953	00	\$8.68	
92960	00	\$217.87	\$101.96
92961	00	\$198.12	
92970	00	\$137.23	
92971	00	\$78.61	
92973	00	\$139.25	
92974	00	\$127.53	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
92975	00	\$306.57	
92977	00	\$146.78	
92978	TC	\$126.00	
92978	00	\$203.25	
92978	26	\$75.83	
92979	TC	\$63.75	
92979	00	\$125.25	
92979	26	\$60.70	
92980	00	\$635.17	
92981	00	\$176.48	
92982	00	\$471.02	
92984	00	\$126.03	
92986	00	\$1,050.56	
92987	00	\$1,088.09	
92990	00	\$830.63	
92992	00	\$530.00	
92993	00	\$1,026.08	
92995	00	\$518.11	
92996	00	\$136.58	
92997	00	\$493.00	
92998	00	\$247.12	
93000	00	\$17.28	
93005	00	\$10.62	
93010	FP	\$6.66	
93010	00	\$6.66	
93012	00	\$148.80	
93014	00	\$21.03	
93015	00	\$78.78	
93016	00	\$18.82	
93017	00	\$47.77	
93018	00	\$12.19	
93024	TC	\$43.34	
93024	00	\$91.50	
93024	26	\$48.16	
93025	00	\$188.94	
93040	00	\$10.50	
93041	00	\$4.44	
93042	00	\$6.05	
93224	00	\$103.35	
93225	00	\$31.26	
93226	00	\$50.48	
93227	00	\$21.60	
93228	00	\$20.69	
93229	00	M	
93230	00	\$107.34	
93231	00	\$33.68	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
93232	00	\$52.64	
93233	00	\$21.03	
93235	00	\$94.50	
93236	00	\$84.75	
93237	00	\$18.53	
93268	00	\$208.56	
93270	00	\$22.92	
93271	00	\$164.91	
93272	00	\$20.74	
93278	TC	\$25.34	
93278	00	\$35.39	
93278	26	\$10.05	
93280	TC	\$16.88	
93280	00	\$51.71	
93280	26	\$34.85	
93281	TC	\$19.76	
93281	00	\$60.46	
93281	26	\$40.71	
93282	00	\$55.79	
93283	TC	\$20.30	
93283	00	\$68.02	
93283	26	\$37.96	
93284	TC	\$17.83	
93284	00	\$79.85	
93284	26	\$56.80	
93285	TC	\$13.72	
93285	00	\$37.42	
93285	26	\$23.71	
93286	TC	\$9.06	
93286	00	\$21.16	
93286	26	\$12.10	
93287	TC	\$10.15	
93287	00	\$28.03	
93287	26	\$17.88	
93288	TC	\$13.99	
93288	00	\$33.47	
93288	26	\$19.46	
93289	TC	\$16.88	
93289	00	\$52.03	
93289	26	\$35.15	
93290	TC	\$7.68	
93290	00	\$24.81	
93290	26	\$17.14	
93291	TC	\$12.48	
93291	00	\$32.10	
93291	26	\$19.61	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
93292	TC	\$9.60	
93292	00	\$29.07	
93292	26	\$19.48	
93293	TC	\$31.13	
93293	00	\$44.66	
93293	26	\$13.53	
93294	00	\$29.44	
93295	00	\$53.28	
93296	00	\$27.59	
93297	00	\$20.69	
93298	00	\$32.11	
93299	00	M	
93303	TC	\$115.53	
93303	00	\$166.92	
93303	26	\$51.38	
93304	TC	\$70.19	
93304	00	\$99.91	
93304	26	\$29.72	
93306	TC	\$60.45	
93306	00	\$202.21	
93306	26	\$57.77	
93307	TC	\$105.75	
93307	00	\$143.56	
93307	26	\$37.82	
93308	TC	\$63.57	
93308	00	\$85.49	
93308	26	\$21.92	
93312	00	\$239.00	
93312	26	\$88.44	
93313	00	\$32.57	
93314	00	\$204.40	
93314	26	\$50.39	
93315	TC	\$126.75	
