MaineCare Fee Schedule

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	65205	removal fb eye conjunctival superficial		$26.31	9/1/2010	12/31/2078	
CPT	65210	rmvl fb xtrnl eye embed scjncl/scleral nonperfor		$32.00	9/1/2010	12/31/2078	
CPT	65220	rmvl fb xtrnl eye corneal w/o slit lamp		$26.44	9/1/2010	12/31/2078	
CPT	65222	rmvl fb xtrnl eye corneal w/slit lamp		$35.37	9/1/2010	12/31/2078	
CPT	65235	rmvl fb intraocular ant chamber eye/lens		$278.41	9/1/2010	12/31/2078	
CPT	65260	rmvl fb io from post seg mag xtrj ant/post route		$401.09	9/1/2010	12/31/2078	
CPT	65265	rmvl fb io from post seg nonmagnetic xtrj		$452.09	9/1/2010	12/31/2078	
CPT	65772	crnl relaxing inc corrj induced astigmatism		$197.36	9/1/2010	12/31/2078	
CPT	65775	crnl wedge rescj corrj induced astigmatism		$240.52	9/1/2010	12/31/2078	
CPT	66183	insert anter drainage dev w/o extraoc reservoir		$537.89	1/1/2014	12/31/2078	
CPT	66821	post-cataract laser surgery		$195.75	9/1/2010	12/31/2078	
CPT	66825	repositioning io lens prosthesis req inc spx		$335.66	9/1/2010	12/31/2078	

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Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	66984	cataract removal insertion of lens		$344.28	7/1/2014	12/31/2078	
CPT	66985	insj io lens prosthesis not w/concurrent rmvl		$297.98	9/1/2010	12/31/2078	
CPT	66986	exchange intraocular lens		$419.20	9/1/2010	12/31/2078	
CPT	67800	excision chalazion single		$57.83	9/1/2010	12/31/2078	
CPT	67820	correction trichiasis epilation forceps only		$29.21	9/1/2010	12/31/2078	
CPT	67840	exc lesion eyelid w/o clsr/w/simple dir closure		$171.34	9/1/2010	12/31/2078	
CPT	68400	incision drainage lacrimal gland		$141.52	9/1/2010	12/31/2078	
CPT	68420	incision drainage lacrimal sac		$159.38	9/1/2010	12/31/2078	
CPT	68440	snip incision lacrimal punctum		$57.04	9/1/2010	12/31/2078	
CPT	68500	excision lacrimal gland xcpt tumor total		$430.85	9/1/2010	12/31/2078	
CPT	68505	excision lacrimal gland xcpt tumor prtl		$432.42	9/1/2010	12/31/2078	
CPT	68520	excision lacrimal sac		$302.60	9/1/2010	12/31/2078	
CPT	68530	rmvl fb/dacryolith lacrimal passages		$205.05	9/1/2010	12/31/2078	
CPT	68540	exc lacrimal gland tumor frontal approach		$406.56	9/1/2010	12/31/2078	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	68550	exc lacrimal gland tumor w/osteotomy		$496.36	9/1/2010	12/31/2078	
CPT	68700	plastic repair canaliculi		$261.49	9/1/2010	12/31/2078	
CPT	68705	correction everted punctum cautery		$117.87	9/1/2010	12/31/2078	
CPT	68720	dacryocstorhinostomy		$334.12	9/1/2010	12/31/2078	
CPT	68745	conjunctivorhinostomy w/o tube		$334.53	9/1/2010	12/31/2078	
CPT	68750	conjunctivorhinostomy insj tube/stent		$344.99	9/1/2010	12/31/2078	
CPT	68760	clsr lacrimal punctum thermocaut lig/laser		$99.75	9/1/2010	12/31/2078	
CPT	68761	clsr lacrimal punctum plug each		$69.15	9/1/2010	12/31/2078	
CPT	68770	closure lacrimal fistula spx		$244.81	9/1/2010	12/31/2078	
