

# NEW HAMPSHIRE

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
40 STATEWIDE	98940	26.82	25.48	29.30
	98941	38.55	36.62	42.12
	98942	49.94	47.44	54.56

2026 deductible \$283.00

[www.ngsmedicare.com](http://www.ngsmedicare.com) Click this link to access your Medicare carrier

[www.ChiroWise.com](http://www.ChiroWise.com) Click this link for highly specialized chiropractic insurance training

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