93315	00	\$264.75	
93315	26	\$112.95	
93316	00	\$34.73	
93317	TC	\$126.75	
93317	00	\$216.00	
93317	26	\$70.12	
93318	26	\$83.20	
93320	TC	\$47.62	
93320	00	\$63.20	
93320	26	\$15.58	
93321	TC	\$24.65	
93321	00	\$30.95	
93321	26	\$6.31	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
93325	TC	\$53.71	
93325	00	\$56.62	
93325	26	\$2.91	
93325	99	\$2.91	
93350	TC	\$89.46	
93350	00	\$150.70	
93350	26	\$61.24	
93351	00	\$211.18	
93352	00	\$29.35	
93501	TC	\$505.97	
93501	00	\$632.99	
93501	26	\$127.02	
93503	00	\$84.57	
93505	TC	\$298.67	
93505	00	\$482.79	
93505	26	\$184.13	
93508	TC	\$575.85	
93508	00	\$756.03	
93508	26	\$180.17	
93510	TC	\$936.81	
93510	00	\$1,126.53	
93510	26	\$189.71	
93511	TC	\$979.50	
93511	00	\$1,193.25	
93511	26	\$219.42	
93514	00	\$1,279.50	
93514	26	\$292.33	
93524	TC	\$1,279.50	
93524	00	\$1,581.75	
93524	26	\$301.69	
93526	TC	\$1,194.48	
93526	00	\$1,454.69	
93526	26	\$260.21	
93527	TC	\$1,279.50	
93527	00	\$1,613.25	
93527	26	\$314.82	
93528	TC	\$1,279.50	
93528	00	\$1,661.25	
93528	26	\$383.32	
93529	TC	\$1,279.50	
93529	00	\$1,486.50	
93529	26	\$209.30	
93530	TC	\$460.50	
93530	00	\$645.75	
93530	26	\$177.24	
93531	TC	\$1,577.25	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
93531	00	\$2,007.75	\$2,000.75
93531	26	\$345.53	
93532	00	\$1,712.25	
93532	26	\$404.35	
93533	00	\$1,863.75	
93533	26	\$280.42	
93539	00	\$49.01	\$16.79
93540	00	\$138.56	\$18.04
93541	00	\$12.19	
93542	00	\$84.67	\$12.19
93543	00	\$47.85	\$12.19
93544	00	\$35.07	\$10.63
93545	00	\$97.90	\$16.79
93555	TC	\$97.15	
93555	00	\$130.91	
93555	26	\$33.76	
93556	TC	\$155.50	
93556	00	\$190.18	
93556	26	\$34.68	
93561	TC	\$15.00	
93561	00	\$37.50	
93561	26	\$18.66	
93562	TC	\$9.00	
93562	00	\$15.75	
93562	26	\$5.76	
93571	TC	\$125.25	
93571	00	\$199.50	
93571	26	\$75.26	
93572	00	\$123.00	
93572	26	\$58.99	
93580	00	\$764.41	
93581	00	\$1,011.58	
93600	TC	\$165.75	
93600	00	\$264.75	
93600	26	\$89.57	
93602	TC	\$117.75	
93602	00	\$213.00	
93602	26	\$88.85	
93603	TC	\$140.25	
93603	00	\$238.50	
93603	26	\$88.69	
93609	TC	\$75.75	
93609	00	\$492.75	
93609	26	\$210.98	
93610	TC	\$105.00	
93610	00	\$238.50	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
93610	26	\$125.98	
93612	TC	\$99.75	
93612	00	\$233.25	
93612	26	\$125.54	
93613	00	\$296.51	
93615	TC	\$9.00	
93615	00	\$48.75	
93615	26	\$39.74	
93616	00	\$73.50	
93616	26	\$53.18	
93618	TC	\$110.25	
93618	00	\$309.00	\$309.75
93618	26	\$180.31	
93619	TC	\$257.25	
93619	00	\$667.50	
93619	26	\$314.37	
93620	00	\$1,365.00	
93620	26	\$493.72	
93621	26	\$88.80	
