

## Medicaid Reimbursement Survey, 2001

# Vermont

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	<u>Vermont</u>	<u>New England Region*</u>	<u>US~</u>	<u>Medicare<sup>#</sup></u>
<b>EPSDT - Preventive Medicine Services</b>				
99381 - New Patient, under 1 year	\$55.90	\$59.19	\$56.07	\$101.77
99382 - New Patient, 1 through 4 years	\$62.46	\$60.83	\$57.66	\$111.33
99383 - New Patient, 5 through 11 years	\$71.08	\$62.99	\$58.42	\$109.42
99384 - New Patient, 12 through 17 years	\$77.50	\$65.09	\$63.03	\$120.51
99385 - New Patient, 18 through 39 years	\$98.65	\$68.88	\$63.61	\$118.60
99391 - Established Patient, under 1 year	\$49.48	\$53.50	\$46.31	\$79.58
99392 - Established Patient, 1 to 4 years	\$49.48	\$54.04	\$48.39	\$90.29
99393 - Established Patient, 5 to 11 years	\$55.90	\$55.65	\$49.14	\$89.52
99394 - Established Patient, 12 to 17 years	\$62.46	\$57.79	\$53.34	\$100.24
99395 - Established Patient, 18 to 39 years	\$48.46	\$52.79	\$52.25	\$99.47
99401 - Individual Counseling, 15 min	NC	\$19.08	\$23.38	\$40.55
99402 - Individual Counseling, 30 min	NC	\$34.84	\$39.61	\$71.54
<b>EPSDT - Evaluation and Management</b>				
99201 - New Patient, office visit	\$25.10	\$29.75	\$29.20	\$35.58
99202 - New Patient, expanded office visit	\$34.01	\$44.00	\$42.09	\$61.98
99203 - New Patient, low complexity	\$48.46	\$60.67	\$56.58	\$91.44
99204 - New Patient, intermediate complexity	\$77.05	\$85.49	\$80.14	\$132.76
99205 - New Patient, high complexity	\$89.76	\$102.48	\$98.50	\$167.57
99211 - Established Patient, office visit	\$19.70	\$19.64	\$16.65	\$19.89
99212 - Established Patient, expanded office visit	\$32.26	\$31.34	\$25.98	\$35.96
99213 - Established Patient, low complexity	\$37.66	\$38.21	\$33.58	\$50.50
99214 - Established Patient, intermediate complexity	\$53.86	\$57.31	\$49.50	\$78.81
99215 - Established Patient, high complexity	\$87.85	\$84.98	\$72.48	\$117.07
92551 - Screening test, hearing evaluation	\$16.85	\$13.22	\$11.42	NA
92567 - Tympanometry, hearing evaluation	\$16.85	\$12.94	\$14.39	\$22.19

