

ARIZONA

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
00 Statewide	98940	25.91	24.61	28.31
	98941	37.63	35.75	41.11
	98942	48.72	46.28	53.23

2025 deductible \$257.00

www.noridianmedicare.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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