

ARIZONA PHYSICIANS' FEE SCHEDULE  
SPECIAL SERVICES CODES 2016

Code	Modifier	Total \$ Value
99000		\$ 23.49
99001		\$ 15.00
99002		\$ 15.38
AZ099-001 Peer-to-Peer interprofessional telephone consultations between treating physician or medical provider and Peer Reviewer; 5-10 minutes of medical consultative discussion and review.		\$ 75.00
AZ099-002 Peer-to-Peer interprofessional telephone consultations between treating physician or medical provider and Peer Reviewer; 11-30 minutes of medical consultative discussion and review.		\$ 100.00
99024		BR
99026		BR
AZ099-026 Mileage charge, within a radius of 7 miles, for a collection and handling service performed outside the physician's office or laboratory.		BR
99027		BR
AZ099-027 Over 7 miles, per mile.		BR
AZ099-028 When more than one patient seen, apportion mileage charge among total number of patients.		BR
AZ099-030 Mileage round-trip: each mile in excess of 8 miles of travel by physician.		BR
AZ099-031 Within large metropolitan areas a travel time basis may be appropriate. Code AZ099-031 would apply to Arizona's major metropolitan areas, to include Phoenix, Tucson, Flagstaff, Kingman and Yuma. This code would only be used when travel times are 45 minutes or more.		BR
AZ099-044 Services rendered in a night medical care facility: a charge in addition to the usual value of the procedure may be warranted.		BR
Δ99050 Since this code applies to times and dates that are typically outside of normal business hours, preauthorization requirements are not applicable.		\$ 40.63
99051		BR
99053		BR
99056		\$ 37.17

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Δ99058 For purposes of this code, "emergency basis" shall be defined to include referrals from other physicians who consider medical issues serious enough to request the referring physician to disrupt their existing schedule to see a patient on an expedited basis.		\$ 41.99
99060		BR
Δ99070 Supplies and materials normally necessary to perform the service are not separately reimbursable. Supplies and materials provided over and above those usually included with the office or other service rendered may be charged for separately. List each reimbursable drug or supply separately. Documentation showing actual costs associated with providing supplies and materials plus 15 percent to cover overhead costs will be adequate justification for payment. An applicable HCPCS code may be used in lieu of 99070 if the HCPC code more accurately describes the materials and supplies provided. This provision does not apply to retail operations involving drugs or supplies. Administration of drugs to patients in clinical setting are covered under this code. Prescription drugs provided to patients as a part of the overall treatment regimen but outside of the clinical setting are not included under this code.		BR
99071		BR
Δ99075 Use this code for medical testimony not covered by AZ99-099.		BR
99078		BR
99080		BR
99082		BR
99090		BR
99091		\$ 102.81
AZ099-099 Expert testimony at hearing, per hour.		\$ 110.00
99100		BR
99116		BR
99135		BR
99140		BR
99143		\$ 180.09
99144		\$ 136.64
99145		\$ 47.82

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Code	Modifier	Total \$ Value
99148		\$ 180.09
99149		\$ 136.64
99150		\$ 47.00
99170		Not Covered
99172		\$ 68.08
99173		\$ 5.13
99174		\$ 40.82
99175		\$ 64.00
99177		RNE
99183		\$ 329.78
99184		\$ 1,041.25
99188		\$ 40.23
99190		\$ 887.41
99191		\$ 639.18
99192		\$ 439.89
99195		\$ 181.63
99199		BR
99500		BR
99501		BR
99502		BR
99503		BR
99504		BR
99505		BR
99506		BR
99507		BR
99509		BR
99510		BR
99511		BR
99512		BR
99600		BR
99601		\$ 190.12
99602		\$ 82.31
99605		BR
99606		BR
99607		BR