

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
0042T		\$98.00	5/1/20	12/31/25
0174T		\$18.74	5/1/20	
0175T		\$18.74	5/1/20	
0330T	5732	\$33.43	5/1/20	
0331T	5593	\$1,272.19	5/1/20	
0332T	5593	\$1,272.19	5/1/20	
0348T	5522	\$112.08	5/1/20	
0349T	5522	\$112.08	5/1/20	
0350T	5521	\$79.81	5/1/20	
0394T	5622	\$236.36	5/1/20	12/31/25
0395T	5624	\$740.52	5/1/20	
0400T		\$40.75	5/1/20	12/31/20
0401T		\$40.75	5/1/20	12/31/20
0422T	5521	\$79.81	5/1/20	
0485T	5732	\$33.43	5/1/20	
0486T	5732	\$33.43	5/1/20	
0487T	5734	\$109.03	5/1/20	12/31/22
0501T		\$138.35	5/1/20	12/31/23
0502T		\$138.35	5/1/20	12/31/23
0503T	1511	\$950.50	5/1/20	12/31/23
0504T		\$138.35	5/1/20	12/31/23
0507T	5733	\$55.01	5/1/20	
0508T	5522	\$112.08	5/1/20	12/31/23
0546T		\$41.80	5/1/20	
0554T		\$59.93	5/1/20	
0555T	5731	\$22.99	5/1/20	
0556T	5523	\$233.04	5/1/20	
0557T		\$112.08	5/1/20	
0558T	5521	\$79.81	5/1/20	
0598T	5722	\$253.10	7/1/20	
0599T		\$0.00	7/1/20	
0604T	5012	\$115.93	7/1/20	
0605T	5741	\$36.25	7/1/20	
0606T		\$55.96	7/1/20	
0609T		\$385.09	7/1/20	
0610T		\$385.09	7/1/20	
0611T		\$385.09	7/1/20	
0612T		\$385.09	7/1/20	
0623T		\$138.35	1/1/21	12/31/25
0624T		\$138.35	1/1/21	12/31/25
0625T		\$950.50	1/1/21	12/31/25
0626T		\$138.35	1/1/21	12/31/25
0633T	5522	\$108.97	1/1/21	
0634T	5571	\$178.55	1/1/21	
0635T	5571	\$178.55	1/1/21	
0636T	5523	\$230.13	1/1/21	
0637T	5572	\$368.12	1/1/21	
0638T	5572	\$368.12	1/1/21	
0640T		\$10.03	7/1/21	
0641T	5732	\$33.84	7/1/21	12/31/23
0648T	5523	\$230.13	7/1/21	
0649T		\$230.13	7/1/21	
0651T	5301	\$809.60	7/1/21	
0689T	5521	\$82.61	1/1/22	
0690T		\$138.35	1/1/22	
0691T		\$16.58	1/1/22	
0693T	1505	\$350.50	1/1/22	
0694T		\$31.71	1/1/22	
0697T	5523	\$235.00	1/1/22	
0698T		\$230.13	1/1/22	
0700T		\$253.10	1/1/22	
0701T		\$0.00	1/1/22	
0710T		\$138.35	1/1/22	
0711T		\$138.35	1/1/22	
0712T	5521	\$82.61	1/1/22	
0713T		\$138.35	1/1/22	
0721T	1508	\$650.50	7/1/22	
0722T		\$138.35	7/1/22	
0723T	1511	\$950.50	7/1/22	
0724T		\$138.35	7/1/22	
0742T		\$31.71	1/1/23	
0743T		\$59.93	1/1/23	
0749T		\$59.93	1/1/23	
0750T		\$59.93	1/1/23	
0777T		\$74.60	1/1/23	
0779T	5723	\$483.43	1/1/23	
0807T	5721	\$145.43	7/1/23	
0808T	5722	\$280.06	7/1/23	
0815T		\$4.69	1/1/24	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
0857T	5522	\$104.75	1/1/24	
0859T		\$10.03	1/1/24	
0860T		\$10.03	1/1/24	
0868T	5723	\$510.68	7/1/24	
