

California Explanation of Fee Schedule (EOFS)

Powered By
Medical Lien Management

DOS:

Place of Service Type:

Provider Type:

Place of Service Zip:

02/11/2022

Facility

Physician

91790

| Serial | Procedure Code | Units | Fee Schedule | Payment Total | Balance Due | % Expected |
|--------|----------------|--------------|-----------------|---------------|-----------------|------------|
| #1 | 97112 | 1 | \$51.79 | \$0 | \$51.79 | 0% |
| #2 | 98940 | 1 | \$32.02 | \$0 | \$32.02 | 0% |
| #3 | 97140 | 1 | \$31.19 | \$0 | \$40.74 | 0% |
| | | Total | \$115.00 | \$0.00 | \$124.55 | 0% |

Procedure Code - Fee Schedule Calculations

#1 - 97112

| Calculation Details | | | | Base Maximum Fee Exceptions | |
|--|---------------------------|-------|---------|--|-----|
| Fee Schedule | Physican Services | | | None | |
| Description | Neuromuscular reeducation | | | | |
| Effective Dates of Service | 01/01/2022 - 03/31/2022 | | | 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 | | | \$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 | 5 |
| Base Maximum Fee | | | \$51.79 | 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 - 98940

| Calculation Details | | | | Base Maximum Fee Exceptions | |
|--|-----------------------------|-------|---------|--|-----|
| Fee Schedule | Physican Services | | | • Multiple Procedure Payment Reduction (MPPR) Rules Applied. | |
| Description | Chiropract manj 1-2 regions | | | | |
| Effective Dates of Service | 01/01/2022 - 03/31/2022 | | | | |
| | | | | NCCI Edits | |
| | | | | No NCCI edits for this procedure. | |
| Type | RVU | GPCI | Total | CMS RVU Information | |
| Work | 0.46 | 1.048 | 0.48208 | Status Code | A |
| Facility PE | 0.17 | 1.175 | 0.19975 | PC/TC Indicator | 0 |
| MP | 0.01 | 0.757 | 0.00757 | Global Days | 000 |
| Sum of Totals | | | 0.6894 | 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 | | | \$32.02 | 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

#3 - 97140

| Calculation Details | | | | Base Maximum Fee Exceptions | |
|--|----------------------------|-------|---------|--|-----|
| Fee Schedule | Physican Services | | | None | |
| Description | Manual therapy 1/> regions | | | | |
| Effective Dates of Service | 01/01/2022 - 03/31/2022 | | | NCCI Edits | |
| | | | | No NCCI edits for this procedure. | |
| | | | | | |
| Type | RVU | GPCI | Total | CMS RVU Information | |
| Work | 0.43 | 1.048 | 0.45064 | Status Code | A |
| Facility PE | 0.35 | 1.175 | 0.41125 | PC/TC Indicator | 7 |
| MP | 0.02 | 0.757 | 0.01514 | Global Days | XXX |
| Sum of Totals | | | 0.87703 | 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 | 5 |
| Base Maximum Fee | | | \$40.74 | 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 |