

California Explanation of Fee Schedule (EOFS)

Powered By
Medical Lien Management

DOS:

Place of Service Type:

Provider Type:

Place of Service Zip:

10/29/2021

Facility

Physician

91790

| Serial | Procedure Code | Units | Fee Schedule | Payment Total | Balance Due | % Expected |
|--------|----------------|-------|--------------|---------------|-------------|------------|
| #1 | 99214 | 1 | \$141.35 | \$0 | \$141.35 | 0% |
| #2 | WC002 | 1 | \$13.70 | \$0 | \$13.7 | 0% |
| | | Total | \$155.05 | \$0.00 | \$155.05 | 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 | | | | |
| 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 | 1.92 | 1.048 | 2.01216 | Status Code | A |
| Facility PE | 0.82 | 1.175 | 0.9635 | PC/TC Indicator | 0 |
| MP | 0.14 | 0.757 | 0.10598 | Global Days | XXX |
| Sum of Totals | | | 3.08164 | 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 | 0 |
| Base Maximum Fee | | | \$141.35 | 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) | | |
| Effective Dates of Service | 03/01/2021 - 12/31/2021 | NCCI Edits | |
| | | No NCCI edits for this procedure. | |
| Base Maximum Fee | | \$13.7 | |