0876T		\$112.08	7/1/24	
0897T	5724	\$996.18	7/1/24	
0898T	5724	\$996.18	7/1/24	
0899T		\$996.18	7/1/24	
0900T		\$996.18	7/1/24	
0932T	5743	\$299.91	1/1/25	
0945T		\$41.80	1/1/25	
0946T	5522	\$106.34	1/1/25	
0947T		\$12,500.50	1/1/25	
0977T	5301	\$937.56	7/1/25	
0984T		\$100.55	7/1/25	
0985T		\$80.01	7/1/25	
0986T		\$100.55	7/1/25	
0987T		\$80.01	7/1/25	
0992T	5523	\$243.77	1/1/26	
0993T	5523	\$243.77	1/1/26	
70010	5572	\$381.85	5/1/20	
70015	5573	\$680.82	5/1/20	
70030	5521	\$79.81	5/1/20	
70100	5521	\$79.81	5/1/20	
70110	5522	\$112.08	5/1/20	
70120	5522	\$112.08	5/1/20	
70130	5522	\$112.08	5/1/20	
70134	5524	\$481.58	5/1/20	
70140	5521	\$79.81	5/1/20	
70150	5522	\$112.08	5/1/20	
70160	5521	\$79.81	5/1/20	
70170	5523	\$233.04	5/1/20	
70190	5521	\$79.81	5/1/20	
70200	5522	\$112.08	5/1/20	
70210	5521	\$79.81	5/1/20	
70220	5521	\$79.81	5/1/20	
70240	5521	\$79.81	5/1/20	
70250	5522	\$112.08	5/1/20	
70260	5522	\$112.08	5/1/20	
70300	5521	\$79.81	5/1/20	
70310	5523	\$233.04	5/1/20	
70320	5523	\$233.04	5/1/20	
70328	5521	\$79.81	5/1/20	
70330	5521	\$79.81	5/1/20	
70332	5523	\$233.04	5/1/20	
70350	5521	\$79.81	5/1/20	
70355	5521	\$79.81	5/1/20	
70360	5521	\$79.81	5/1/20	
70370	5521	\$79.81	5/1/20	
70371	5523	\$233.04	5/1/20	
70380	5521	\$79.81	5/1/20	
70390	5523	\$233.04	5/1/20	
70557	5524	\$497.34	5/1/20	
70558	5571	\$201.82	5/1/20	
70559	5571	\$201.82	5/1/20	
71045	5521	\$79.81	5/1/20	
71046	5521	\$79.81	5/1/20	
71047	5521	\$79.81	5/1/20	
71048	5522	\$112.08	5/1/20	
71100	5521	\$79.81	5/1/20	
71101	5522	\$112.08	5/1/20	
71110	5522	\$112.08	5/1/20	
71111	5522	\$112.08	5/1/20	
71120	5521	\$79.81	5/1/20	
71130	5521	\$79.81	5/1/20	
71271	5521	\$103.43	1/1/21	
72020	5521	\$79.81	5/1/20	
72040	5521	\$79.81	5/1/20	
72050	5522	\$112.08	5/1/20	
72052	5522	\$112.08	5/1/20	
72070	5522	\$112.08	5/1/20	
72072	5522	\$112.08	5/1/20	
72074	5522	\$112.08	5/1/20	
72080	5521	\$79.81	5/1/20	
72081	5521	\$79.81	5/1/20	
72082	5522	\$112.08	5/1/20	
72083	5522	\$59.10	5/1/20	
72084	5522	\$69.20	5/1/20	
72100	5522	\$112.08	5/1/20	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
72110	5522	\$112.08	5/1/20	
72114	5522	\$112.08	5/1/20	
72120	5522	\$112.08	5/1/20	
72170	5522	\$112.08	5/1/20	
72190	5522	\$112.08	5/1/20	
72200	5522	\$112.08	5/1/20	
72202	5522	\$112.08	5/1/20	
72220	5521	\$79.81	5/1/20	
72240	5573	\$680.82	5/1/20	
