

# California Explanation of Fee Schedule (EOFS)

Powered By  
**Medical Lien Management**

DOS:

Place of Service Type:

Provider Type:

Place of Service Zip:

11/09/2021

Facility

Physician

91790

| Serial | Procedure Code | Units | Fee Schedule | Payment Total | Balance Due | % Expected |
|--------|----------------|-------|--------------|---------------|-------------|------------|
| #1     | 97530          | 1     | \$57.96      | \$0           | \$57.96     | 0%         |
| #2     | A9300          | 1     | BR           | \$0           | \$0         | N/A        |
| #3     | 97112          | 1     | \$37.94      | \$0           | \$51.14     | 0%         |
| #4     | 97110          | 1     | \$33.11      | \$0           | \$43.89     | 0%         |
|        |                | Total | \$129.01     | \$0.00        | \$152.99    | 0%         |

## Procedure Code - Fee Schedule Calculations

#1 - 97530

| Calculation Details  |                         |       |         | Base Maximum Fee Exceptions                    |     |
|--|-------------------------|-------|---------|--|-----|
| Fee Schedule   | Physican Services       |       |         | None   |     |
| Description  | Therapeutic activities  |       |         | NCCI Edits                                     |     |
| Effective Dates of Service                                       | 10/01/2021 - 12/31/2021 |       |         |  |     |
|  |                         |       |         | No NCCI edits for this procedure.              |     |
|  |                         |       |         |  |     |
| Type   | RVU                     | GPCI  | Total   | CMS RVU Information                            |     |
| Work   | 0.44                    | 1.048 | 0.46112 | Status Code                                    | A   |
| Facility PE  | 0.67                    | 1.175 | 0.78725 | PC/TC Indicator                                | 7   |
| MP   | 0.02                    | 0.757 | 0.01514 | Global Days                                    | XXX |
| Sum of Totals  |                         |       | 1.26351 | Pre Op   | 0.0 |
| Conversion Factor - Other Services                               |                         |       | \$45.87 | Intra Op                                       | 0.0 |
| Locality: 18 - LOS ANGELES-LONG BEACH-ANAHEIM (LOS ANGELES CNTY) |                         |       |         | Post Op  | 0.0 |
| Counties: LOS ANGELES CNTY                                       |                         |       |         | Multiple Procedure                             | 5   |
| Base Maximum Fee   |                         |       | \$57.96 | Bilateral Surgery                              | 0   |
|  |                         |       |         | Assistant at Surgery                           | 0   |
|  |                         |       |         | Co-surgery                                     | 0   |
|  |                         |       |         | Team Surgery                                   | 0   |
|  |                         |       |         | Endoscopy Base                                 |     |
|  |                         |       |         | Physician Supervision of Diagnostic Procedures | 9   |
|  |                         |       |         | Diagnostic Imaging Family Indicator            | 99  |

## Procedure Code - Fee Schedule Calculations

### #2 - A9300

| Calculation Details  |                         |       |         |
|--|-------------------------|-------|---------|
| Fee Schedule   | Physican Services       |       |         |
| Description  | Exercise equipment      |       |         |
| Effective Dates of Service                                       | 10/01/2021 - 12/31/2021 |       |         |
|  |                         |       |         |
| Type   | RVU                     | GPCI  | Total   |
| Work   | 0                       | 1.048 | 0       |
| Facility PE  | 0                       | 1.175 | 0       |
| MP   | 0                       | 0.757 | 0       |
| Sum of Totals  |                         |       | 0       |
| Conversion Factor - Other Services                               |                         |       | \$45.87 |
| Locality: 18 - LOS ANGELES-LONG BEACH-ANAHEIM (LOS ANGELES CNTY) |                         |       |         |
| Counties: LOS ANGELES CNTY                                       |                         |       |         |
| Base Maximum Fee   |                         |       | \$0     |

| Base Maximum Fee Exceptions   |  |
|---|--|
| • Medically Unlikely Edit (MUE) Rules Applied.  |  |
|   |  |
| NCCI Edits  |  |
| DOS MUE Rules Applied – Rationale: 'Nature of Service/Procedure' – Units of service allowed: 0 – Effective: 10/01/2021 - 12/31/2021 |  |
|   |  |

| CMS RVU Information                            |     |
|--|-----|
| Status Code                                    | N   |
| PC/TC Indicator                                | 9   |
| Global Days                                    | XXX |
| Pre Op   | 0.0 |
| Intra Op                                       | 0.0 |
| Post Op  | 0.0 |
| Multiple Procedure                             | 9   |
| Bilateral Surgery                              | 9   |
| Assistant at Surgery                           | 9   |
| Co-surgery                                     | 9   |
| Team Surgery                                   | 9   |
| Endoscopy Base                                 |     |
| Physician Supervision of Diagnostic Procedures | 9   |
| Diagnostic Imaging Family Indicator            | 99  |

