



Medicare Fee Schedule

Effective January 1, 2022 – December 31, 2022

Yearly Deductible is \$233.00

In order to see patients under Medicare, a physician must be a “participant” with Medicare, which requires registration with Medicare. Chiropractors cannot “Opt Out” of Medicare. They are either a participant with Medicare or they cannot see a patient.

Once a Chiropractor is a participant with Medicare, he/she can either accept assignment on all claims at the participating fee amount (PAR) or can elect to be non-par. Chiropractors have a choice of being non-participating Physicians where he/she can charge the patient up to the maximum allowable limiting charge or can accept assignment on a claim-by-claim basis.

A Participating Physician is a doctor that agrees to accept assignment on all traditional Medicare claims. Medicare pays 80% of the Allowable Charge and the patient pays 20%. If the patient has supplemental Medicare coverage, the supplemental insurer will pay the 20% of the allowable charge.

A non-participating Physician is a Physician that is a participant with Medicare but does not accept assignment on all claims. The non-participating Physician can charge the non-par fee, or they can charge up to the limiting charge which is 115% of the non-par fee. Collecting amounts in excess of the limiting charge can result in steep fines of \$10,000 per violation, plus triple violation the charge amount.

Par Fee= The Medicare Allowable amount for Participating Providers. Participating Providers agree to accept this amount as payment in full for this service. Medicare pays 80 percent of this amount, and the patient pays 20 percent, which is collected from the patient or the Medicare Supplementary Policy. A Non-Participating Provider with Medicare can accept assignment on an individual claim and will be paid from the Participating Fee Schedule.

Non-Par Fee= The Medicare allowable amount for non-participating providers (who do not accept assignment) on a claim. The non-par provider does accept payment from the patient and can charge the non-par fee schedule amount, and the patient does pay this at the time of service.

Limiting Charge= The highest fee a non-par provider can charge when not accepting assignment. The patient pays this full amount for the covered service. The provider bills Medicare, and Medicare reimburses the patient at **80% of the non-par fee**.

The Medicare Fee Schedule includes facility fees, which are fees charged if the services are delivered in a facility setting such as a hospital or other facilities. The Fees are listed based on counties. If a county is not listed, then use “All Other Counties”.

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Northern California

California, Area 05 (San Francisco County), 2022 Medicare Part B Fee Schedule (Effective January 1, 2022)
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- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.

Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$32.94	\$31.29	\$35.98
	98941		\$46.86	\$44.52	\$51.20
	98942		\$60.93	\$57.88	\$66.56

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$25.12	\$23.86	\$27.44
#	98941		\$39.04	\$37.09	\$42.65
#	98942		\$52.65	\$50.02	\$57.52

California, Area 06 (San Mateo County), 2022 Medicare Part B Fee Schedule (Effective January 1, 2022)
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- # - These amounts apply when service is performed in a facility setting.
 - C - The payment for the technical component is capped at the OPPS amount.
- Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$32.94	\$31.29	\$35.98
	98941		\$46.86	\$44.52	\$51.20
	98942		\$60.93	\$57.88	\$66.56

These amounts apply when service is performed in a facility setting such as a hospital or surgical center.

#	98940		\$25.12	\$23.86	\$27.44
#	98941		\$39.04	\$37.09	\$42.65
#	98942		\$52.65	\$50.02	\$57.52

**California, Area 07 (Alameda and Contra Costa Counties), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$32.94	\$31.29	\$35.98
	98941		\$46.86	\$44.52	\$51.20
	98942		\$60.93	\$57.88	\$66.56

These amounts apply when service is performed in a facility setting Such as a hospital or surgical center.

#	98940		\$25.12	\$23.86	\$27.44
#	98941		\$39.04	\$37.09	\$42.65
#	98942		\$52.65	\$50.02	\$57.52

**California, Area 09 (Santa Clara County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$33.86	\$32.17	\$37.00
	98941		\$48.13	\$45.72	\$52.58
	98942		\$62.54	\$59.41	\$68.32

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$25.73	\$24.44	\$28.11
#	98941		\$39.99	\$37.99	\$43.69
#	98942		\$53.93	\$51.23	\$58.91

**California, Area 51 (Napa County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$31.15	\$29.59	\$34.03
	98941		\$44.40	\$42.18	\$48.51
	98942		\$57.83	\$54.94	\$63.18

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.97	\$22.77	\$26.19
#	98941		\$37.23	\$35.37	\$39.48
#	98942		\$50.23	\$47.72	\$54.88

**California, Area 52 (Marin County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$32.96	\$31.31	\$36.01
	98941		\$46.87	\$44.53	\$51.21
	98942		\$60.96	\$57.91	\$66.60

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$25.14	\$23.88	\$27.46
#	98941		\$39.05	\$37.10	\$42.67
#	98942		\$52.69	\$50.06	\$57.57

**California, Area 53 (Solano County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$31.15	\$29.59	\$34.03
	98941		\$44.40	\$42.18	\$48.51
	98942		\$57.83	\$54.94	\$63.18

These amounts apply when service is performed in a facility setting such as a hospital, or surgery center.