93622	26	\$130.26	
93623	00	\$337.50	
93623	26	\$120.36	
93624	TC	\$54.75	
93624	00	\$262.50	
93624	26	\$208.77	
93631	00	\$509.25	
93631	26	\$306.04	
93640	TC	\$198.75	
93640	00	\$362.25	
93640	26	\$147.79	
93641	TC	\$198.75	
93641	00	\$476.25	
93641	26	\$250.10	
93642	TC	\$177.31	
93642	00	\$386.20	
93642	26	\$208.89	
93650	00	\$452.62	
93651	00	\$685.95	
93652	00	\$747.13	
93660	00	\$132.12	
93660	26	\$78.36	
93662	00	\$221.25	
93662	26	\$117.32	
93701	TC	\$22.28	
93701	00	\$29.22	
93701	26	\$6.95	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
93720	00	\$33.63	
93721	00	\$27.26	
93722	00	\$6.37	
93724	TC	\$72.80	
93724	00	\$273.64	
93724	26	\$200.84	
93745	TC	M	
93745	00	M	
93745	26	M	
93784	00	\$53.24	
93786	00	\$24.87	
93788	00	\$13.94	
93790	00	\$14.43	
93797	00	\$14.17	\$7.55
93798	00	\$21.08	\$11.58
93799	00	M	
93875	TC	\$69.64	
93875	00	\$77.86	
93875	26	\$8.22	
93880	TC	\$110.92	
93880	00	\$134.16	
93880	26	\$23.24	
93882	TC	\$109.07	
93882	00	\$124.54	
93882	26	\$15.47	
93886	TC	\$111.08	
93886	00	\$147.64	
93886	26	\$36.56	
93888	TC	\$44.63	
93888	00	\$68.93	
93888	26	\$24.30	
93890	TC	\$69.85	
93890	00	\$109.17	
93890	26	\$39.31	
93892	TC	\$70.01	
93892	00	\$114.34	
93892	26	\$44.33	
93893	TC	\$70.01	
93893	00	\$114.34	
93893	26	\$44.33	
93922	TC	\$82.84	
93922	00	\$92.45	
93922	26	\$9.61	
93923	TC	\$124.03	
93923	00	\$141.38	
93923	26	\$17.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
93924	TC	\$152.61	
93924	00	\$172.24	
93924	26	\$19.63	
93925	TC	\$111.41	
93925	00	\$133.72	
93925	26	\$22.32	
93926	TC	\$70.63	
93926	00	\$85.50	
93926	26	\$14.86	
93930	TC	\$110.49	
93930	00	\$128.44	
93930	26	\$17.97	
93931	TC	\$70.17	
93931	00	\$82.08	
93931	26	\$11.91	
93965	TC	\$81.85	
93965	00	\$95.20	
93965	26	\$13.35	
93970	TC	\$110.31	
93970	00	\$136.63	
93970	26	\$26.33	
93971	TC	\$69.85	
93971	00	\$87.37	
93971	26	\$17.51	
93975	TC	\$111.08	
93975	00	\$181.23	
93975	26	\$70.15	
93976	TC	\$110.16	
93976	00	\$156.84	
93976	26	\$46.70	
93978	TC	\$110.31	
93978	00	\$135.67	
93978	26	\$25.37	
93979	TC	\$70.01	
93979	00	\$87.20	
93979	26	\$17.19	
93980	TC	\$83.06	
93980	00	\$131.69	
93980	26	\$48.63	
93981	TC	\$82.08	
93981	00	\$99.14	
93981	26	\$17.06	
93982	00	\$31.46	
93990	TC	\$70.63	
93990	00	\$80.37	
93990	26	\$9.74	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
94002	00	\$66.96	
94003	00	\$48.72	
94004	00	\$35.31	
94010	TC	\$19.25	
94010	00	\$25.62	
94010	26	\$6.37	
94014	00	\$37.55	
94015	00	\$18.25	
94016	00	\$19.29	
94060	TC	\$32.73	
94060	00	\$43.80	
94060	26	\$11.07	
94070	TC	\$22.62	
