

DELAWARE

ChiroWise® 2024 Medicare Part B fee schedule (non-hospital)

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
01 Statewide	98940	26.88	25.54	29.37
	98941	38.71	36.77	42.29
	98942	49.89	47.40	54.50

2024 deductible \$240.00

www.novitas-solutions.com Click this link to access your Medicare carrier

www.ChiroWise.com Click this link for highly specialized chiropractic insurance training

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