

Medicaid Reimbursement Survey, 2001

Minnesota

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	<u>Minnesota</u>	<u>West North Central Region*</u>	<u>US[~]</u>	<u>Medicare[#]</u>
EPSDT - Preventive Medicine Services				
99381 - New Patient, under 1 year	\$40.74	\$46.32	\$56.07	\$101.77
99382 - New Patient, 1 through 4 years	\$34.82	\$46.12	\$57.66	\$111.33
99383 - New Patient, 5 through 11 years	\$37.90	\$47.61	\$58.42	\$109.42
99384 - New Patient, 12 through 17 years	\$39.79	\$50.60	\$63.03	\$120.51
99385 - New Patient, 18 through 39 years	\$42.48	\$49.51	\$63.61	\$118.60
99391 - Established Patient, under 1 year	\$29.37	\$37.42	\$46.31	\$79.58
99392 - Established Patient, 1 to 4 years	\$29.84	\$38.79	\$48.39	\$90.29
99393 - Established Patient, 5 to 11 years	\$29.84	\$39.48	\$49.14	\$89.52
99394 - Established Patient, 12 to 17 years	\$33.17	\$42.29	\$53.34	\$100.24
99395 - Established Patient, 18 to 39 years	\$32.44	\$39.60	\$52.25	\$99.47
99401 - Individual Counseling, 15 min	\$10.30	\$10.30	\$23.38	\$40.55
99402 - Individual Counseling, 30 min	\$20.60	\$20.30	\$39.61	\$71.54
EPSDT - Evaluation and Management				
99201 - New Patient, office visit	\$31.27	\$26.77	\$29.20	\$35.58
99202 - New Patient, expanded office visit	\$35.05	\$37.64	\$42.09	\$61.98
99203 - New Patient, low complexity	\$41.69	\$46.64	\$56.58	\$91.44
99204 - New Patient, intermediate complexity	\$71.07	\$66.75	\$80.14	\$132.76
99205 - New Patient, high complexity	\$104.24	\$83.40	\$98.50	\$167.57
99211 - Established Patient, office visit	\$14.21	\$13.51	\$16.65	\$19.89
99212 - Established Patient, expanded office visit	\$23.69	\$22.58	\$25.98	\$35.96
99213 - Established Patient, low complexity	\$28.43	\$29.93	\$33.58	\$50.50
99214 - Established Patient, intermediate complexity	\$53.06	\$46.24	\$49.50	\$78.81
99215 - Established Patient, high complexity	\$75.81	\$64.89	\$72.48	\$117.07
92551 - Screening test, hearing evaluation	\$8.91	\$9.83	\$11.42	NA
92567 - Tympanometry, hearing evaluation	\$13.15	\$11.94	\$14.39	\$22.19

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EPSDT - Newborn Care				
99431 - Initial newborn care	\$57.29	\$63.60	\$62.07	\$69.25
99433 - Subsequent newborn care	\$26.64	\$26.79	\$32.41	\$36.73
99435 - Admit and discharge on same day	BR	\$73.40	\$85.01	\$91.82
Immunizations				
	State provides vaccines through a universal immunization program.			
90471 - One vaccine administration	NA	\$7.15	\$7.10	NA
90472 - Each additional vaccine administration	NA	\$7.15	\$6.85	NA
90647 - Hemophilus Influenza B	SP	\$11.99	\$17.69	NA
90657 - Influenza virus (6-35 months)	\$5.15	\$5.10	\$6.43	NA
90658 - Influenza virus (3+ years)	\$5.15	\$5.70	\$7.32	NA
90669 - Pneumococcal conjugate vaccine	\$72.50	\$49.25	\$37.59	NA
90701 - DPT	OM	\$12.77	\$11.48	NA
90702 - DT (< 7 years)	SP	\$6.60	\$7.64	NA
90707 - Measles, mumps, rubella	SP	\$14.63	\$20.79	NA
90713 - IPV	SP	\$12.13	\$16.70	NA
90716 - Varicella	SP	\$20.28	\$29.45	NA
90718 - Td (>= 7 years)	SP	\$6.94	\$7.13	NA
90721 - DTaP, HIB	SP	\$28.90	\$24.53	NA
90744 - Hepatitis B (pediatric/adolescent age)	SP	\$22.64	\$23.25	NA
90749 - Unlisted immunization procedure	OM	\$5.00	\$5.89	NA
90782 - Therapeutic or diagnostic injection	\$1.50	\$3.65	\$4.45	\$4.59
Evaluation and Management				
99173 - Visual acuity screening, quant, bilateral	\$7.72	\$7.72	\$24.55	NA
99217 - Observation care discharge	NC	\$31.54	\$39.65	\$69.25
99218 - Initial care, low severity	NC	\$47.20	\$46.56	\$70.78
99219 - Initial care, intermediate severity	NC	\$67.69	\$71.47	\$117.07
99220 - Initial care, high severity	NC	\$84.74	\$93.10	\$160.68
99354 - Prolonged service, 1 hr, face-to-face	\$72.30	\$80.75	\$72.18	\$118.98

