

# California Explanation of Fee Schedule (EOFS)

Powered By  
**Medical Lien Management**

DOS:

Place of Service Type:

Provider Type:

Place of Service Zip:

09/07/2022

Facility

Physician

90746

| Serial | Procedure Code | Units | Fee Schedule | Payment Total | Balance Due | % Expected |
|--------|----------------|-------|--------------|---------------|-------------|------------|
| #1     | 99214          | 1     | \$142.44     | \$0           | \$142.44    | 0%         |
| #2     | WC002          | 1     | \$13.99      | \$0           | \$13.99     | 0%         |
|        |                | Total | \$156.43     | \$0.00        | \$156.43    | 0%         |

## Procedure Code - Fee Schedule Calculations

#1 - 99214

| Calculation Details  |                              |       |          | Base Maximum Fee Exceptions                    |     |
|--|------------------------------|-------|----------|--|-----|
| Fee Schedule   | Physican Services            |       |          | None   |     |
| Description  | Office o/p est mod 30-39 min |       |          | NCCI Edits                                     |     |
| Effective Dates of Service                                       | 07/01/2022 - 09/30/2022      |       |          |  |     |
|  |                              |       |          | No NCCI edits for this procedure.              |     |
|  |                              |       |          |  |     |
| Type   | RVU                          | GPCI  | Total    | CMS RVU Information                            |     |
| Work   | 1.92                         | 1.048 | 2.01216  | Status Code                                    | A   |
| Facility PE  | 0.82                         | 1.175 | 0.9635   | PC/TC Indicator                                | 0   |
| MP   | 0.12                         | 0.757 | 0.09084  | Global Days                                    | XXX |
| Sum of Totals  |                              |       | 3.0665   | Pre Op   | 0.0 |
| Conversion Factor - Other Services                               |                              |       | \$46.45  | Intra Op                                       | 0.0 |
| Locality: 18 - LOS ANGELES-LONG BEACH-ANAHEIM (LOS ANGELES CNTY) |                              |       |          | Post Op  | 0.0 |
| Counties: LOS ANGELES CNTY                                       |                              |       |          | Multiple Procedure                             | 0   |
| Base Maximum Fee   |                              |       | \$142.44 | 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 - WC002

| Calculation Details        |  | Base Maximum Fee Exceptions       |  |
|----------------------------|--|-----------------------------------|--|
| Fee Schedule               | Physican Services  | None                              |  |
| Description                | Primary Treating Physician's Progress Report (Form PR-2) | NCCI Edits                        |  |
| Effective Dates of Service | 01/01/2022 - 02/14/2023                                  | No NCCI edits for this procedure. |  |
| Base Maximum Fee           |  | \$13.99                           |  |