

Procedure	Procedure Code Description	Rate
X0043	HOME HEALTH NURSING AND THERAPY VISITS	\$67.18
X0376	NON-MEDICAL CASE MANAGEMENT - ADOLESCENT PREGNANCY, PER MONTH	\$137.50
X0620	NON-MEDICAL CASE MANAGEMENT - SERVICES FOR BLIND & VISUALLY IMPAIRED (SBVI)	\$14.00
X4345	PERIODONTAL SCALING PERFORMED IN THE PRESENCE OF GINGIVAL INFLAMMATION	\$0.00
X5999	MGD CARE ROUTINE OBSTETRIC CARE INC ANTEPARTUM, VAGINAL OR CESAREAN, FETAL DEATH => 20 WEEKS, AND	\$3,841.80