

RHODE ISLAND

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
01 Statewide	98940	27.29	25.93	29.81
	98941	39.61	37.63	43.27
	98942	51.26	48.70	56.00

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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