94070	00	\$44.58	
94070	26	\$21.96	
94150	TC	\$13.07	
94150	00	\$15.70	
94150	26	\$2.62	
94200	TC	\$12.92	
94200	00	\$17.12	
94200	26	\$4.19	
94240	TC	\$19.94	
94240	00	\$29.44	
94240	26	\$9.51	
94250	TC	\$15.95	
94250	00	\$20.15	
94250	26	\$4.19	
94260	TC	\$18.66	
94260	00	\$23.17	
94260	26	\$4.52	
94350	TC	\$18.36	
94350	00	\$27.87	
94350	26	\$9.51	
94360	TC	\$22.37	
94360	00	\$31.88	
94360	26	\$9.51	
94370	TC	\$17.24	
94370	00	\$26.75	
94370	26	\$9.51	
94375	TC	\$16.95	
94375	00	\$28.02	
94375	26	\$11.07	
94400	TC	\$24.67	
94400	00	\$39.44	
94400	26	\$14.76	
94450	TC	\$23.85	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
94450	00	\$38.19	
94450	26	\$14.34	
94610	00	\$45.88	
94620	TC	\$43.33	
94620	00	\$66.82	
94620	26	\$23.49	
94621	TC	\$66.05	
94621	00	\$119.50	
94621	26	\$53.45	
94640	00	\$10.05	
94642	00	\$26.25	
94644	00	\$27.88	
94645	00	\$10.33	
94660	00	\$42.97	\$28.01
94662	00	\$27.88	
94664	00	\$10.89	
94667	00	\$15.91	
94668	00	\$14.07	
94680	TC	\$40.78	
94680	00	\$50.28	
94680	26	\$9.51	
94681	TC	\$51.64	
94681	00	\$58.98	
94681	26	\$7.33	
94690	TC	\$43.68	
94690	00	\$46.30	
94690	26	\$2.63	
94720	TC	\$29.85	
94720	00	\$39.35	
94720	26	\$9.51	
94725	TC	\$55.39	
94725	00	\$64.89	
94725	26	\$9.51	
94750	TC	\$43.39	
94750	00	\$51.64	
94750	26	\$8.26	
94760	00	\$1.71	
94761	00	\$3.39	
94762	00	\$20.32	
94772	00	\$256.50	
94772	26	\$100.50	
94774	TC	M	
94774	00	M	
94774	26	M	
94775	00	M	
94776	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
94777	00	\$34.50	
94799	00	M	
95004	00	\$4.19	
95010	00	\$13.50	
95015	00	\$9.47	
95024	00	\$5.06	
95027	00	\$3.91	
95028	00	\$7.90	
95044	00	\$5.31	
95052	00	\$5.89	
95056	00	\$20.55	
95060	00	\$15.80	
95065	00	\$13.08	
95070	00	\$44.85	
95071	00	\$56.36	
95075	00	\$48.85	\$36.48
95115	00	\$9.18	
95117	00	\$11.48	
95144	00	\$8.35	\$2.31
95145	00	\$11.51	\$2.31
95146	00	\$17.84	\$2.31
95147	00	\$17.26	\$2.31
95148	00	\$24.17	\$2.31
95149	00	\$31.94	\$2.31
95165	00	\$8.35	\$2.31
95170	00	\$6.62	\$2.31
95180	00	\$110.37	\$81.61
95199	00	M	
95250	00	\$109.43	
95803	00	M	
95805	TC	\$337.02	
95805	00	\$408.01	
95805	26	\$70.99	
95806	TC	\$94.16	
95806	00	\$156.61	
95806	26	\$62.45	
95807	TC	\$339.53	
95807	00	\$400.82	
95807	26	\$61.29	
95808	TC	\$398.77	
95808	00	\$498.36	
95808	26	\$99.57	
95810	TC	\$481.90	
95810	00	\$613.26	
95810	26	\$131.36	
95811	TC	\$533.22	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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Proc	Mod	Payment Facility	
		Rate	Rate
95811	00	\$674.41	
95811	26	\$141.19	
95812	TC	\$133.48	
95812	00	\$175.61	