72255	5573	\$680.82	5/1/20	
72265	5573	\$680.82	5/1/20	
72270	5573	\$680.82	5/1/20	
72275		\$85.41	5/1/20	12/31/21
72285	5431	\$1,719.35	5/1/20	
72295	5431	\$1,719.35	5/1/20	
73000	5521	\$79.81	5/1/20	
73010	5522	\$112.08	5/1/20	
73020	5521	\$79.81	5/1/20	
73030	5521	\$79.81	5/1/20	
73040	5572	\$381.85	5/1/20	
73050	5521	\$79.81	5/1/20	
73060	5521	\$79.81	5/1/20	
73070	5521	\$79.81	5/1/20	
73080	5521	\$79.81	5/1/20	
73085	5572	\$381.85	5/1/20	
73090	5521	\$79.81	5/1/20	
73092	5522	\$112.08	5/1/20	
73100	5521	\$79.81	5/1/20	
73110	5521	\$79.81	5/1/20	
73115	5572	\$381.85	5/1/20	
73120	5522	\$112.08	5/1/20	
73130	5521	\$79.81	5/1/20	
73140	5521	\$79.81	5/1/20	
73501	5521	\$79.81	5/1/20	
73502	5521	\$79.81	5/1/20	
73503	5522	\$112.08	5/1/20	
73521	5522	\$112.08	5/1/20	
73522	5522	\$112.08	5/1/20	
73523	5522	\$42.89	5/1/20	
73525	5572	\$381.85	5/1/20	
73551	5521	\$79.81	5/1/20	
73552	5521	\$79.81	5/1/20	
73560	5521	\$79.81	5/1/20	
73562	5521	\$79.81	5/1/20	
73564	5522	\$112.08	5/1/20	
73565	5521	\$79.81	5/1/20	
73580	5572	\$381.85	5/1/20	
73590	5521	\$79.81	5/1/20	
73592	5521	\$79.81	5/1/20	
73600	5521	\$79.81	5/1/20	
73610	5521	\$79.81	5/1/20	
73615	5572	\$381.85	5/1/20	
73620	5521	\$79.81	5/1/20	
73630	5521	\$79.81	5/1/20	
73650	5521	\$79.81	5/1/20	
73660	5521	\$79.81	5/1/20	
74018	5521	\$79.81	5/1/20	
74019	5522	\$112.08	5/1/20	
74021	5522	\$112.08	5/1/20	
74022	5522	\$112.08	5/1/20	
74190	5524	\$481.58	5/1/20	
74210	5571	\$182.22	5/1/20	
74220	5571	\$182.22	5/1/20	
74221	5571	\$182.22	5/1/20	
74230	5571	\$182.22	5/1/20	
74235		\$61.27	5/1/20	
74240	5571	\$182.22	5/1/20	
74246	5571	\$182.22	5/1/20	
74248		\$47.93	5/1/20	
74250	5571	\$182.22	5/1/20	
74251	5571	\$182.22	5/1/20	
74270	5571	\$182.22	5/1/20	
74280	5571	\$182.22	5/1/20	
74283	5571	\$132.26	5/1/20	
74290	5571	\$182.22	5/1/20	
74300		\$18.74	5/1/20	
74301		\$10.81	5/1/20	
74328		\$36.40	5/1/20	
74329		\$36.40	5/1/20	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
74330		\$46.49	5/1/20	
74340		\$27.75	5/1/20	
74355		\$38.92	5/1/20	
74360		\$28.83	5/1/20	
74363		\$43.97	5/1/20	
74400	5571	\$95.86	5/1/20	
74410	5571	\$98.03	5/1/20	
74415	5571	\$121.45	5/1/20	
74420	5572	\$46.49	5/1/20	
74425	5572	\$381.85	5/1/20	
74430	5572	\$381.85	5/1/20	
74440	5523	\$233.04	5/1/20	
74445	5522	\$112.08	5/1/20	
74450	5523	\$233.04	5/1/20	
74455	5523	\$233.04	5/1/20	
