

ALABAMA

ChiroWise® 2025 Medicare Part B fee schedule (non-hospital) Revision: 2

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
00 Statewide	98940	24.58	23.35	26.85
	98941	35.86	34.07	39.18
	98942	46.58	44.25	50.89

2025 deductible \$257.00

www.palmettogba.com/medicare Click this link to access your Medicare carrier

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

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