95812	26	\$42.13	
95813	TC	\$150.45	
95813	00	\$217.25	
95813	26	\$66.80	
95816	TC	\$119.55	
95816	00	\$161.67	
95816	26	\$42.13	
95819	TC	\$121.56	
95819	00	\$163.68	
95819	26	\$42.13	
95822	TC	\$136.34	
95822	00	\$178.47	
95822	26	\$42.13	
95824	TC	\$11.25	
95824	00	\$43.50	
95824	26	\$28.80	
95827	TC	\$196.59	
95827	00	\$237.71	
95827	26	\$41.13	
95829	TC	\$744.05	
95829	00	\$983.81	
95829	26	\$239.76	
95830	00	\$139.48	\$65.85
95831	00	\$20.50	\$11.30
95832	00	\$18.65	\$11.75
95833	00	\$28.91	\$18.56
95834	00	\$34.04	\$23.97
95851	00	\$13.53	\$6.34
95852	00	\$10.53	\$4.49
95857	00	\$32.27	\$20.76
95860	TC	\$26.73	
95860	00	\$65.23	
95860	26	\$38.51	
95861	TC	\$27.84	
95861	00	\$89.25	
95861	26	\$61.41	
95863	TC	\$33.59	
95863	00	\$107.13	
95863	26	\$73.55	
95864	TC	\$49.34	
95864	00	\$127.81	
95864	26	\$78.47	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
95865	TC	\$23.13	
95865	00	\$86.46	
95865	26	\$63.34	
95866	00	\$66.15	
95867	TC	\$22.11	
95867	00	\$53.24	
95867	26	\$31.14	
95868	TC	\$26.84	
95868	00	\$73.43	
95868	26	\$46.59	
95869	TC	\$16.37	
95869	00	\$31.22	
95869	26	\$14.85	
95870	TC	\$15.80	
95870	00	\$30.65	
95870	26	\$14.85	
95872	TC	\$20.23	
95872	00	\$124.13	
95872	26	\$103.90	
95873	TC	\$15.80	
95873	00	\$30.94	
95873	26	\$15.14	
95874	TC	\$15.22	
95874	00	\$30.36	
95874	26	\$15.14	
95875	TC	\$30.42	
95875	00	\$74.49	
95875	26	\$44.07	
95900	TC	\$27.01	
95900	00	\$43.72	
95900	26	\$16.71	
95903	TC	\$25.58	
95903	00	\$49.26	
95903	26	\$23.69	
95904	TC	\$24.43	
95904	00	\$38.03	
95904	26	\$13.60	
95920	TC	\$35.73	
95920	00	\$119.81	
95920	26	\$84.08	
95921	TC	\$18.96	
95921	00	\$53.11	
95921	26	\$34.15	
95922	TC	\$25.00	
95922	00	\$62.35	
95922	26	\$37.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
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Proc	Mod	Payment Facility	
		Rate	Rate
95923	TC	\$52.61	
95923	00	\$87.75	
95923	26	\$35.15	
95925	TC	\$55.73	
95925	00	\$77.09	
95925	26	\$21.35	
95926	TC	\$54.87	
95926	00	\$76.10	
95926	26	\$21.22	
95927	TC	\$56.60	
95927	00	\$78.53	
95927	26	\$21.93	
95928	TC	\$84.96	
95928	00	\$143.52	
95928	26	\$58.56	
95929	TC	\$92.15	
95929	00	\$151.00	
95929	26	\$58.85	
95930	TC	\$66.86	
95930	00	\$80.78	
95930	26	\$13.93	
95933	TC	\$25.54	
95933	00	\$48.75	
95933	26	\$23.21	
95934	TC	\$13.21	
95934	00	\$33.34	
95934	26	\$20.13	
95936	TC	\$9.47	
95936	00	\$30.98	
95936	26	\$21.51	
95937	TC	\$15.51	
95937	00	\$41.43	
95937	26	\$25.92	
95950	TC	\$117.91	
95950	00	\$176.77	
95950	26	\$58.86	
95951	TC	\$485.25	
95951	00	\$727.50	
95951	26	\$233.85	
