

RHODE ISLAND

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
01 STATEWIDE	98940	27.37	26.00	29.90
	98941	39.34	37.37	42.98
	98942	50.97	48.42	55.68

2026 deductible \$283.00

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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