74470	5524	\$481.58	5/1/20	
74485	5373	\$1,771.55	5/1/20	
74710	5521	\$79.81	5/1/20	12/31/23
74740	5523	\$233.04	5/1/20	
74742		\$31.71	5/1/20	
74775	5523	\$230.65	5/1/20	
75557	5523	\$233.04	5/1/20	
75559	5524	\$481.58	5/1/20	
75561	5572	\$381.85	5/1/20	
75563	5573	\$680.82	5/1/20	
75565		\$41.81	5/1/20	
75571	5521	\$79.81	5/1/20	
75572	5571	\$182.00	5/1/20	
75573	5571	\$201.82	5/1/20	
75574	5571	\$201.82	5/1/20	
75577	1511	\$950.50	1/1/26	
75580	5724	\$996.18	1/1/24	
75600	5183	\$2,771.28	5/1/20	
75605	5184	\$4,596.19	5/1/20	
75625	5183	\$2,771.28	5/1/20	
75630	5183	\$2,771.28	5/1/20	
75705	5184	\$4,596.19	5/1/20	
75710	5183	\$2,771.28	5/1/20	
75716	5183	\$2,771.28	5/1/20	
75726	5184	\$4,596.19	5/1/20	
75731	5182	\$111.72	5/1/20	
75733	5183	\$2,771.28	5/1/20	
75736	5184	\$4,596.19	5/1/20	
75741	5183	\$2,771.28	5/1/20	
75743	5183	\$2,771.28	5/1/20	
75746	5182	\$92.98	5/1/20	
75756	5183	\$2,771.28	5/1/20	
75774		\$66.31	5/1/20	
75801	5181	\$630.51	5/1/20	
75803	5182	\$1,093.79	5/1/20	
75805	5182	\$1,093.79	5/1/20	
75807	5183	\$2,771.28	5/1/20	
75809	5522	\$112.08	5/1/20	
75810	5182	\$1,093.79	5/1/20	
75820	5181	\$630.51	5/1/20	
75822	5182	\$79.65	5/1/20	
75825	5183	\$2,771.28	5/1/20	
75827	5181	\$630.51	5/1/20	
75831	5183	\$2,771.28	5/1/20	
75833	5183	\$2,771.28	5/1/20	
75840	5183	\$2,771.28	5/1/20	
75842	5184	\$4,596.19	5/1/20	12/31/25
75860	5183	\$2,771.28	5/1/20	
75870	5182	\$125.06	5/1/20	
75872	5181	\$630.51	5/1/20	
75880	5181	\$630.51	5/1/20	
75885	5183	\$2,771.28	5/1/20	
75887	5182	\$85.77	5/1/20	
75889	5183	\$2,771.28	5/1/20	
75891	5183	\$2,771.28	5/1/20	
75893	5184	\$4,596.19	5/1/20	
75894		\$74.24	5/1/20	
75898	5182	\$1,093.79	5/1/20	
75901		\$178.39	5/1/20	
75902		\$60.55	5/1/20	
75956		\$353.90	5/1/20	12/31/25
75957		\$303.81	5/1/20	12/31/25
75958		\$201.82	5/1/20	12/31/25
75959		\$175.87	5/1/20	12/31/25

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
75970		\$40.72	5/1/20	
75984		\$68.47	5/1/20	
75989		\$63.79	5/1/20	
76000	5523	\$32.07	5/1/20	
76010	5521	\$79.81	5/1/20	
76014	5731	\$24.49	1/1/25	
76015		\$53.88	1/1/25	
76016	5521	\$88.05	1/1/25	
76017	5523	\$241.72	1/1/25	
76018	5742	\$91.79	1/1/25	
76019	5733	\$59.40	1/1/25	
76080	5524	\$481.58	5/1/20	
76098	5524	\$481.58	5/1/20	
76100	5522	\$112.08	5/1/20	
76101	5522	\$112.08	5/1/20	12/31/21
76102	5522	\$112.80	5/1/20	12/31/21