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Evaluation and Management, cont.				
99358 - Prolonged service, 1 hr, no face-to-face	OM	\$5.18	\$52.48	NA
99361 - Team medical conference	\$30.90	\$30.45	\$29.57	NA
99371 - Telephone call for consultation	NC	\$2.41	\$6.64	NA
99372 - Telephone call - intermediate	NC	\$2.41	\$14.32	NA
99373 - Telephone call - complex or lengthy	NC	\$2.41	\$20.82	NA
99374 - Supervision of home health care patient	NC	\$61.40	\$40.64	\$89.52
Newborn Care				
99436 - Physician attendance at delivery	OM	\$73.10	\$73.87	92.58
99440 - Newborn resuscitation	\$102.74	\$126.33	\$119.61	172.54
54150 - Circumcision	\$54.84	\$57.69	\$85.19	299.18
Hospital Care				
99221 - Initial hospitalization, low complexity	\$54.07	\$44.97	\$47.91	\$71.54
99222 - Initial hospitalization, moderate complexity	\$100.42	\$72.56	\$75.08	\$117.45
99223 - Initial hospitalization, high complexity	\$112.01	\$88.54	\$97.28	\$160.68
99231 - Subsequent hospitalization, low complexity	\$30.12	\$26.93	\$25.56	\$35.96
99232 - Subsequent hospitalization, moderate complexity	\$34.76	\$37.30	\$37.01	\$57.39
99233 - Subsequent hospitalization, high complexity	\$92.70	\$57.97	\$52.71	\$81.49
99238 - Hospital discharge, under 30 min	\$40.94	\$39.77	\$42.65	\$68.86
Consultations				
99242 - Office visit, straightforward decision	\$60.25	\$53.18	\$59.28	\$89.52
99243 - Office visit, low complexity	\$78.79	\$66.20	\$74.80	\$118.22
99244 - Office visit, moderate complexity	\$113.55	\$88.05	\$101.31	\$167.57
99245 - Office visit, high complexity	\$135.18	\$113.03	\$129.06	\$219.22
99254 - Initial inpatient visit, moderate complexity	\$113.55	\$87.14	\$94.20	\$148.44
99255 - Initial inpatient visit, high complexity	\$135.18	\$112.88	\$122.84	\$203.15