95953	TC	\$187.51	
95953	00	\$314.81	
95953	26	\$127.29	
95954	TC	\$103.48	
95954	00	\$195.32	
95954	26	\$91.84	
95955	TC	\$66.12	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
95955	00	\$104.46	
95955	26	\$38.35	
95956	TC	\$430.84	
95956	00	\$550.74	
95956	26	\$119.90	
95957	TC	\$102.27	
95957	00	\$179.53	
95957	26	\$77.27	
95958	TC	\$105.56	
95958	00	\$270.56	
95958	26	\$164.99	
95961	TC	\$50.98	
95961	00	\$172.85	
95961	26	\$121.87	
95962	TC	\$38.32	
95962	00	\$166.21	
95962	26	\$127.88	
95965	26	\$315.07	
95966	26	\$156.53	
95967	26	\$131.70	
95970	00	\$38.22	\$16.93
95971	00	\$41.13	\$28.76
95972	00	\$78.04	\$57.33
95973	00	\$42.66	\$34.90
95974	00	\$131.75	\$116.51
95975	00	\$72.89	\$66.85
95978	00	\$155.58	\$134.31
95979	00	\$70.15	\$63.82
95980	00	\$30.52	
95981	00	\$21.24	\$12.04
95982	00	\$32.42	\$24.08
95990	00	\$45.67	
95991	00	\$67.13	\$27.44
95992	00	M	
95999	00	M	
96000	00	\$66.14	
96001	00	\$79.35	
96002	00	\$15.52	
96003	00	\$13.70	
96004	00	\$84.34	
96101	HP	\$79.25	\$78.67
96101	00	\$67.51	\$66.93
96102	00	\$39.52	\$17.95
96103	00	\$30.77	\$18.69
96105	00	\$51.58	
96110	00	\$7.58	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
96111	00	\$100.69	\$98.96
96116	00	\$74.42	\$69.83
96118	00	\$86.80	\$68.68
96119	00	\$54.29	\$21.78
96120	00	\$49.47	\$18.40
96150	00	\$18.24	\$17.95
96151	00	\$17.60	\$17.31
96152	00	\$16.99	\$16.70
96153	00	\$3.87	\$3.59
96154	00	\$16.67	\$16.38
96360	00	\$42.60	
96361	00	\$12.32	
96365	00	\$52.05	
96366	00	\$16.70	
96367	00	\$26.33	
96368	00	\$15.57	
96369	00	\$113.67	
96370	00	\$12.03	
96371	00	\$55.03	
96372	FP	\$4.00	
96372	00	\$4.00	
96373	00	\$13.93	
96374	00	\$41.40	
96375	00	\$17.84	
96376	00	M	
96401	00	\$49.32	
96402	00	\$31.17	
96405	00	\$103.13	\$22.02
96406	00	\$117.99	\$31.71
96409	00	\$89.78	
96411	00	\$51.14	
96413	00	\$121.52	
96415	00	\$26.80	
96416	00	\$131.65	
96417	00	\$59.61	
96420	00	\$84.10	
96422	00	\$139.89	
96423	00	\$60.87	
96425	00	\$137.31	
96440	00	\$265.86	\$100.77
96445	00	\$257.50	\$94.71
96450	00	\$216.10	\$74.88
96521	00	\$106.08	
96522	00	\$84.50	
96523	00	\$20.68	
96542	00	\$134.22	\$36.15

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Rate	Payment Facility Rate
96549	00	M	
96567	00	\$82.50	
96570	00	\$43.43	
96571	00	\$21.22	
96900	00	\$14.65	
96904	00	\$54.78	
96910	00	\$43.68	
96912	00	\$55.89	
96913	00	\$75.26	
96920	00	\$120.59	\$48.69
96921	00	\$118.78	\$48.89
96922	00	\$176.49	\$83.60
96999	00	M	
97110	00	\$21.40	
97112	00	\$22.42	
97116	00	\$18.81	
97124	00	\$17.25	
97139	00	\$9.00	
97140	00	\$20.06	
97150	00	\$13.57	