76120	5522	\$112.08	5/1/20	
76125		\$14.42	5/1/20	
76140		\$16.58	5/1/20	
76145	5611	\$896.65	1/1/21	
76376		\$13.33	5/1/20	
76377		\$31.71	5/1/20	
76380	5521	\$79.81	5/1/20	
76496	5521	\$79.81	5/1/20	
76497	5521	\$79.81	5/1/20	
76498	5521	\$62.35	5/1/20	
76499	5521	\$79.81	5/1/20	
76506	5522	\$112.08	5/1/20	
76510	5734	\$109.03	5/1/20	
76511	5522	\$112.08	5/1/20	
76512	5522	\$112.08	5/1/20	
76513	5522	\$112.08	5/1/20	
76514	5731	\$22.99	5/1/20	
76516	5522	\$112.08	5/1/20	
76519	5522	\$112.08	5/1/20	
76529	5521	\$79.81	5/1/20	
76536	5522	\$112.08	5/1/20	
76604	5522	\$112.08	5/1/20	
76641	5522	\$112.08	5/1/20	
76642	5521	\$79.81	5/1/20	
76700	5522	\$112.08	5/1/20	
76705	5522	\$112.08	5/1/20	
76706	5522	\$87.21	5/1/20	
76770	5522	\$112.08	5/1/20	
76775	5522	\$112.08	5/1/20	
76776	5522	\$112.08	5/1/20	
76800	5522	\$112.08	5/1/20	
76801	5522	\$73.52	5/1/20	
76802		\$21.98	5/1/20	
76805	5522	\$91.54	5/1/20	
76810		\$43.25	5/1/20	
76811	5523	\$84.69	5/1/20	
76812		\$111.72	5/1/20	
76813	5522	\$112.08	5/1/20	
76814		\$29.19	5/1/20	
76815	5522	\$112.08	5/1/20	
76816	5522	\$112.08	5/1/20	
76817	5522	\$112.08	5/1/20	
76818	5522	\$68.47	5/1/20	
76819	5522	\$50.45	5/1/20	
76820	5522	\$112.08	5/1/20	
76821	5522	\$112.08	5/1/20	
76825	5524	\$194.97	5/1/20	
76826	5523	\$124.33	5/1/20	
76827	5522	\$112.08	5/1/20	
76828	5522	\$112.08	5/1/20	
76830	5522	\$88.30	5/1/20	
76831	5523	\$233.04	5/1/20	
76856	5522	\$112.08	5/1/20	
76857	5522	\$112.08	5/1/20	
76870	5522	\$112.08	5/1/20	
76872	5522	\$96.22	5/1/20	
76873	5522	\$96.95	5/1/20	
76881	5522	\$58.02	5/1/20	
76882	5522	\$112.08	5/1/20	
76883	5522	\$106.88	1/1/23	
76885	5521	\$79.81	5/1/20	
76886	5521	\$79.81	5/1/20	
76932		\$33.88	5/1/20	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
76936	5722	\$174.07	5/1/20	
76937		\$19.82	5/1/20	
76940		\$105.59	5/1/20	
76941		\$71.00	5/1/20	
76942		\$25.23	5/1/20	
76945		\$35.68	5/1/20	
76946		\$13.33	5/1/20	
76948		\$40.72	5/1/20	
76965		\$25.23	5/1/20	
76970	5522	\$112.08	5/1/20	12/31/20
76975	5523	\$233.04	5/1/20	
76977	5522	\$4.69	5/1/20	
76978	5571	\$247.95	5/1/20	
76979		\$180.92	5/1/20	
76981	5522	\$112.08	5/1/20	
76982	5522	\$112.08	5/1/20	
76983		\$34.24	5/1/20	
76984		\$31.18	1/1/24	
76987		\$95.22	1/1/24	
76988		\$60.66	1/1/24	
76989		\$35.58	1/1/24	
76998		\$65.23	5/1/20	
76999	5521	\$79.81	5/1/20	
77001		\$72.80	5/1/20	