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Pathology and Laboratory				
81000 - Urinalysis, non-automated	\$4.37	\$4.23	\$3.93	NA
81001 - Urinalysis, automated	\$4.37	\$4.39	\$4.02	NA
85095 - Bone marrow aspiration	\$70.65	\$50.80	\$62.86	\$177.90
86580 - Tuberculosis, intradermal	\$7.01	\$7.60	\$6.94	\$10.33
87060 - Throat or nose culture	\$9.14	\$8.62	\$9.32	NA
87430 - Streptococcus screen	\$16.58	\$15.54	\$15.28	NA
Psychiatry				
90801 - Diagnostic interview examination	\$41.71	\$70.82	\$85.19	\$149.59
90804 - Individual psychotherapy, 20-30 min	\$34.76	\$42.57	\$42.53	\$66.57
90806 - Individual psychotherapy, 45-50 min	\$67.77	\$69.18	\$68.24	\$100.62
90808 - Individual psychotherapy, 75-80 min	\$114.20	\$105.49	\$104.06	\$151.50
90862 - Pharmacologic management	\$41.20	\$30.06	\$32.47	\$53.56
Allergy/Immunology				
95004 - Percutaneous tests with allergenic extracts	\$3.09	\$2.44	\$2.52	\$4.21
95010 - Percutaneous tests, sequential and incremental	\$6.79	\$5.37	\$7.51	\$20.28
95015 - Intracutaneous tests, with biologicals	\$7.72	\$5.99	\$7.91	\$21.42
95024 - Intracutaneous tests with allergenic extracts	\$4.89	\$3.68	\$3.84	\$5.74
95115 - Allergenic immunotherapy, single injection	\$13.00	\$7.55	\$8.77	\$15.69
95117 - Allergen immunotherapy, two or more injections	\$16.45	\$9.11	\$11.80	\$20.28
Cardiology				
32020 - Thoracostomy tube	\$355.35	\$193.92	\$165.92	\$239.11
92950 - Cardiopulmonary resuscitation	\$106.60	\$118.13	\$142.99	\$216.54
93303 - Transthoracic echocardiography	NC	\$156.35	\$152.73	\$231.46
93307 - Echocardiography, real-time with image documentation	\$173.81	\$165.67	\$141.84	\$213.48
93320 - Doppler echocardiography	\$76.16	\$89.87	\$79.96	\$93.73
93501 - Right heart catheterization	\$463.50	\$415.16	\$494.75	\$861.19
93510 - Left heart catheterization	\$463.50	\$685.52	\$889.40	\$1721.61

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Critical Care				
31500 - Intubation, endotracheal	\$100.42	\$78.51	\$82.49	\$125.87
36488 - Place catheter, percutaneous, < 2yrs old	\$129.00	\$96.26	\$77.79	\$86.85
36489 - Place catheter, percutaneous, > 2yrs old	\$95.79	\$105.89	\$93.40	\$156.09
36600 - Arterial puncture, diagnostic	\$36.30	\$26.74	\$19.33	\$27.55
36620 - Arterial line placement	\$98.88	\$63.04	\$52.72	\$60.45
99291 - Evaluation and management, first hour	\$123.60	\$139.08	\$128.27	\$218.45
99292 - Evaluation and management, add'l. 30 minutes	\$62.83	\$67.11	\$64.97	\$110.18
Emergency Care				
10120 - Simple surgical removal of foreign body	\$38.62	\$43.33	\$49.43	\$105.59
12015 - Simple surgical repair of facial wound	\$135.18	\$124.83	\$130.39	\$242.94
36400 - Venipuncture, under 2 years	\$27.41	\$19.59	\$15.89	\$26.02
36410 - Venipuncture, over 2 years	\$20.46	\$16.56	\$16.06	\$23.34
36415 - Venipuncture for specimen collection	OM	\$3.44	\$3.43	NA
62270 - Lumbar puncture, diagnostic	\$75.89	\$70.60	\$68.30	\$153.03
99282 - Visit, low complexity decision	\$35.54	\$27.51	\$25.85	\$30.61
99283 - Visit, intermediate complexity decision	\$37.46	\$41.44	\$41.68	\$64.66
99284 - Visit, high complexity decision	\$50.98	\$58.02	\$61.28	\$100.62
Gastrointestinal				
43239 - Upper gastrointestinal endoscopy with biopsy	\$325.99	\$252.17	\$204.69	\$286.17
44389 - Colonoscopy with biopsy	OM	\$191.78	\$216.47	\$324.43
45331 - Sigmoidoscopy with biopsy	\$122.82	\$122.19	\$100.61	\$120.13
Ophthalmology				
67311 - Strabismus surgery, horizontal	\$596.37	\$468.97	\$464.71	\$523.37
67314 - Strabismus surgery, vertical	OM	\$444.75	\$467.65	\$581.91
68810 - Nasolacrimal probing	OM	\$78.06	\$119.33	\$313.72
Otolaryngology				
42820 - Tonsillectomy/adenoidectomy, under 12 years	\$352.26	\$258.33	\$222.10	\$304.53
42821 - Tonsillectomy/adenoidectomy, over 12 years	\$374.66	\$278.57	\$250.07	\$335.14
69436 - Tympanostomy and tubes	\$193.12	\$171.48	\$141.75	\$159.15

