

FLORIDA

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
03 Fort Lauderdale	98940	27.08	25.73	29.58
	98941	38.86	36.92	42.45
	98942	49.99	47.49	54.61
04 Miami	98940	27.65	26.27	30.21
	98941	39.54	37.56	43.20
	98942	50.75	48.21	55.44
99 Rest Of State	98940	26.32	25.00	28.75
	98941	37.89	36.00	41.39
	98942	48.84	46.40	53.36

2024 deductible \$240.00

<https://medicare.fcso.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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