CPT	68801	dilation lacrimal punctum w/wo irrgation		$54.51	1/1/2013	12/31/2078	
CPT	68811	probe nasolacrimal duct w/wo irrig req gen anes		$92.46	9/1/2010	12/31/2078	
CPT	68815	probe nasolacrimal duct w/wo irrg insj tube/stnt		$289.25	9/1/2010	12/31/2078	
CPT	68899	unlisted procedure lacrimal system		$430.85	9/1/2010	12/31/2078	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	83861	microfluidic analysis tear osmolarity		$3.25	1/1/2014	12/31/2014	
CPT	83861	microfluidic analysis tear osmolarity		$12.32	1/1/2015	12/31/2078	
CPT	92002	ophth medical xm&eval intermediate new pt		$37.33	9/1/2010	12/31/2078	
CPT	92004	ophth medical xm&eval compre new pt 1/> vst		$66.61	9/1/2010	12/31/2078	
CPT	92012	ophth medical xm&eval intermediate estab pt		$37.28	9/1/2010	12/31/2078	
CPT	92014	ophth medical xm&eval comprhnsv estab pt 1/>		$54.27	9/1/2010	12/31/2078	
CPT	92015	determination refractive state		$5.00	9/1/2010	12/31/2078	
CPT	92018	ophth xm&eval anes w/wo manj globe compl		$70.41	9/1/2010	12/31/2078	
CPT	92019	ophth xm&eval anes w/wo manj globe lmtd		$38.19	9/1/2010	12/31/2078	
CPT	92020	gonioscopy separate procedure		$13.69	9/1/2010	12/31/2078	
CPT	92025	computerized corneal topography uni/bi		$16.41	9/1/2010	12/31/2078	
CPT	92060	sensormotor xm w/mlt meas ocular devij w/i&r spx		$28.05	9/1/2010	12/31/2078	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	92065	orthoptic &/pleoptic training w/medical directj		$20.70	9/1/2010	12/31/2078	
CPT	92070	fitg c-lens tx disease supply lens		$57.65	9/1/2010	12/31/2011	
CPT	92071	fit contact lens tx ocular surface disease		$35.61	1/1/2012	12/31/2014	
CPT	92071	fit contact lens tx ocular surface disease		$18.87	1/1/2015	12/31/2078	
CPT	92072	fitting contact lens for mngt of keratoconus		$113.59	1/1/2012	12/31/2014	
CPT	92072	fitting contact lens for mngt of keratoconus		$60.20	1/1/2015	12/31/2078	
CPT	92081	visual field xm uni/bi w/interpretj limited exam		$25.50	9/1/2010	12/31/2078	
CPT	92082	visual field xm uni/bi w/interp intermed exam		$33.18	9/1/2010	12/31/2078	
CPT	92083	visual field xm uni/bi w/interp extended exam		$38.13	9/1/2010	12/31/2078	
CPT	92100	serial tonometry spx w/mlt meas intraocular pres		$43.08	9/1/2010	12/31/2078	
CPT	92120	tngrphy i&r rec indentaj tnmtr sucj		$35.82	9/1/2010	12/31/2011	
CPT	92130	tngrphy water provocation		$39.61	9/1/2010	12/31/2011	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	92132	cmptr ophthalmic dx img ant segmt w/i&r uni/bi		$18.32	1/1/2011	12/31/2078	
CPT	92133	computerized ophthalmic imaging optic nerve		$22.56	1/1/2011	12/31/2078	
CPT	92134	computerized ophthalmic imaging retina		$22.56	1/1/2011	12/31/2078	
CPT	92135	scanning ophthalmic imaging posterior sgm uni		$22.19	9/1/2010	12/31/2010	
CPT	92136	oph bmtry prtl coher intrfrmtry io lens pwr cal		$41.63	9/1/2010	12/31/2078	
CPT	92225	ophthalmoscpy extended retinal drawing i&r 1st		$17.00	9/1/2010	12/31/2078	
