

Relative Value Unit Fee Schedule Update

The Department has implemented the 2006 relative value units (RVUs) for dates of service on or after January 1, 2006. Based on previous 12 months claims volume, the new relative value units would result in a 0.21% fee decrease. To keep RVU-reimbursed provider expenditures cost neutral, we have adjusted the conversion factor to **\$34.09**.

Based on the changes to the relative value units, some fees will increase while others may stay the same or decrease. Following are some examples of frequently used codes we have calculated the Medicaid fees for:

		as of 07/01/2005		as of 01/01/2006	
		Conversion Factor:		\$34.09	
		\$34.02			
Procedure Code	Description	RVU	Fee	RVU	Fee
43235	Uppr GI endoscopy, diagnosis	7.00	\$238.14	6.96	\$237.27
59409	Obstetrical care	20.01	\$680.74	19.99	\$681.46
59515	Cesarean delivery	26.61	\$905.27	26.57	\$905.77
69210	Remove impacted ear wax	1.19	\$40.48	1.18	\$40.23
71020	Chest x-ray	0.85	\$28.92	0.84	\$28.64
90806	Individual Psychotherapy	2.50	\$85.05	2.49	\$84.88
99212	Office/outpatient visit, est	0.94	\$31.98	0.93	\$31.70
99231	Subsequent hospital care	0.86	\$29.26	0.86	\$29.32
99243	Office consultation	3.01	\$102.40	2.99	\$101.93

Laboratory Fee Schedule Update

The Department has revised our Laboratory Fee Schedule using the 2006 Medicare Clinical Diagnostic Fee Schedule amounts for dates of service on or after January 1, 2006.