77002		\$74.60	5/1/20	
77003		\$68.83	5/1/20	
77011		\$168.66	5/1/20	
77012		\$78.20	5/1/20	
77013		\$196.77	5/1/20	
77014		\$77.12	5/1/20	12/31/25
77021		\$409.40	5/1/20	
77022		\$221.64	5/1/20	
77053	5523	\$233.04	5/1/20	
77054	5523	\$233.04	5/1/20	
77061		\$94.06	5/1/20	
77062		\$94.06	5/1/20	
77063		\$25.23	5/1/20	
77065		\$94.06	5/1/20	
77066		\$120.37	5/1/20	
77067		\$99.47	5/1/20	
77071	5521	\$79.81	5/1/20	
77072	5522	\$112.08	5/1/20	
77073	5522	\$112.08	5/1/20	
77074	5522	\$112.08	5/1/20	
77075	5522	\$112.08	5/1/20	
77076	5522	\$112.08	5/1/20	
77077	5522	\$112.08	5/1/20	
77080	5522	\$30.63	5/1/20	
77081	5521	\$23.43	5/1/20	
77085	5522	\$112.08	5/1/20	
77086	5521	\$79.81	5/1/20	
77089		\$43.25	1/1/22	
77090	5521	\$85.77	1/1/22	
77091	5521	\$86.13	1/1/22	
77092		\$10.81	1/1/22	
78012	5591	\$74.60	5/1/20	
78013	5591	\$180.92	5/1/20	
78014	5591	\$225.24	5/1/20	
78015	5591	\$198.94	5/1/20	
78016	5591	\$257.68	5/1/20	
78018	5592	\$283.27	5/1/20	
78020		\$58.38	5/1/20	
78070	5591	\$270.29	5/1/20	
78071	5591	\$309.94	5/1/20	
78072	5592	\$325.07	5/1/20	
78075	5593	\$430.31	5/1/20	
78099	5591	\$368.13	5/1/20	
78102	5591	\$149.20	5/1/20	
78103	5591	\$189.93	5/1/20	
78104	5591	\$218.04	5/1/20	
78110	5593	\$63.43	5/1/20	
78111	5593	\$66.31	5/1/20	
78120	5591	\$63.43	5/1/20	
78121	5592	\$66.31	5/1/20	
78122	5592	\$76.76	5/1/20	
78130	5591	\$102.35	5/1/20	
78135	5591	\$261.64	5/1/20	12/31/20
78140	5591	\$87.21	5/1/20	
78185	5591	\$158.21	5/1/20	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
78191	5591	\$102.35	5/1/20	
78195	5592	\$309.94	5/1/20	
78199	5591	\$368.13	5/1/20	
78201	5593	\$176.23	5/1/20	
78202	5593	\$185.60	5/1/20	
78215	5591	\$177.31	5/1/20	
78216	5591	\$104.51	5/1/20	
78226	5591	\$305.61	5/1/20	
78227	5592	\$418.05	5/1/20	
78230	5591	\$157.85	5/1/20	
78231	5591	\$85.05	5/1/20	
78232	5591	\$85.05	5/1/20	
78258	5591	\$190.65	5/1/20	
78261	5591	\$180.56	5/1/20	
78262	5591	\$216.59	5/1/20	
78264	5591	\$308.13	5/1/20	
78265	5591	\$353.54	5/1/20	
78266	5592	\$434.99	5/1/20	
78267		\$11.06	5/1/20	
78268		\$94.41	5/1/20	
78278	5591	\$312.46	5/1/20	
78282	5591	\$353.54	5/1/20	
78290	5591	\$309.22	5/1/20	
78291	5591	\$222.72	5/1/20	
78299	5591	\$368.13	5/1/20	
78300	5591	\$207.22	5/1/20	
78305	5591	\$249.03	5/1/20	
78306	5591	\$270.65	5/1/20	
78315	5591	\$308.49	5/1/20	
78350		\$21.98	5/1/20	