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	<u>Vermont</u>	<u>New England Region*</u>	<u>US ~</u>	<u>Medicare #</u>
<b>EPSDT - Newborn Care</b>				
99431 - Initial newborn care	\$105.52	\$67.32	\$62.07	\$69.25
99433 - Subsequent newborn care	NC	\$26.33	\$32.41	\$36.73
99435 - Admit and discharge on same day	\$105.52	\$66.81	\$85.01	\$91.82
<b>Immunizations</b>				
	State does not provide vaccines.			
90471 - One vaccine administration	\$6.96	\$4.57	\$7.10	NA
90472 - Each additional vaccine administration	\$10.44	\$6.65	\$6.85	NA
90647 - Hemophilus Influenza B	\$33.10	\$17.55	\$17.69	NA
90657 - Influenza virus (6-35 months)	\$2.95	\$4.17	\$6.43	NA
90658 - Influenza virus (3+ years)	\$5.90	\$4.92	\$7.32	NA
90669 - Pneumococcal conjugate vaccine	\$89.83	\$53.92	\$37.59	NA
90701 - DPT	\$19.70	\$8.92	\$11.48	NA
90702 - DT (< 7 years)	\$8.90	\$4.94	\$7.64	NA
90707 - Measles, mumps, rubella	\$61.01	\$30.10	\$20.79	NA
90713 - IPV	\$48.46	\$48.46	\$16.70	NA
90716 - Varicella	\$57.12	\$57.12	\$29.45	NA
90718 - Td (>= 7 years)	\$14.30	\$6.74	\$7.13	NA
90721 - DTaP, HIB	OM	\$19.06	\$24.53	NA
90744 - Hepatitis B (pediatric/adolescent age)	\$26.86	\$37.95	\$23.25	NA
90749 - Unlisted immunization procedure	OM	na	\$5.89	NA
90782 - Therapeutic or diagnostic injection	\$10.66	\$5.04	\$4.45	\$4.59
<b>Evaluation and Management</b>				
99173 - Visual acuity screening, quant, bilateral	\$5.03	\$5.03	\$24.55	NA
99217 - Observation care discharge	\$34.01	\$27.83	\$39.65	\$69.25
99218 - Initial care, low severity	\$43.06	\$33.84	\$46.56	\$70.78
99219 - Initial care, intermediate severity	\$77.05	\$54.28	\$71.47	\$117.07
99220 - Initial care, high severity	\$96.90	\$72.73	\$93.10	\$160.68
99354 - Prolonged service, 1 hr, face-to-face	\$69.60	\$54.69	\$72.18	\$118.98

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<b>Evaluation and Management, cont.</b>				
99358 - Prolonged service, 1 hr, no face-to-face	NC	\$33.70	\$52.48	NA
99361 - Team medical conference	NC	\$23.13	\$29.57	NA
99371 - Telephone call for consultation	OM	\$5.00	\$6.64	NA
99372 - Telephone call - intermediate	NC	\$10.00	\$14.32	NA
99373 - Telephone call - complex or lengthy	NC	\$15.00	\$20.82	NA
99374 - Supervision of home health care patient	NC	\$35.36	\$40.64	\$89.52
<b>Newborn Care</b>				
99436 - Physician attendance at delivery	OM	\$44.28	\$73.87	92.58
99440 - Newborn resuscitation	\$66.41	\$69.19	\$119.61	172.54
54150 - Circumcision	\$32.26	\$59.19	\$85.19	299.18
<b>Hospital Care</b>				
99221 - Initial hospitalization, low complexity	\$46.56	\$52.39	\$47.91	\$71.54
99222 - Initial hospitalization, moderate complexity	\$77.05	\$67.09	\$75.08	\$117.45
99223 - Initial hospitalization, high complexity	\$93.25	\$82.11	\$97.28	\$160.68
99231 - Subsequent hospitalization, low complexity	\$30.50	\$22.90	\$25.56	\$35.96
99232 - Subsequent hospitalization, moderate complexity	\$43.06	\$33.71	\$37.01	\$57.39
99233 - Subsequent hospitalization, high complexity	\$91.50	\$49.97	\$52.71	\$81.49
99238 - Hospital discharge, under 30 min	\$34.01	\$31.57	\$42.65	\$68.86
<b>Consultations</b>				
99242 - Office visit, straightforward decision	\$71.81	\$49.75	\$59.28	\$89.52
99243 - Office visit, low complexity	\$100.40	\$65.51	\$74.80	\$118.22
99244 - Office visit, moderate complexity	\$125.65	\$84.28	\$101.31	\$167.57
99245 - Office visit, high complexity	\$168.71	\$108.50	\$129.06	\$219.22
99254 - Initial inpatient visit, moderate complexity	\$86.10^	\$73.05	\$94.20	\$148.44
99255 - Initial inpatient visit, high complexity	\$115.60^	\$94.95	\$122.84	\$203.15

