

# WEST VIRGINIA

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

Area	CPT Code	PAR	NON PAR	LIMITING CHARGE
16 STATEWIDE	98940	26.51	25.18	28.96
	98941	38.10	36.20	41.62
	98942	49.34	46.87	53.90

2026 deductible \$283.00

[www.palmettogba/medicare](http://www.palmettogba/medicare) 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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