97530	00	\$22.68	
97532	00	\$18.65	
97533	00	\$19.80	
97535	00	\$23.00	
97537	00	\$20.70	
97542	00	\$20.98	
97597	00	\$42.29	\$28.20
97598	00	\$52.68	\$36.87
97602	00	\$9.32	
97605	00	\$26.27	\$20.51
97606	00	\$28.28	\$22.54
97760	00	\$24.12	
97761	00	\$21.69	
97762	00	\$23.99	
97799	00	M	
97802	00	\$21.56	\$21.27
98925	00	\$21.69	\$16.80
98926	00	\$29.85	\$24.68
98927	00	\$38.84	\$32.52
98928	00	\$45.47	\$38.28
98929	00	\$52.09	\$43.75
99058	00	\$35.25	
99070	00	\$6.65	
99071	FP	\$3.00	
99071	00	\$3.00	
99082	00	M	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
99143	00	\$45.00	
99144	00	\$45.00	
99145	00	\$22.50	
99148	00	\$91.57	
99149	00	\$74.92	
99150	00	\$33.30	
99170	00	\$102.11	\$67.02
99175	00	\$26.36	
99183	00	\$152.02	\$86.74
99195	00	\$43.41	
99199	00	M	
99201	FP	\$28.16	\$17.51
99201	P4	\$28.16	\$17.51
99201	00	\$28.16	\$17.51
99202	FP	\$48.60	\$33.93
99202	P4	\$48.60	\$33.93
99202	00	\$48.60	\$33.93
99203	FP	\$71.16	\$51.90
99203	P4	\$71.16	\$51.90
99203	00	\$71.16	\$51.90
99204	FP	\$109.40	\$86.97
99204	P4	\$109.40	\$86.97
99204	00	\$109.40	\$86.97
99205	FP	\$137.66	\$113.22
99205	P4	\$137.66	\$113.22
99205	00	\$137.66	\$113.22
99211	FP	\$15.29	\$6.66
99211	P4	\$15.29	\$6.66
99211	00	\$15.29	\$6.66
99212	FP	\$29.01	\$17.51
99212	P4	\$29.01	\$17.51
99212	00	\$29.01	\$17.51
99213	FP	\$47.31	\$33.79
99213	P4	\$47.31	\$33.79
99213	00	\$47.31	\$33.79
99214	FP	\$71.15	\$52.74
99214	P4	\$71.15	\$52.74
99214	00	\$71.15	\$52.74
99215	FP	\$96.21	\$75.50
99215	P4	\$96.21	\$75.50
99215	00	\$96.21	\$75.50
99217	00	\$51.62	
99218	00	\$48.75	
99219	00	\$80.18	
99220	00	\$112.76	
99221	00	\$68.43	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
99222	00	\$94.03	
99223	00	\$138.47	
99231	P4	\$28.45	
99231	00	\$28.45	
99232	P4	\$51.07	
99232	00	\$51.07	
99233	P4	\$73.21	
99233	00	\$73.21	
99234	00	\$97.59	
99235	00	\$128.89	
99236	00	\$160.47	
99238	00	\$51.78	
99239	00	\$74.50	
99241	P4	\$37.28	\$24.91
99241	TF	\$37.28	\$24.91
99241	00	\$37.28	\$24.91
99242	P4	\$69.58	\$52.60
99242	TF	\$69.58	\$52.60
99242	00	\$69.58	\$52.60
99243	FP	\$95.68	\$73.54
99243	P4	\$95.68	\$73.54
99243	TF	\$95.68	\$73.54
99243	00	\$95.68	\$73.54
99244	P4	\$141.30	\$116.00
99244	TF	\$141.30	\$116.00
99244	00	\$141.30	\$116.00
99245	P4	\$174.31	\$145.55
99245	TF	\$174.31	\$145.55
99245	00	\$174.31	\$145.55
99251	P4	\$36.59	
99251	00	\$36.59	
99252	P4	\$57.81	
99252	00	\$57.81	
99253	P4	\$86.74	
99253	00	\$86.74	
99254	P4	\$125.58	
99254	00	\$125.58	
99255	P4	\$154.42	
99255	00	\$154.42	
99281	P4	\$15.65	
99281	00	\$15.65	
