

NEW YORK

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
01 Manhattan	98940	29.58	28.10	32.32
	98941	42.72	40.58	46.67
	98942	55.11	52.35	60.21
02 Nyc Suburbs/Long Isla	98940	30.05	28.55	32.83
	98941	43.32	41.15	47.33
	98942	55.81	53.02	60.97
03 Poughkpsie/N Nyc Subu	98940	28.50	27.08	31.14
	98941	41.25	39.19	45.07
	98942	53.28	50.62	58.21
04 Queens	98940	29.85	28.36	32.61
	98941	43.10	40.95	47.09
	98942	55.58	52.80	60.72
99 Rest Of State	98940	25.73	24.44	28.11
	98941	37.42	35.55	40.88
	98942	48.51	46.08	53.00

2025 deductible \$257.00

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