

ANNUAL PHYSICIAN FEE SCHEDULE PAYMENT AMOUNT FILE

CPT Code 94016

Review Patient Spirometry

30 day period of time; physician review and interpretation only

Calendar Year 2023

STATE/REGION CODE	STATE	STATE/REGION	NON-FACILITY*	FACILITY**
0210201	AK	ALASKA	32.73	32.73
1011200	AL	ALABAMA	22.91	22.91
0710213	AR	ARKANSAS	22.59	22.59
0310200	AZ	ARIZONA	23.49	23.49
0111254	CA1	BAKERSFIELD	24.54	24.54
0111255	CA1	CHICO	24.36	24.36
0111256	CA1	FRESNO	24.36	24.36
0111257	CA1	HANFORD-CORCORAN	24.36	24.36
0111258	CA1	MADERA	24.36	24.36
0111259	CA1	MERCED	24.36	24.36
0111260	CA1	MODESTO	24.36	24.36
0111251	CA1	NAPA	25.94	25.94
0111207	CA1	OAKLAND/BERKELEY, CALIFORNIA	27.08	27.08
0111261	CA1	REDDING	24.36	24.36
0111275	CA1	REST OF CALIFORNIA	24.36	24.36
0111262	CA1	RIVERSIDE-SANBERNARDINO-ONTARIO	24.58	24.58
0111263	CA1	SACRAMENTO-ROSEVILLE-ARDEN-ARCADE	24.85	24.85
0111264	CA1	SALINAS	25.27	25.27
0111205	CA1	SAN FRANCISCO, CALIFORNIA	27.08	27.08
0111252	CA1	SAN FRANCISCO-OAKLAND-HAYWARD (MARIN CNTY)	27.10	27.10
0111265	CA1	SAN JOSE-SUNNYVALE-SANTA CLARA (SAN BENITO CNTY)	27.64	27.64
0111206	CA1	SAN MATEO, CALIFORNIA	27.08	27.08
0111209	CA1	SANTA CLARA, CALIFORNIA	27.54	27.54
0111266	CA1	SANTA CRUZ-WATSONVILLE	25.29	25.29
0111267	CA1	SANTA ROSA	25.36	25.36
0111268	CA1	STOCKTON-LODI	24.36	24.36
0111253	CA1	VALLEGO-FAIRFIELD	25.92	25.92
0111269	CA1	VISALIA-PORTERVILLE	24.36	24.36
0111270	CA1	YUBA CITY	24.36	24.36
0118226	CA2	ANAHEIM/SANTA ANA, CALIFORNIA	25.50	25.50
0118271	CA2	EL CENTRO	24.37	24.37
0118218	CA2	LOS ANGELES, CALIFORNIA	25.50	25.50
0118272	CA2	SAN DIEGO - CARLSBAD	25.13	25.13
0118273	CA2	SAN LUIS OBISPO-PASO ROBLES-ARROYO GRANDE	24.55	24.55
0118274	CA2	SANTA MARIA-SANTA BARBARA	25.10	25.10
0118217	CA2	VENTURA, CALIFORNIA	25.14	25.14
0411201	CO	COLORADO	24.05	24.05
1310200	CT	CONNECTICUT	24.97	24.97
1220201	DC	DC + MARYLAND/VIRGINIA SUBURBS	26.19	26.19
1210201	DE	DELAWARE	23.92	23.92
0910203	FL	FORT LAUDERDALE, FLORIDA	24.34	24.34
0910204	FL	MIAMI, FLORIDA	24.99	24.99
0910299	FL	REST OF FLORIDA	23.74	23.74
1021201	GA	ATLANTA, GEORGIA	23.80	23.80
1021299	GA	REST OF GEORGIA	23.11	23.11
0121201	HI	HAWAII/GUAM	24.47	24.47
0510200	IA	IOWA	22.90	22.90
0220200	ID	IDAHO	22.80	22.80
0610216	IL	CHICAGO, ILLINOIS	24.78	24.78
0610212	IL	EAST ST. LOUIS, ILLINOIS	23.87	23.87
0610299	IL	REST OF ILLINOIS	23.47	23.47
0610215	IL	SUBURBAN CHICAGO, ILLINOIS	24.60	24.60
0810200	IN	INDIANA	22.93	22.93
0520200	KS	KANSAS	22.92	22.92
1510200	KY	KENTUCKY	22.96	22.96
0720201	LA	NEW ORLEANS, LOUISIANA	23.62	23.62
0720299	LA	REST OF LOUISIANA	23.16	23.16
1421201	MA	METROPOLITAN BOSTON, MASSACHUSETTS	25.68	25.68
1421299	MA	REST OF MASSACHUSETTS	24.43	24.43
1230201	MD	BALTIMORE/SURROUNDING COUNTIES, MARYLAND	24.94	24.94
1230299	MD	REST OF MARYLAND	24.17	24.17

