

**PREVAILING RATE/MAXIMUM  
PHYSICAL THERAPY/REHABILITATION FEE SCHEDULE**

<b>CPT CODE</b>	<b>2014 FEE</b>	<b>CPT CODE</b>	<b>2014 FEE</b>
97001	\$134.02	97530	\$50.85
97002	\$52.46	97532	\$51.43
97003	\$134.02	97533	\$55.96
97004	\$52.46	97535	\$40.87
97012	\$37.12	97537	\$40.87
97014	\$32.31	97542	\$34.56
97016	\$36.33	97545	\$173.32
97018	\$30.66	97546	\$86.67
97022	\$37.12	97597	\$57.34
97024	\$27.43	97598	\$79.08
97026	\$25.82	97602	\$52.92
97028	\$32.31	97605	\$49.83
97032	\$32.31	97606	\$49.83
97033	\$33.91	97760	\$53.64
97034	\$25.82	97761	\$49.06
97035	\$26.64	97762	\$43.98
97036	\$49.25	97750	\$58.11
97110	\$48.42	97755	\$70.41
97112	\$49.08	90901	\$56.41
97113	\$53.20		
97116	\$41.97		
97124	\$37.94		
97140	\$34.70		
97150	\$39.54		

NOTE 1: Procedures performed, by either a therapist or physician, and listed on this Maximum Physical Therapy/Rehabilitation Fee Schedule shall be reimbursed in accordance with this schedule.

NOTE 2: Procedures performed by either a therapist or physician, and not listed in this schedule, shall be reimbursed in accordance with the CPT codes listed in the Maximum Fee Schedule for Physicians.

NOTE 3: For codes not listed in the Physical Therapy/Rehabilitation Schedule or the Maximum Fee Schedule for Physicians, reimbursement shall be determined by special report and based on usual, customary, and reasonable charges.

NOTE 4: Code 97010, Hot or cold packs, shall be global to the procedure(s) performed.

Effective: January 1, 2014