78351		\$15.86	5/1/20	
78399	5591	\$368.13	5/1/20	
78414	5592	\$22.70	5/1/20	
78428	5591	\$152.09	5/1/20	
78429	5594	\$85.41	5/1/20	
78430	5594	\$81.09	5/1/20	
78431	1522	\$94.42	5/1/20	
78432	1523	\$100.55	5/1/20	
78433	1523	\$109.92	5/1/20	
78434		\$31.71	5/1/20	
78445	5591	\$168.30	5/1/20	
78451	5593	\$283.27	5/1/20	
78452	5593	\$409.40	5/1/20	
78453	5593	\$265.61	5/1/20	
78454	5593	\$384.54	5/1/20	
78456	5593	\$272.10	5/1/20	
78457	5593	\$158.93	5/1/20	
78458	5591	\$167.22	5/1/20	
78459	5593	\$1,229.29	5/1/20	
78466	5591	\$168.66	5/1/20	
78468	5592	\$171.55	5/1/20	
78469	5593	\$187.76	5/1/20	
78472	5591	\$188.12	5/1/20	
78473	5591	\$227.05	5/1/20	
78481	5592	\$132.98	5/1/20	
78483	5592	\$173.71	5/1/20	
78491	5594	\$1,375.61	5/1/20	
78492	5594	\$1,375.61	5/1/20	
78494	5591	\$175.15	5/1/20	
78496		\$20.18	5/1/20	
78499	5591	\$368.13	5/1/20	
78579	5591	\$168.66	5/1/20	
78580	5591	\$210.11	5/1/20	
78582	5592	\$293.36	5/1/20	
78597	5591	\$172.27	5/1/20	
78598	5592	\$274.98	5/1/20	
78599	5591	\$368.13	5/1/20	
78600	5591	\$169.02	5/1/20	
78601	5591	\$199.30	5/1/20	
78605	5592	\$179.47	5/1/20	
78606	5592	\$310.30	5/1/20	
78610	5592	\$166.14	5/1/20	
78630	5592	\$316.42	5/1/20	
78635	5592	\$320.39	5/1/20	
78645	5592	\$309.22	5/1/20	
78650	5593	\$258.40	5/1/20	
78660	5591	\$162.54	5/1/20	
78699	5591	\$368.13	5/1/20	
78700	5591	\$154.97	5/1/20	

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
78701	5591	\$200.74	5/1/20	
78707	5592	\$193.53	5/1/20	
78708	5592	\$122.89	5/1/20	
78709	5592	\$312.10	5/1/20	
78725	5591	\$93.34	5/1/20	
78730		\$71.72	5/1/20	
78740	5591	\$198.58	5/1/20	
78761	5591	\$182.72	5/1/20	
78799	5591	\$368.13	5/1/20	
78800	5591	\$167.22	5/1/20	
78801	5591	\$227.05	5/1/20	
78802	5593	\$292.28	5/1/20	
78803	5593	\$300.21	5/1/20	
78804	5593	\$536.98	5/1/20	
78808	5591	\$368.13	5/1/20	
78830	5593	\$433.55	5/1/20	
78831	5593	\$643.66	5/1/20	
78832	5594	\$849.80	5/1/20	
78835		\$83.25	5/1/20	
78999	5591	\$368.13	5/1/20	
79005	5661	\$50.82	5/1/20	
79101	5661	\$50.45	5/1/20	
79200	5661	\$52.98	5/1/20	
79300	5661	\$68.83	5/1/20	
79403	5661	\$83.97	5/1/20	
79440	5661	\$39.28	5/1/20	
79445	5661	\$117.49	5/1/20	
79999	5661	\$237.40	5/1/20	
91113	5311	\$844.04	1/1/22	
92137	5722	\$311.40	1/1/25	
92229	5733	\$55.66	1/1/21	
93319		\$26.31	1/1/22	
93356		\$12.25	5/1/20	
93584		\$58.62	1/1/24	