99282	P4	\$29.48	
99282	00	\$29.48	
99283	P4	\$47.01	
99283	00	\$47.01	
99284	P4	\$87.37	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
99284	00	\$87.37	
99285	P4	\$130.09	
99285	00	\$130.09	
99288	00	\$10.45	
99288	26	\$10.45	
99291	00	\$199.10	\$163.72
99292	00	\$89.26	\$82.07
99304	00	\$61.34	
99305	00	\$85.44	
99306	00	\$109.54	
99307	00	\$30.17	
99308	00	\$46.39	
99309	00	\$61.86	
99310	00	\$90.88	
99315	00	\$45.02	
99316	00	\$58.85	
99318	00	\$64.22	
99324	00	\$42.37	
99325	00	\$61.64	
99326	00	\$100.58	
99327	00	\$130.66	
99328	00	\$154.41	
99334	00	\$42.69	
99335	00	\$65.79	
99336	00	\$93.35	
99337	00	\$133.86	
99341	P4	\$42.08	
99341	00	\$42.08	
99342	P4	\$61.64	
99342	00	\$61.64	
99343	P4	\$97.99	
99343	00	\$97.99	
99344	P4	\$128.43	
99344	00	\$128.43	
99345	P4	\$154.41	
99345	00	\$154.41	
99347	P4	\$40.48	
99347	00	\$40.48	
99348	P4	\$61.03	
99348	00	\$61.03	
99349	P4	\$89.22	
99349	00	\$89.22	
99350	P4	\$124.97	
99350	00	\$124.97	
99354	00	\$71.40	\$67.66
99356	00	\$65.35	

SC DEPT OF HEALTH AND HUMAN SERVICES  
 PHYSICIAN MEDICAID PAYMENT SCHEDULE  
 EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
 M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
99360	00	\$42.63	
99381	00	\$83.59	\$53.11
99382	00	\$90.67	\$60.88
99383	00	\$89.30	\$60.88
99384	FP	\$97.23	\$68.46
99384	00	\$97.23	\$68.46
99385	FP	\$97.23	\$68.46
99385	00	\$97.23	\$68.46
99386	FP	\$113.98	\$84.20
99386	00	\$113.98	\$84.20
99387	00	\$124.15	\$91.62
99391	00	\$67.10	\$45.53
99392	00	\$75.03	\$53.11
99393	00	\$74.34	\$53.11
99394	00	\$81.77	\$60.88
99395	00	\$82.45	\$60.88
99396	00	\$90.38	\$68.46
99397	00	\$100.92	\$76.61
99401	FP	\$27.66	\$17.88
99401	00	\$27.66	\$17.88
99402	FP	\$47.04	\$36.40
99402	00	\$47.04	\$36.40
99403	HQ	\$65.96	\$54.75
99403	00	\$65.96	\$54.75
99404	HQ	\$84.74	\$72.95
99404	00	\$84.74	\$72.95
99408	00	\$24.93	
99409	00	\$48.88	
99420	TG	\$100.00	
99460	00	\$45.45	
99461	00	\$66.84	\$50.64
99462	00	\$24.27	
99463	00	\$60.80	
99464	00	\$57.24	
99465	00	\$117.01	
99466	00	\$186.79	
99467	00	\$93.27	
99468	00	\$699.01	
99469	00	\$307.05	
99471	00	\$621.95	
99472	00	\$308.81	
99475	00	\$429.18	
99476	00	\$256.29	
99477	00	\$258.29	
99478	00	\$110.59	
99479	00	\$97.39	

SC DEPT OF HEALTH AND HUMAN SERVICES  
PHYSICIAN MEDICAID PAYMENT SCHEDULE  
EFFECTIVE FOR DATES OF SERVICE 04/01/2009  
M=MANUAL PRICING

Proc	Mod	Payment Facility	
		Rate	Rate
99480	00	\$93.68	
99499	00	M	
99500	00	M	
99502	00	M	
99503	00	M	
99504	00	M	
99505	00	M	
99506	00	M	
99507	00	M	
99509	00	M	
99510	00	M	
99511	00	M	
99512	00	M	
99602	00	M	