

ALABAMA

ChiroWise® 2026 Medicare Part B fee schedule (non-hospital)

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
00 STATEWIDE	98940	26.63	25.30	29.09
	98941	38.28	36.37	41.82
	98942	49.60	47.12	54.19

2026 deductible \$283.00

www.palmettogba.com/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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