

CONNECTICUT

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
00 Statewide	98940	27.95	26.55	30.54
	98941	40.45	38.43	44.19
	98942	52.24	49.63	57.07

2025 deductible \$257.00

www.ngsmedicare.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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