

VIRGINIA

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
00 Statewide	98940	26.29	24.98	28.72
	98941	38.22	36.31	41.76
	98942	49.50	47.03	54.08

2025 deductible \$257.00

www.palmettogba/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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