#	98940		\$23.97	\$22.77	\$26.19
#	98941		\$37.23	\$35.37	\$40.68
#	98942		\$50.23	\$47.72	\$54.88

**California, Area 54 (Kern County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.27	\$27.81	\$31.98
	98941		\$41.92	\$39.82	\$45.79
	98942		\$54.82	\$52.08	\$59.89

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.01	\$21.86	\$25.14
#	98941		\$35.66	\$33.88	\$38.96
#	98942		\$48.19	\$45.78	\$52.65

**California, Area 55 (Butte County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 56 (Fresno County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 57 (Kings County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 58 (Madera County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 59 Merced County, 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 60 (Stanislaus County, 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 61 (Shasta County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 62 Riverside and (Riverside and San Bernardino counties), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.21	\$27.75	\$31.91
	98941		\$41.78	\$39.69	\$45.64
	98942		\$54.68	\$51.95	\$59.74

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.94	\$21.79	\$25.06
#	98941		\$35.52	\$33.74	\$38.80
#	98942		\$48.05	\$45.65	\$52.50

**California, Area 63 (Placer and Sacramento Counties), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.48	\$28.96	\$33.30
	98941		\$43.60	\$41.42	\$47.63
	98942		\$56.93	\$54.08	\$62.19

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.81	\$22.62	\$26.01
#	98941		\$36.94	\$35.09	\$40.35
#	98942		\$49.88	\$47.39	\$54.40

**California, Area 64 (Monterey County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.48	\$28.96	\$33.30
	98941		\$43.60	\$41.42	\$47.63
	98942		\$56.93	\$54.08	\$62.19

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.81	\$22.62	\$26.01
#	98941		\$36.94	\$35.09	\$40.35
#	98942		\$49.88	\$47.39	\$54.50

**California, Area 65 (San Benito County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$33.93	\$32.23	\$37.06
	98941		\$48.19	\$45.78	\$52.65
	98942		\$62.67	\$59.54	\$68.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$25.79	\$24.50	\$28.18
#	98941		\$40.06	\$38.06	\$43.77
#	98942		\$54.05	\$51.35	\$59.05

**California, Area 66 (Santa Cruz County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$31.02	\$29.47	\$33.89
	98941		\$44.23	\$42.02	\$48.32
	98942		\$57.65	\$54.77	\$62.99

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.93	\$22.73	\$26.14
#	98941		\$37.14	\$35.28	\$40.57
#	98942		\$50.14	\$47.63	\$54.77

**California, Area 67 (Sonoma County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.69	\$29.16	\$33.53
	98941		\$43.80	\$41.61	\$47.85
	98942		\$57.13	\$54.27	\$62.41

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.77	\$22.58	\$25.97
#	98941		\$36.88	\$35.04	\$40.30
#	98942		\$49.79	\$47.30	\$54.40

**California, Area 68 (San Joaquin County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 69 (Tulare County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

**California, Area 70 (Sutter County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22

Southern California

California, Area 17 (Ventura County), 2022 Medicare Part B Fee Schedule (Effective January 1, 2022)

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.47	\$28.95	\$33.29
	98941		\$43.44	\$41.27	\$47.46
	98942		\$56.65	\$53.82	\$61.89

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.54	\$22.36	\$25.71
#	98941		\$36.50	\$34.68	\$39.88
#	98942		\$49.31	\$46.84	\$53.87

California, Area 18 (Los Angeles County) 2022 Medicare Part B Fee Schedule (Effective January 1, 2022)

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.77	\$29.23	\$33.61
	98941		\$43.90	\$41.71	\$47.97
	98942		\$57.30	\$54.44	\$62.61

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.86	\$22.67	\$26.07
#	98941		\$36.99	\$35.14	\$40.41
#	98942		\$49.98	\$47.48	\$54.60

**California, Area 26, (Orange County) 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.77	\$29.23	\$33.61
	98941		\$43.90	\$41.71	\$47.97
	98942		\$57.30	\$54.44	\$62.61

These amounts apply when service is performed in a facility setting such as a hospital or surgical center.

#	98940		\$23.66	\$22.67	\$26.07
#	98941		\$36.99	\$47.48	\$54.60
#	98942		\$49.98	\$47.48	\$54.60

**California, Area 71 (Imperial County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.45	\$51.73	\$59.49

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.83	\$21.69	\$24.94
#	98941		\$35.40	\$33.63	\$38.67
#	98942		\$47.82	\$45.43	\$52.24

**California, Area 72 (San Diego County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.37	\$28.85	\$33.18
	98941		\$43.36	\$41.19	\$47.37
	98942		\$56.56	\$53.73	\$61.79

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.55	\$22.37	\$25.73
#	98941		\$36.53	\$34.70	\$39.91
#	98942		\$49.33	\$46.86	\$53.89

**California, Area 73 (San Luis Obispo County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.37	\$27.90	\$32.09
	98941		\$42.02	\$39.92	\$45.91
	98942		\$54.88	\$52.14	\$59.96

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.96	\$21.81	\$25.08
#	98941		\$35.62	\$33.84	\$38.92
#	98942		\$48.10	\$45.70	\$52.56

**California, Area 74 (Santa Barbara County), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$30.60	\$29.07	\$33.43
	98941		\$43.68	\$41.50	\$47.73
	98942		\$56.95	\$54.10	\$62.22

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$23.69	\$22.51	\$25.89
#	98941		\$36.76	\$34.92	\$40.16
#	98942		\$49.64	\$47.16	\$54.23

Counties Not Listed Above

**California, Area 75 (All Other Counties), 2022 Medicare Part B Fee Schedule
(Effective January 1, 2022)**

- # - These amounts apply when service is performed in a facility setting.
- C - The payment for the technical component is capped at the OPPS amount.
Limiting Charge applies to unassigned claims by non-participating providers.

Notes	Procedure Code	Modifier	Par Fee	Nonpar Fee	Limiting Charge
	98940		\$29.09	\$27.64	\$31.79
	98941		\$41.66	\$39.58	\$45.52
	98942		\$54.43	\$51.71	\$59.47

These amounts apply when service is performed in a facility setting such as a hospital or surgery center.

#	98940		\$22.82	\$21.68	\$24.93
#	98941		\$35.39	\$33.62	\$38.66
#	98942		\$47.80	\$45.41	\$52.22