

# KENTUCKY

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

| Area         | CPT<br>Code | PAR   | NON<br>PAR | LIMITING<br>CHARGE |
|--------------|-------------|-------|------------|--------------------|
| 00 Statewide | 98940       | 25.41 | 24.14      | 27.76              |
|              | 98941       | 36.76 | 34.92      | 40.16              |
|              | 98942       | 47.53 | 45.15      | 51.93              |

2024 deductible \$240.00

[www.cgsmedicare.com](http://www.cgsmedicare.com) Click this link to access your Medicare carrier

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