CPT	92226	ophthalmoscpy extended retinal drawing i&r sbs		$17.00	9/1/2010	12/31/2078	
CPT	92235	fluorescein angrph w/multiframe i&r uni/bi		$64.37	9/1/2010	12/31/2078	
CPT	92250	fundus photography w/interpretation & report		$36.69	9/1/2010	12/31/2078	
CPT	92275	electroretinograpy w/interpretation & report		$55.92	1/1/2013	12/31/2078	
CPT	92285	xtrnl ocular photog w/i&r docmt medical progre		$22.13	9/1/2010	12/31/2014	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	92285	xtrnl ocular photog w/i&r docmt medical progre		$18.99	1/1/2015	12/31/2078	
CPT	92310	rx&fitg c-lens supvj crnl lens ou xcpt aphk		$225.00	9/1/2010	6/30/2016	
CPT	92310	rx&fitg c-lens supvj crnl lens ou xcpt aphk		$85.60	7/1/2016	12/31/2078	
CPT	92311	rx&fitg contact corneal lens aphakia 1 eye		$76.77	9/1/2010	12/31/2078	
CPT	92312	rx&fitg contact corneal lens aphakia both eyes		$85.92	9/1/2010	12/31/2078	
CPT	92313	rx&fitg corneoscleral lens		$73.26	9/1/2010	12/31/2078	
CPT	92314	rx&ftg contact corneal lens eyes xcpt aphakia		$225.00	9/1/2010	6/30/2016	
CPT	92314	rx&ftg contact corneal lens eyes xcpt aphakia		$72.70	7/1/2016	12/31/2078	
CPT	92315	rx contact corneal lens aphakia 1 eye		$52.02	9/1/2010	12/31/2078	
CPT	92316	rx contact corneal lens aphakia both eyes		$66.28	9/1/2010	12/31/2078	
CPT	92317	rx contact corneoscleral lens		$53.37	9/1/2010	12/31/2078	
CPT	92325	modificaj contact lenx spx supvj adaptation		$13.50	9/1/2010	12/31/2078	

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Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	92326	replacement contact lens		$41.23	9/1/2010	12/31/2014	
CPT	92326	replacement contact lens		$32.40	1/1/2015	12/31/2078	
CPT	92340	fitting spectacles xcpt aphakia monofocal		$14.40	9/1/2010	12/31/2078	
CPT	92341	fitting spectacles xcpt aphakia bifocal		$16.00	9/1/2010	12/31/2078	
CPT	92342	fitting spectacles xcpt aphakia multifocal		$16.00	9/1/2010	12/31/2078	
CPT	92352	fitting spectacle prosth aphakia monofocal		$19.83	9/1/2010	12/31/2078	
CPT	92353	fitting spectacle prosth aphakia multifocal		$23.46	9/1/2010	12/31/2078	
CPT	92354	fitting spectacle mounted lw vis aid 1 elmnt		$153.83	9/1/2010	12/31/2078	
CPT	92355	fitting spectacle mounted lw vis aid tlscp		$74.71	9/1/2010	12/31/2078	
CPT	92358	prosthesis service aphakia temporary		$18.43	9/1/2010	12/31/2078	
CPT	92370	rpr&refitg spectacles except aphakia		$20.00	9/1/2010	12/31/2078	
CPT	92371	rpr&refitg spectacle prosthesis aphakia		$10.94	9/1/2010	12/31/2078	
CPT	92499	unlisted ophthalmological service/procedure		$15.52	9/1/2010	12/31/2078	

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Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	95930	visual ep tstg cns checkerboard/flash		$47.82	1/1/2013	12/31/2078	
CPT	99058	svc prv emer basis in office disrupting svcs		$10.00	9/1/2010	12/31/2078	
CPT	99201	office outpatient new 10 minutes		$21.92	9/1/2010	12/31/2078	