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<b>Pathology and Laboratory</b>				
81000 - Urinalysis, non-automated	\$7.26^	\$3.45	\$3.93	NA
81001 - Urinalysis, automated	\$7.26^	\$3.37	\$4.02	NA
85095 - Bone marrow aspiration	\$18.45^	\$44.35	\$62.86	\$177.90
86580 - Tuberculosis, intradermal	\$12.30^	\$5.56	\$6.94	\$10.33
87060 - Throat or nose culture	\$17.71^	\$8.21	\$9.32	NA
87430 - Streptococcus screen	NP	\$13.95	\$15.28	NA
<b>Psychiatry</b>				
90801 - Diagnostic interview examination	\$59.00^	\$58.22	\$85.19	\$149.59
90804 - Individual psychotherapy, 20-30 min	NP	\$35.30	\$42.53	\$66.57
90806 - Individual psychotherapy, 45-50 min	NP	\$63.71	\$68.24	\$100.62
90808 - Individual psychotherapy, 75-80 min	NP	\$82.24	\$104.06	\$151.50
90862 - Pharmacologic management	NP	\$26.96	\$32.47	\$53.56
<b>Allergy/Immunology</b>				
95004 - Percutaneous tests with allergenic extracts	OM^	\$2.01	\$2.52	\$4.21
95010 - Percutaneous tests, sequential and incremental	OM^	\$5.00	\$7.51	\$20.28
95015 - Intracutaneous tests, with biologicals	OM^	\$4.42	\$7.91	\$21.42
95024 - Intracutaneous tests with allergenic extracts	OM^	\$2.58	\$3.84	\$5.74
95115 - Allergenic immunotherapy, single injection	\$6.10^	\$7.00	\$8.77	\$15.69
95117 - Allergen immunotherapy, two or more injections	\$7.30^	\$9.24	\$11.80	\$20.28
<b>Cardiology</b>				
32020 - Thoracostomy tube	\$40.50^	\$148.60	\$165.92	\$239.11
92950 - Cardiopulmonary resuscitation	\$70.10^	\$116.25	\$142.99	\$216.54
93303 - Transthoracic echocardiography	\$132.00^	\$81.48	\$152.73	\$231.46
93307 - Echocardiography, real-time with image documentation	\$141.60^	\$66.52	\$141.84	\$213.48
93320 - Doppler echocardiography	\$26.40^	\$45.56	\$79.96	\$93.73
93501 - Right heart catheterization	\$148.80^	\$208.73	\$494.75	\$861.19
93510 - Left heart catheterization	\$147.60^	\$390.41	\$889.40	\$1721.61

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<b>Critical Care</b>				
31500 - Intubation, endotracheal	\$45.50^	\$65.16	\$82.49	\$125.87
36488 - Place catheter, percutaneous, < 2yrs old	\$40.50^	\$52.64	\$77.79	\$86.85
36489 - Place catheter, percutaneous, > 2yrs old	\$27.00^	\$70.46	\$93.40	\$156.09
36600 - Arterial puncture, diagnostic	\$11.00^	\$14.87	\$19.33	\$27.55
36620 - Arterial line placement	\$29.50^	\$43.34	\$52.72	\$60.45
99291 - Evaluation and management, first hour	\$73.80^	\$76.54	\$128.27	\$218.45
99292 - Evaluation and management, add'l. 30 minutes	\$38.10^	\$38.22	\$64.97	\$110.18
<b>Emergency Care</b>				
10120 - Simple surgical removal of foreign body	\$22.10^	\$31.39	\$49.43	\$105.59
12015 - Simple surgical repair of facial wound	\$54.10^	\$75.76	\$130.39	\$242.94
36400 - Venipuncture, under 2 years	\$11.00^	\$12.67	\$15.89	\$26.02
36410 - Venipuncture, over 2 years	\$17.20^	\$22.77	\$16.06	\$23.34
36415 - Venipuncture for specimen collection	\$3.69^	\$2.31	\$3.43	NA
62270 - Lumbar puncture, diagnostic	\$43.00^	\$49.49	\$68.30	\$153.03
99282 - Visit, low complexity decision	\$20.90^	\$19.42	\$25.85	\$30.61
99283 - Visit, intermediate complexity decision	\$27.00^	\$29.60	\$41.68	\$64.66
99284 - Visit, high complexity decision	\$38.10^	\$41.09	\$61.28	\$100.62
<b>Gastrointestinal</b>				
43239 - Upper gastrointestinal endoscopy with biopsy	\$116.10^	\$166.42	\$204.69	\$286.17
44389 - Colonoscopy with biopsy	NP	\$156.34	\$216.47	\$324.43
45331 - Sigmoidoscopy with biopsy	NP	\$79.72	\$100.61	\$120.13
<b>Ophthalmology</b>				
67311 - Strabismus surgery, horizontal	NP	\$377.97	\$464.71	\$523.37
67314 - Strabismus surgery, vertical	NP	\$417.45	\$467.65	\$581.91
68810 - Nasolacrimal probing	NP	\$101.87	\$119.33	\$313.72
<b>Otolaryngology</b>				
42820 - Tonsillectomy/adenoidectomy, under 12 years	\$148.80^	\$171.08	\$222.10	\$304.53
42821 - Tonsillectomy/adenoidectomy, over 12 years	\$157.40^	\$202.68	\$250.07	\$335.14
69436 - Tympanostomy and tubes	\$108.20^	\$104.18	\$141.75	\$159.15