ANNUAL PHYSICIAN FEE SCHEDULE PAYMENT AMOUNT FILE

CPT Code 94016

Review Patient Spirometry

30 day period of time; physician review and interpretation only

Calendar Year 2023

STATE/REGION CODE	STATE	STATE/REGION	NON-FACILITY*	FACILITY**
1411299	ME	REST OF MAINE	23.01	23.01
1411203	ME	SOUTHERN MAINE	23.60	23.60
0820201	MI	DETROIT, MI	24.20	24.20
0820299	MI	REST OF MICHIGAN	23.32	23.32
0620200	MN	MINNESOTA	23.47	23.47
0530202	MO	METROPOLITAN KANSAS, MISSOURI	23.48	23.48
0530201	MO	METROPOLITAN ST. LOUIS, MISSOURI	23.55	23.55
0530299	MO	REST OF MISSOURI	22.88	22.88
0730200	MS	MISSISSIPPI	22.71	22.71
0320201	MT	MONTANA	23.79	23.79
1150200	NC	NORTH CAROLINA	23.20	23.20
0330201	ND	NORTH DAKOTA	23.46	23.46
0540200	NE	NEBRASKA	22.80	22.80
1431240	NH	NEW HAMPSHIRE	23.96	23.96
1240201	NJ	NORTHERN, NEW JERSEY	25.87	25.87
1240299	NJ	REST OF NEW JERSEY	25.22	25.22
0421205	NM	NEW MEXICO	23.33	23.33
0131200	NV	NEVADA	23.87	23.87
1328299	NY1	REST OF NEW YORK	23.35	23.35
1320201	NY2	MANHATTAN, NY	26.50	26.50
1320202	NY2	NYC SUBURBS/LONG ISLAND, NEW YORK	26.89	26.89
1320203	NY2	POUGHKEEPSIE/NORTH NYC SUBURBS	25.35	25.35
1329204	NY3	QUEENS, NEW YORK	26.82	26.82
1520200	OH	OHIO	23.32	23.32
0431200	OK	OKLAHOMA	22.99	22.99
0230201	OR	PORTLAND, OREGON	24.35	24.35
0230299	OR	REST OR OREGON	23.33	23.33
1250201	PA	METROPOLITAN PHILADELPHIA, PENNSYLVANIA	24.73	24.73
1250299	PA	REST OF PENNSYLVANIA	23.34	23.34
0920220	PRV	PUERTO RICO	23.80	23.80
0920250	PRV	VIRGIN ISLANDS	23.80	23.80
1441201	RI	RHODE ISLAND	24.40	24.40
1120201	SC	SOUTH CAROLINA	23.09	23.09
0340202	SD	SOUTH DAKOTA	23.38	23.38
1031235	TN	TENNESSEE	22.85	22.85
0441231	TX	AUSTIN, TEXAS	23.94	23.94
0441220	TX	BEAUMONT, TEXAS	23.19	23.19
0441209	TX	BRAZORIA, TEXAS	24.07	24.07
0441211	TX	DALLAS, TEXAS	24.01	24.01
0441228	TX	FORT WORTH, TEXAS	23.82	23.82
0441215	TX	GALVESTON, TEXAS	24.08	24.08
0441218	TX	HOUSTON, TEXAS	24.40	24.40
0441299	TX	REST OF TEXAS	23.35	23.35
0350209	UT	UTAH	23.27	23.27
1130200	VA	VIRGINIA	23.63	23.63
1451250	VT	VERMONT	23.48	23.48
0240299	WA	REST OF WASHINGTON	23.87	23.87
0240202	WA	SEATTLE (KING COUNTY) WASHINGTON	25.58	25.58
0630200	WI	WISCONSIN	23.05	23.05
1140216	WV	WEST VIRGINIA	23.15	23.15
0360221	WY	WYOMING	23.66	23.66

* Facility: Includes hospitals (inpatient, outpatient and emergency department), ambulatory surgical centers (ASCs) and skilled nursing facilities (SNFs)

** Non Facility: Includes all other settings

SOURCE: Centers for Medicare and Medicaid Services