Montana Healthcare Programs Hearing Aid Fee Schedule Explanation

Effective July 1, 2019

Definitions:

Modifier:
When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.
For example:
  26 = professional component
  TC = technical component

Description:
Procedure code short description. You must refer to the appropriate official CPT Professional, HCPCS or CDT coding manual for complete definitions to assure correct coding.

Effective
This is the first date of service for which the listed fee is applicable.

Method – Source of Fee Determination:
Note: If a valid, current code is not present, that code may be a non-covered service
  Fee Sched: Medicaid fee; not determined using RBRVS payment schedule
  Medicare: Medicare-prevailing fee.
  MSRP: Manufacturers Suggested Retail Price (MSRP): Equals a percentage of billed charges based on MSRP or the provider acquisition cost (when no MSRP is available)

PA:
Prior Authorization
  Y: Prior authorization is required by this code

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