93585		\$55.24	1/1/24	
93586		\$69.81	1/1/24	
93587		\$103.02	1/1/24	
93588		\$104.03	1/1/24	
93985	5523	\$231.73	5/1/20	
93986	5522	\$131.90	5/1/20	
A9268		\$0.00	10/1/23	
A9269		\$0.00	10/1/23	
C8001	5521	\$88.05	1/1/25	
C8900	5572	\$381.85	5/1/20	
C8901	5523	\$233.04	5/1/20	
C8902	5572	\$381.85	5/1/20	
C8903	5571	\$182.22	5/1/20	
C8905	5572	\$381.85	5/1/20	
C8906	5572	\$381.85	5/1/20	
C8908	5572	\$381.85	5/1/20	
C8909	5572	\$381.85	5/1/20	
C8910	5523	\$233.04	5/1/20	
C8911	5572	\$381.85	5/1/20	
C8912	5572	\$381.85	5/1/20	
C8913	5523	\$233.04	5/1/20	
C8914	5572	\$381.85	5/1/20	
C8918	5572	\$381.85	5/1/20	
C8919	5523	\$233.04	5/1/20	
C8920	5572	\$381.85	5/1/20	
C8931	5572	\$381.85	5/1/20	
C8932	5523	\$233.04	5/1/20	
C8933	5572	\$381.85	5/1/20	
C8934	5572	\$381.85	5/1/20	
C8935	5523	\$233.04	5/1/20	
C8936	5572	\$381.85	5/1/20	
C8937		\$18.74	5/1/20	
C9733	5572	\$381.85	5/1/20	
C9759		\$612.57	7/1/20	
C9760	1589	\$12,500.50	7/1/20	
C9762	5524	\$481.58	7/1/20	
C9763	5524	\$481.58	7/1/20	
C9768		\$233.04	10/1/20	
C9786	5742	\$99.81	7/1/23	12/31/24
C9788	5521	\$86.88	10/1/23	12/31/23
C9793	5724	\$996.18	1/1/24	
C9794	1521	\$1,950.50	1/1/24	12/31/24
G0106	5571	\$180.20	5/1/20	12/31/24
G0120	5572	\$180.20	5/1/20	12/31/24
G0122		\$244.71	5/1/20	12/31/24

2020 Hospital Low Tech Radiology Base Compensation Schedule

This schedule is not a guaranty of payment. Variances in compensation may occur due to rounding calculations. Services represented are subject to provisions of the health plan including, but not limited to, membership eligibility, premium payment, claim payment logic, provider contract terms and conditions, applicable medical policy and benefits, limitations and exclusions. Applicable claims processing rules may change from time to time subject to notice requirements of applicable law and regulation and the prevailing provider agreement. CPT codes are copyright American Medical Association. All Rights Reserved. BCBSTX - Confidential and Proprietary.

Procedure Code	APC Code	Contract Base Rate	Effective Date	End Date
G0130	5522	\$24.15	5/1/20	
G0183	5521	\$88.05	4/1/25	
G0219		\$2,117.66	5/1/20	
G0252		\$76.40	5/1/20	
G0279		\$25.23	5/1/20	
G0288		\$36.40	5/1/20	
G0562	1521	\$1,950.50	1/1/25	
G0566	5721	\$156.46	4/1/25	
Q0092		\$24.51	5/1/20	
R0070		\$78.93	5/1/20	
R0075		\$33.88	5/1/20	
S8037		\$145.44	5/1/20	