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<i>Perinatal Pediatrics (neonatal intensive care)</i>				
36510 - Umbilical vein catheterization	\$85.74	\$75.67	\$46.90	\$65.04
36660 - Umbilical artery catheterization	\$112.01	\$82.06	\$63.13	\$74.99
99295 - Inital NICU care	OM	\$564.58	\$507.18	\$830.97
99296 - Subsequent NICU, unstable neonate	OM	\$309.45	\$275.07	\$415.48
99297 - Subsequent NICU, stable neonate	OM	\$158.85	\$149.76	\$208.12
99298 - Subsequent NICU, recovering VLBW infant	OM	\$105.40	\$103.67	\$145.76
<i>Plastic Surgery</i>				
40700 - Cleft lip repair	\$1,027.42	\$700.99	\$650.69	\$910.16
42200 - Cleft palate repair	\$1,011.20	\$697.57	\$656.73	\$855.45
<i>Pulmonology</i>				
31622 - Bronchoscopy	\$355.35	\$216.11	\$194.02	\$235.67
32000 - Thoracentesis	\$100.42	\$79.34	\$81.52	\$155.71
94010 - Spirometry, including graphic record	\$23.36	\$24.54	\$24.94	\$37.11
<i>Radiology</i>				
71010 - Frontal chest x-ray	\$29.35	\$21.61	\$19.74	\$29.08
<i>Surgery</i>				
28262 - Extensive clubfoot release	\$1,070.68	\$751.80	\$784.66	\$1300.78
44950 - Appendectomy	\$610.27	\$464.08	\$417.04	\$558.95
49500 - Bilateral inguinal hernia, under 5 years	\$482.81	\$365.61	\$322.60	\$338.20
49505 - Bilateral inguinal hernia, over 5 years	\$602.55	\$402.99	\$359.36	\$439.59
<i>Urology and Dialysis</i>				
50200 - Renal biopsy	\$266.51	\$139.20	\$128.50	\$159.15
90918 - ESRD (end stage renal disease), under 2	\$483.89	\$290.35	\$342.08	\$614.04
90919 - ESRD, 2 through 11 years	\$388.54	\$238.44	\$269.41	\$482.82
90920 - ESRD, 12 through 19 years	\$342.68	\$233.60	\$253.45	\$416.25
90945 - Peritoneal dialysis	\$115.87	\$86.74	\$67.69	\$86.85

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Appendix A. Percent Non-prepaid* Medicaid Enrollees under Age 21, by State, FY 1998

US	50.0%
Alabama	NA
Alaska	NA
Arizona	NA
Arkansas	39.6%
California	3.7%
Colorado	7.2%
Connecticut	7.3%
Delaware	9.5%
Dist of Columbia	39.4%
Florida	51.6%
Georgia	92.5%
Hawaii	NA
Idaho	NA
Illinois	89.6%
Indiana	62.9%
Iowa	9.9%
Kansas	75.2%
Kentucky	66.0%
Louisiana	NA
Maine	92.8%
Maryland	11.6%
Massachusetts	20.5%
Michigan	37.7%
Minnesota	32.8%
Mississippi	96.3%
Missouri	41.7%
Montana	0.0%
Nebraska	NA
Nevada	46.0%
New Hampshire	84.5%
New Jersey	20.0%
New Mexico	11.7%
New York	64.2%
North Carolina	69.0%
North Dakota	96.4%
Ohio	57.1%
Oklahoma	NA
Oregon	10.2%
Pennsylvania	39.1%
Rhode Island	12.5%
South Carolina	96.1%
South Dakota	0.0%
Tennessee	1.8%
Texas	NA
Utah	19.7%
Vermont	40.9%
Virginia	71.3%
Washington	17.9%
West Virginia	NA
Wisconsin	26.1%
Wyoming	NA

* Percent Medicaid enrollees in non-prepaid plans. All services to these enrollees are reimbursed on a fee-for-service basis by the state. In addition, providers to enrollees in some prepaid plans may receive fee-for-service payments from the state through carve-outs. 'NA' Not applicable, or data unavailable.