## Procedure Code - Fee Schedule Calculations

#3 - 97112

| Calculation Details  |                           |       |         | Base Maximum Fee Exceptions                    |     |
|--|---------------------------|-------|---------|--|-----|
| Fee Schedule   | Physican Services         |       |         | None   |     |
| Description  | Neuromuscular reeducation |       |         |  |     |
| Effective Dates of Service                                       | 10/01/2021 - 12/31/2021   |       |         | NCCI Edits                                     |     |
|  |                           |       |         | No NCCI edits for this procedure.              |     |
|  |                           |       |         |  |     |
| Type   | RVU                       | GPCI  | Total   | CMS RVU Information                            |     |
| Work   | 0.5                       | 1.048 | 0.524   | Status Code                                    | A   |
| Facility PE  | 0.49                      | 1.175 | 0.57575 | PC/TC Indicator                                | 7   |
| MP   | 0.02                      | 0.757 | 0.01514 | Global Days                                    | XXX |
| Sum of Totals  |                           |       | 1.11489 | Pre Op   | 0.0 |
| Conversion Factor - Other Services                               |                           |       | \$45.87 | Intra Op                                       | 0.0 |
| Locality: 18 - LOS ANGELES-LONG BEACH-ANAHEIM (LOS ANGELES CNTY) |                           |       |         | Post Op  | 0.0 |
| Counties: LOS ANGELES CNTY                                       |                           |       |         | Multiple Procedure                             | 5   |
| Base Maximum Fee   |                           |       | \$51.14 | Bilateral Surgery                              | 0   |
|  |                           |       |         | Assistant at Surgery                           | 0   |
|  |                           |       |         | Co-surgery                                     | 0   |
|  |                           |       |         | Team Surgery                                   | 0   |
|  |                           |       |         | Endoscopy Base                                 |     |
|  |                           |       |         | Physician Supervision of Diagnostic Procedures | 9   |
|  |                           |       |         | Diagnostic Imaging Family Indicator            | 99  |

## Procedure Code - Fee Schedule Calculations

#4 - 97110

| Calculation Details  |                         |       |         | Base Maximum Fee Exceptions                    |     |
|--|-------------------------|-------|---------|--|-----|
| Fee Schedule   | Physican Services       |       |         | None   |     |
| Description  | Therapeutic exercises   |       |         | NCCI Edits                                     |     |
| Effective Dates of Service                                       | 10/01/2021 - 12/31/2021 |       |         |  |     |
|  |                         |       |         | No NCCI edits for this procedure.              |     |
|  |                         |       |         |  |     |
| Type   | RVU                     | GPCI  | Total   | CMS RVU Information                            |     |
| Work   | 0.45                    | 1.048 | 0.4716  | Status Code                                    | A   |
| Facility PE  | 0.4                     | 1.175 | 0.47    | PC/TC Indicator                                | 7   |
| MP   | 0.02                    | 0.757 | 0.01514 | Global Days                                    | XXX |
| Sum of Totals  |                         |       | 0.95674 | Pre Op   | 0.0 |
| Conversion Factor - Other Services                               |                         |       | \$45.87 | Intra Op                                       | 0.0 |
| Locality: 18 - LOS ANGELES-LONG BEACH-ANAHEIM (LOS ANGELES CNTY) |                         |       |         | Post Op  | 0.0 |
| Counties: LOS ANGELES CNTY                                       |                         |       |         | Multiple Procedure                             | 5   |
| Base Maximum Fee   |                         |       | \$43.89 | Bilateral Surgery                              | 0   |
|  |                         |       |         | Assistant at Surgery                           | 0   |
|  |                         |       |         | Co-surgery                                     | 0   |
|  |                         |       |         | Team Surgery                                   | 0   |
|  |                         |       |         | Endoscopy Base                                 |     |
|  |                         |       |         | Physician Supervision of Diagnostic Procedures | 9   |
|  |                         |       |         | Diagnostic Imaging Family Indicator            | 99  |