CPT	99202	office outpatient new 20 minutes		$33.86	9/1/2010	12/31/2078	
CPT	99203	office outpatient new 30 minutes		$49.64	9/1/2010	12/31/2078	
CPT	99204	office outpatient new 45 minutes		$76.31	9/1/2010	12/31/2078	
CPT	99205	office outpatient new 60 minutes		$96.04	9/1/2010	12/31/2078	
CPT	99211	office outpatient visit 5 minutes		$13.17	9/1/2010	12/31/2078	
CPT	99212	office outpatient visit 10 minutes		$20.20	9/1/2010	12/31/2078	
CPT	99213	office outpatient visit 15 minutes		$32.91	9/1/2010	12/31/2078	
CPT	99214	office outpatient visit 25 minutes		$49.51	9/1/2010	12/31/2078	
CPT	99215	office outpatient visit 40 minutes		$67.01	9/1/2010	12/31/2078	
CPT	V2500	Contact lens, PMMA, spherical, per lens		$73.31	9/1/2010	12/31/2078	
CPT	V2501	Contact lens PMMA, toric/prism ballast, /lens		$111.67	9/1/2010	12/31/2078	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	V2502	Contact lens, PMMA, bifocal, per lens		$137.57	9/1/2010	12/31/2078	
CPT	V2503	Contact lens, PMMA, color vision deficiency		$126.70	9/1/2010	12/31/2078	
CPT	V2510	Contact lens, gas permeable, spherical, /lens		$100.08	9/1/2010	12/31/2078	
CPT	V2511	Contact lens, toric prism ballast, per lens		$143.80	9/1/2010	12/31/2078	
CPT	V2512	Contact lens, gas permeable, bifocal,per lens		$169.92	9/1/2010	12/31/2078	
CPT	V2513	Contact lens, extended wear, per lens		$142.65	9/1/2010	12/31/2078	
CPT	V2520	Contact lens, hydrophilic spherical, per lens		$94.07	9/1/2010	12/31/2078	
CPT	V2521	Contact lens, hydrophilic toric prism ballast		$163.78	9/1/2010	12/31/2078	
CPT	V2522	Contact lens, hydrophilic bifocal, per lens		$159.38	9/1/2010	12/31/2078	
CPT	V2523	Contact lens, hydrophilic extend wear, /lens		$135.82	9/1/2010	12/31/2078	
CPT	V2530	Contact lens scleral gas impermeable per lens		$201.17	9/1/2010	12/31/2078	
CPT	V2599	Contact lens/es, other type		$300.00	9/1/2010	12/31/2078	

Category	Service Code	Code Description	Modifier	Fee Amount	Fee Effective Date	Fee Termination Date	Place of Service
CPT	V2600	Hand held low vision aids/other nonspectacle		$136.00	9/1/2010	12/31/2078	
CPT	V2610	Single lens spectacle mounted low vision aids		$500.00	9/1/2010	12/31/2078	
CPT	V2615	Telescopic/other compound lens system		$150.00	9/1/2010	12/31/2078	
CPT	V2623	Plastic eye prosthesis, custom		$809.66	9/1/2010	12/31/2078	
CPT	V2624	Polishing/resurfacing or ocular prosthesis		$54.91	9/1/2010	12/31/2078	
CPT	V2625	Enlargement of ocular prosthesis		$333.85	9/1/2010	12/31/2078	
CPT	V2626	Reduction of ocular prosthesis		$179.96	9/1/2010	12/31/2078	
CPT	V2627	Scleral cover shell		$1164.24	9/1/2010	12/31/2078	
CPT	V2628	Fabrication & fitting of ocular conformer		$274.43	9/1/2010	12/31/2078	
CPT	V2629	Prosthetic eye, other type		$1200.00	9/1/2010	12/31/2078	
CPT	V2630	Anterior chamber intraocular lens		$350.00	9/1/2010	12/31/2078	
CPT	V2631	Iris supported intraocular lens		$350.00	9/1/2010	12/31/2078	
CPT	V2632	Posterior chamber intraocular lens		$350.00	9/1/2010	12/31/2078	