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<b>Perinatal Pediatrics (neonatal intensive care)</b>				
36510 - Umbilical vein catheterization	\$27.00^	\$32.24	\$46.90	\$65.04
36660 - Umbilical artery catheterization	\$38.10^	\$48.16	\$63.13	\$74.99
99295 - Initial NICU care	\$302.50^	\$272.63	\$507.18	\$830.97
99296 - Subsequent NICU, unstable neonate	\$153.50^	\$190.32	\$275.07	\$415.48
99297 - Subsequent NICU, stable neonate	\$76.70^	\$85.64	\$149.76	\$208.12
99298 - Subsequent NICU, recovering VLBW infant	NP	\$66.17	\$103.67	\$145.76
<b>Plastic Surgery</b>				
40700 - Cleft lip repair	\$432.90^	\$463.19	\$650.69	\$910.16
42200 - Cleft palate repair	\$437.80^	\$481.15	\$656.73	\$855.45
<b>Pulmonology</b>				
31622 - Bronchoscopy	\$126.60^	\$139.71	\$194.02	\$235.67
32000 - Thoracentesis	\$27.00^	\$58.71	\$81.52	\$155.71
94010 - Spirometry, including graphic record	\$26.40^	\$16.99	\$24.94	\$37.11
<b>Radiology</b>				
71010 - Frontal chest x-ray	\$18.40^	\$12.08	\$19.74	\$29.08
<b>Surgery</b>				
28262 - Extensive clubfoot release	\$541.20^	\$565.26	\$784.66	\$1300.78
44950 - Appendectomy	\$270.60^	\$338.29	\$417.04	\$558.95
49500 - Bilateral inguinal hernia, under 5 years	\$216.40^	\$286.22	\$322.60	\$338.20
49505 - Bilateral inguinal hernia, over 5 years	\$230.00^	\$312.73	\$359.36	\$439.59
<b>Urology and Dialysis</b>				
50200 - Renal biopsy	\$108.20^	\$79.61	\$128.50	\$159.15
90918 - ESRD (end stage renal disease), under 2	\$196.80^	\$242.04	\$342.08	\$614.04
90919 - ESRD, 2 through 11 years	\$196.80^	\$226.06	\$269.41	\$482.82
90920 - ESRD, 12 through 19 years	\$196.80^	\$217.86	\$253.45	\$416.25
90945 - Peritoneal dialysis	\$34.40^	\$52.77	\$67.69	\$86.85

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

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<b>US</b>	<b>50.0%</b>
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

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\* 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.