

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

CPT CODE	2025 FEE	CPT CODE	2025 FEE
20560	\$58.71	97164	\$69.31
20561	\$100.83	97165	\$144.38
90901	\$73.57	97166	\$173.28
97012	\$48.41	97167	\$216.60
97014	\$42.14	97168	\$69.31
97016	\$47.39	97550	\$54.47
97018	\$40.00	97551	\$25.43
97022	\$48.41	97552	\$22.07
97024	\$35.78	97530	\$66.33
97026	\$33.68	97533	\$72.99
97028	\$42.14	97535	\$53.30
97032	\$42.14	97537	\$53.30
97033	\$44.23	97542	\$45.06
97034	\$33.68	97545	\$226.05
97035	\$34.75	97546	\$113.04
97036	\$64.24	97597	\$74.79
97110	\$63.16	97598	\$103.14
97112	\$64.01	97602	\$69.02
97113	\$69.38	97605	\$64.99
97116	\$54.74	97606	\$64.99
97124	\$49.48	97750	\$75.80
97140	\$45.27	97755	\$91.84
97150	\$51.57	97760	\$69.97
97161	\$144.38	97761	\$63.99
97162	\$173.28	97763	\$60.24
97163	\$216.60		

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: March 1, 2025